



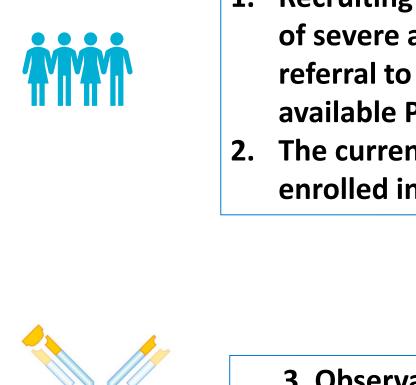
Efficacy assessment and key predictors of therapeutic response to biological treatment of severe asthma.

Piotr Damiański¹, Maciej Kupczyk¹ Clinical Department of Internal Medicine, Asthma and Allergy, Medical University of Lodz, Lodz, Poland

INTRODUCTION

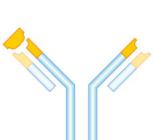
- Severe asthma is a heterogeneous disease with distinct clinical phenotypes and different molecular immune mechanisms underlying inflammation. This is one of the reasons for the variable therapeutic effect of biological treatment. It also reduces the benefit - risk balance of inhaled corticosteroids
- The choice of the specific biological therapy depends on the phenotype and endotype of the disease, which results from the selective blocking of inflammatory pathways by these drugs. Even though several biomarkers have been explored in asthmatic patients with T2 severe asthma, there is still a gap in their feasibility in clinical practice and there is a lack of data on their ability to predict treatment response.
- Establishing key prognostic factors determining the effectiveness of biological therapy remains a key unmet need in modern personalized medicine.

METHODS



Recruiting and following a real cohort of severe asthma patients eligible for referral to biological therapy under the available Polish therapeutic program.

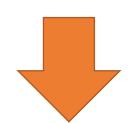
2. The current number of patients enrolled in the study - 6



3. Observation from the beginning of biological treatment and at 24 weeks of treatment



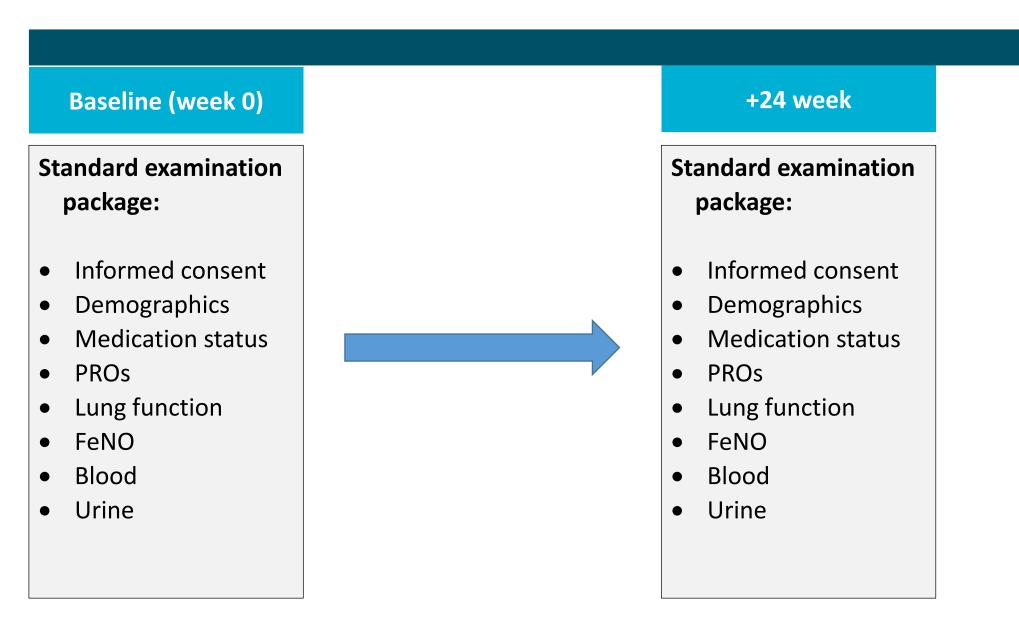
4. Determine responders and nonresponders





5. Identification and characterization of biomarker demographic, clinical and profiles related to response or nonresponse to biological treatment of severe asthma.





The planned study group - 30 people each qualified for biological treatment with mepolizumab, and benralizumab. The collection of research material will take 2.5 years, another year is envisaged for the preparation of results and writing publications.

Current research reports

Clinical profiles of patients referred for biological therapy and major limitations in the qualification paths in a specialist asthma centre

Piotr Damiański¹, Dorota Podolska¹, Piotr Kuna¹, Maciej Kupczyk^{1,2}

¹Clinical Department of Internal Medicine, Asthma and Allergy, Medical University of Lodz, Lodz, Poland

²Center for Allergy Research, Karolinska Institutet, Stockholm, Sweden

Adv Dermatol Allergol 2023; XL (1): 93-101 DOI: https://doi.org/10.5114/ada.2022.124722

Definition of disease remission

EOS < 300 cells/µL No need for oral corticosteroids Zero exacerbations requiring OCS and hospitalizations ACQ <1,5 FEV1 improvement

≥100 mL.

Disease remission in patients with severe asthma after 2

years of treatment with mepolizumab (n=47)

ERS EUROPEAN RESPIRATORY SOCIETY

