SELECTION CRITERIA FOR PERSONALIZED TREATMENT IN SEVERE ASTHMA

Start with non-invasive testing

(allergy testing, IgE level, blood eosinophil count and FeNO level)

• If poor response to therapy continues, consider induced sputum differential for eosinophil and neutrophil counts and/or bronchoscopy with endobronchial biopsy and BAL

Non-Type 2 Endotype

Neutrophililic airway inflammation or Paucigranulocytic (non-inflammatory)

Biomarkers

No T2 biomarkers

- Blood eosinophil <150 μL AND
- FeNO < 20 ppb AND
- Sputum or BAL eosinophil < 2% **OR**

If sputum BAL neutrophils also < 40-60% = pauciinflammatory

Associated Phenotypes

- Obestiv
- Smoking History
- Infections
- Lack of response to corticosteroids

Treatment

- Weight loss
- Bariatric surgery
- Macrolide antibiotics
- Bronchial Thermoplasty
- Secretion clearance
- Pulmonary rehabilitation
- Possible Anti-TSLP or other non-experimental therapies such as Anti-IL-6 or Anti-IL-17

Type 2 Endotype

IL-4, IL-5, IL-13 or IgE medicated inflammation with high eosinophils or FeNO*

*Fractional nitric oxide concentration in exhaled breath.

Biomarkers

- Blood eosinophils > 150 μL
- FeNO > 20 ppb
- Sputum or BAL eosinophils > 2%
- Elevated IgE

Associated Phenotypes

- Early age onset
- History of allergies
- Chronic Rhinosinusitis/Nasal Polyps

Patient-centered consideration for choosing a biologic:

- 1. Frequency of administration 2 vs 4 vs 8 weeks
- 2. Location of administration Home vs. Office
- 3. Insurance and co-payment
- 4. Other comorbidities
- 5. Pregnancy*

*Only omalizumab is assigned to pregnancy category B by the FDA

Type 2 patients with:	Select Add-on Biologic Therapy	
Allergic Eosinophilic Asthma	Anti-lgE Anti-IL-5 Anti-IL-5Rα Anti IL-4/13	Omalizumab Mepolizumab, Reslizumab Benralizumab Dupilumab
Allergic Noneosinophilic Asthma	Anti-lgE Anti IL-4/13	Omalizumab Dupilumab
Eosinophilic Asthma who: • Are nonallergic OR • Do not respond to anti-IgE treatment OR • Are out of dosing range for anti-IgE treatment	Anti-IL-5 Anti-IL-5Ra Anti IL-4/13	Mepolizumab, Reslizumab Benralizumab Dupilumab
OCS Dependence	Anti-IL-4/13 Anti-IL-5 Anti-IL-5Ra *but other Anti- have shown eff	Dupilumab Mepolizumab* Benralizumab* IL-5 and Anti-IL-5Rα ficacy

Considerations for Related Type 2 Phenotypes

Anti-IL-4/13 Dupilumab

Anti-IL-4/13 Dupilumab*

Omalizumab

Anti-laE

Atopic Dematitis

• Chronic Idiopathic Urticaria

Chronic Rhinosinusitis

and Nasal Polyps