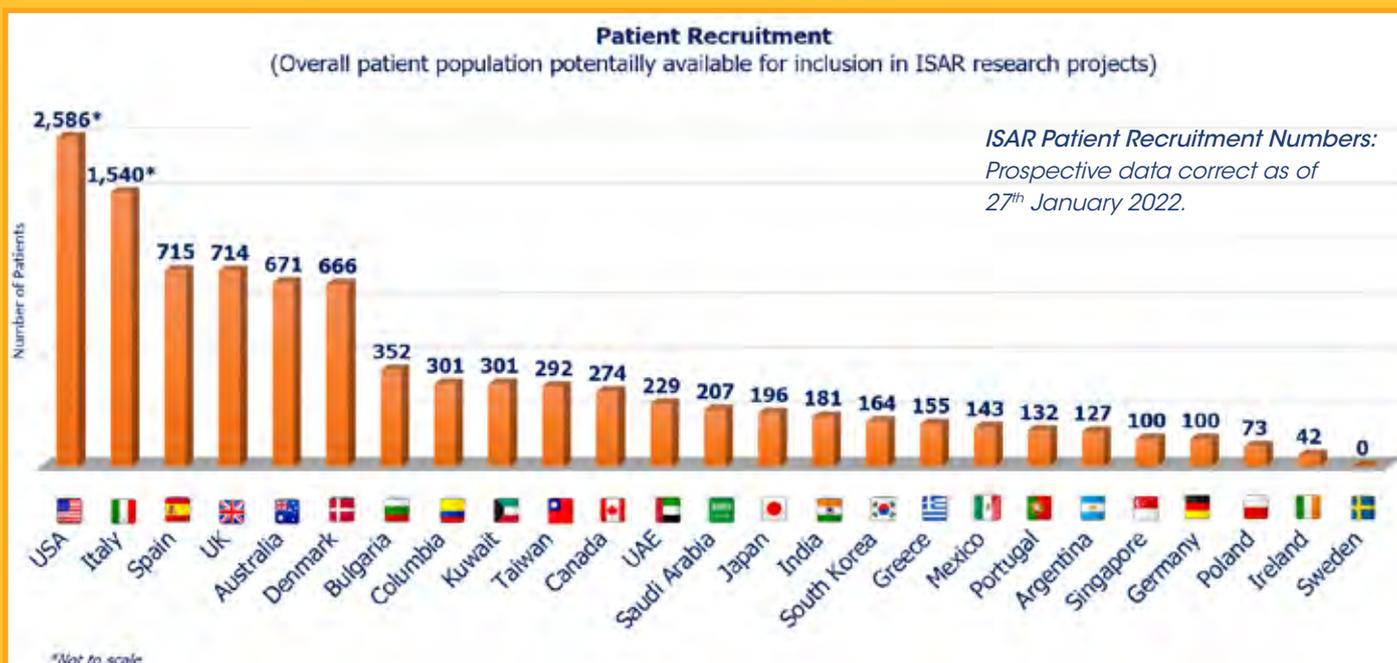


INTERNATIONAL SEVERE ISAR ASTHMA REGISTRY

◆ ISAR Country Updates

The International Severe Asthma Registry (ISAR) has ended its 4th year with data from 12,860 severe asthma patients (including 10,161 patients with prospective data) from our 24 collaborating countries. ISAR is delighted to welcome Poland as our newest collaborator to the registry. Moving into 2022 and our 5th year, our plan is to continue global collaborations with a focus on the sustainability of ISAR, and to seek to welcome additional countries such as Brazil, Finland, France, and Iceland. It is ISAR's goal to have prospective data from 15,000 patients.



◆ ISAR Publications and Abstracts in 2021/2022

We are pleased to share 3 additional ISAR studies were accepted and published in 2021, with 10 more submissions planned for 2022. Furthermore, 3 abstracts presented as e-posters at the ERS International Congress 2021 have been published in the European Respiratory Journal. ISAR continues to contribute to the development of high-quality academic research that will enhance our understanding of severe asthma management and care.

Menzies-Gow A, et al. **"Real-world Biologic Use and Switch Patterns in Severe Asthma: Data from the International Severe Asthma Registry and the US CHRONICLE Study"**
J Asthma Allergy, 2022

Aim: To describe real-life global patterns of biologic use (continuation, switches, and discontinuations) for severe asthma, elucidate the reasons underlying these patterns, and examine associated patient-level factors.

Conclusions: 79% of patients with severe asthma continue treatment with their initial biologic; of the 10.8% of patients who switched, the most common first switch was from omalizumab to an anti-IL5/5R therapy.
Click [here](#) to read the full article.

