







## Unmet needs remain in asthma management despite recent advances<sup>1-4</sup>



Asthma is **heterogeneous:**while many have T2 disease,<sup>1</sup>
a **sizeable group has**non-T2 disease<sup>2</sup>

Many patients fail to achieve control with high-dose ICS and additional controllers, requiring repeated bursts of SCS<sup>3</sup>

Despite treatment with standard-of-care medications, ~60% of patients with severe asthma remain suboptimally controlled<sup>4</sup>

# Many patients with severe asthma have uncontrolled disease<sup>1</sup>



### Uncontrolled asthma can be defined as ≥1 of the following:<sup>2</sup>

Poor symptom control: frequent symptoms or reliever use, activity limited by asthma, night waking due to asthma Frequent exacerbations (≥2/year) requiring OCS or serious exacerbations (≥1/year) requiring hospitalisation

#### Patients with uncontrolled asthma:

- Often have reduced quality of life<sup>3</sup>
- May receive intermittent or chronic OCS, leading to adverse events and comorbidities<sup>4–7</sup>
- Have increased healthcare resource utilisation, especially with greater disease severity<sup>3,7</sup>
- Have an increased risk of mortality<sup>4</sup>

### Among patients with severe asthma:<sup>1</sup>

- ~40% report ≥4 exacerbations in a year\*
- ~57% may have poor asthma symptom control (according to ACT or ACQ)

\*At GINA Step 51

ACQ, Asthma Control Questionnaire; ACT, Asthma Control Test™; GINA, Global Initiative for Asthma; OCS, oral corticosteroid(s)

1. Wang E, et al. Chest 2020;157:790–804; 2. Global Initiative for Asthma (GINA) 2020. Available from: https://ginasthma.org/wp-content/uploads/2020/04/GINA-2020-full-report\_-final\_\_wms.pdf. Accessed 6

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