Helping Patients Understand Biologic Therapy for Poorly Controlled Asthma

FOR THE PHYSICIAN...

- Your patients with moderate or severe asthma who may benefit from a biologic agent may have many questions about these medications
- This guide is designed to help you and your patients in shared decision making regarding the use of biologic therapies for asthma

DISCUSSION TOPICS

1. HELP PATIENTS UNDERSTAND DISEASE SEVERITY

- Patients who experience asthma symptoms despite treatment with high doses of inhaled or oral corticosteroids may have moderate or severe asthma. That is, their asthma is said to be **uncontrolled**.
- The goal of treatment is to minimize the occurrence of asthma attacks or exacerbations.

Personalizing the conversation

- Inquire about the frequency and severity of your patient’s exacerbations, including use of rescue inhalers, oral corticosteroids, and emergency department visits.
- Help your patient understand whether their current treatment regimen is adequately controlling their asthma symptoms (define **controlled**).

2. EXPLAIN THE CONSEQUENCES OF UNCONTROLLED ASTHMA

- Long periods of uncontrolled asthma can lead to a process known as **airway remodeling** in the lungs.
- This remodeling can lead to the development of scar tissue (fibrosis), which does not work like normal lung tissue.
  - Can lead to severe **lung damage** and significant disability.
- Good asthma control may be the best way to prevent airway remodeling and scar tissue formation.

Personalizing the conversation

- Build on previously established definition of **uncontrolled** asthma.
- Discuss the consequences of frequent exacerbations and oral corticosteroid courses.

3. EXACERBATIONS CAN OCCUR DESPITE ADHERENCE TO INHALED MEDICATIONS

- There are different types of asthma.
- In some patients, an allergic reaction can trigger an attack.
- In other patients, particularly those with more severe disease, the body’s immune system overreacts, which can induce an attack when other triggers are present.

Personalizing the conversation

- Discuss your patient’s asthma phenotype, as well as why standard inhaled therapies may not be adequately controlling the asthma symptoms.
### WHAT ARE BIOLOGIC THERAPIES FOR ASTHMA?

- Patients who have uncontrolled moderate-to-severe asthma—those who have frequent exacerbations despite traditional treatments—may benefit from **biologic medications**
- Compared with traditional medications, biologics more precisely target specific immunologic molecules that contribute to **inflammation** in the lungs and to **exacerbations**
- A number of different biologic medications are currently available
  - Each targets signaling factors in the body that are important drivers of certain types of asthma—eg, asthma related to allergies or high levels of particular substances or cells

### WHAT PATIENTS CAN EXPECT FROM BIOLOGIC THERAPY

- Biologics are used to treat a subgroup of patients: those with uncontrolled moderate or severe asthma
- Biologics do not cure asthma
- Biologics are used in addition to a patient’s current treatment regimen
- Biologic therapy, like all asthma medicines, must be taken regularly
  - For asthma, biologic therapy may be dosed every 2 weeks to every 8 weeks
- Biologic treatments for asthma are injectable medications
  - Some biologics can be self-administered at home, whereas others must be administered in a doctor’s office

### ADDITIONAL INFORMATION PATIENTS NEED TO KNOW ABOUT

- Side effects from biologics are typically mild
  - It is important to note that each biologic is unique, with its own safety warnings and precautions
- Some patients begin to feel better in a few weeks while others may not experience benefits for several months
- Patients will be monitored closely after starting biologic therapy and then afterward at regular intervals
  - If a patient does not respond adequately to one biologic therapy, another type of biologic may be beneficial

---

**CLINICAL RESOURCE CENTER**

[ExchangeCME.com/AiringItOutResources]