ISAR Publications and Abstracts in 2021/2022

Porsbjerg C, et al.

"Global Variability in Administrative Approval Prescription Criteria for Biologic Therapy in Severe Asthma"
J Allergy Clin Immunol Pract, in press

Aim: To compare global differences in ease-of-access to biologics.

Conclusions: The Biologic ACcessibility Score (BACS) was developed based on biologic prescription criteria; it highlighted substantial variations in ease-of-access to biologics globally.

Click [here](#) to read the full article.

Busby J, et al.

"Impact of Socioeconomic Status on Adult Patients With Asthma: A Population-based Cohort Study from UK Primary Care" *J Asthma Allergy*, 2021

Aim: To investigate the effect of socioeconomic status (SES) on clinical outcomes in a UK primary care asthma cohort

Conclusions: Patients from the most deprived SES quintile had poorer asthma control and greater exacerbation rates than those from the least deprived quintile, but rates of respiratory referrals were comparable.

Click [here](#) to read the full article, and [here](#) for the slide deck.

➤ More information on ISAR publications is available on the ISAR website [here](#) and on slide share [here](#).

A summary of the e-Poster live discussion at the session '**Severe asthma: evaluation using patient reported outcome measures (PROMs) and biomarkers, comorbidities and treatments**' on 5th September 2021 (13:15-14:15 CEST) can be found [here](#). The three abstracts were published in a supplement of the **European Respiratory Journal**.

Baseline characteristics of severe asthma patients initiating biologic treatment worldwide (BEAM)

Perez de Llano L, et al.

Aim: To describe the characteristics of biologic users at initiation

Conclusions: At biologic initiation, patients receiving anti-IL5/5R seemed to have more severe asthma characteristics, such as poorer lung function and greater use of long-term oral corticosteroids, than patients receiving anti-IgE.

Click [here](#) to read the full abstract.

Comparative Effectiveness of Anti IL5/5R Versus Anti IgE in Patients Eligible for Both (FIRE)

Nasloon A, et al.

Aim: To assess clinical responses of initiating anti-IL5/5R versus anti-IgE among patients eligible for both.

Conclusions: Both biologics reduced exacerbations among severe asthma patients, though matched patients receiving anti-IL5/5R were less likely to report exacerbations than those receiving anti-IgE.

Click [here](#) to read the full abstract.

Characterisation of severe, steroid dependent asthma patients who initiate biologics versus those who do not (GLITTER)

Chen W, et al.

Aim: To characterize severe asthma patients with high exposure to oral corticosteroids (HOCS) who initiated biologics versus those who did not.

Conclusions: About 71% of ISAR patients with HOCS initiated biologics; biologic initiators were more likely to be eosinophilic, atopic and have uncontrolled asthma than those who did not initiate biologics.

Click [here](#) to read the full abstract.

➤ For more information on our Abstracts, Posters and Oral presentations, please visit the [ISAR Website](#). ISAR's research and quality improvement initiatives are summarized in the ISAR Research Summary slide deck ([Link](#)). If you wish to submit a research question utilising ISAR data, you may do so [here](#). To register interest in joining the registry as a collaborating country, please contact us [here](#).

ISAR Featured in the Spectator Briefings (Podcast)

Improving the status quo: can severe asthma be better treated?

Professor David Price (founder of the Observational and Pragmatic Research Institute) takes us through the adverse effects of steroid overuse, the cost of prescribing steroids for the UK's National Health Service (NHS), and the role of ISAR in understanding severe asthma. Gabby Perry (student with severe asthma) talks about the dual edged swords that are steroids, and Syed Ali (medical affairs manager at AstraZeneca) discusses alternative treatments such as biologics.

Click [here](#) to listen to the full podcast.

ISAR Steering Committee (ISC) and Research Meetings 2022

ISAR Open Research Meeting 1 (for Asia-Pacific remote attendees)

17th March 2022, 8-11am CE

ISAR Closed Steering Committee Meeting

17th March 2022, 12-1.30pm CET

ISAR Open Research Meeting 2 (for EU and US remote attendees)

17th March 2022, 2-5pm CET

Agenda: ISAR research updates, network proposal ideas and sustainability objectives

ISAR Session at REG Summit 2022

ISAR Session Title: **The International Severe Asthma Registry (ISAR): Key updates and research findings**

Date & Time: **Saturday 19th March 2022, 9.30-11am CET ([Link](#))**

1. ISAR through time: Achievements and vision for the future.
2. Prevalence of comorbidities and their impact on clinical outcomes in severe asthma patients (PRISM project).
3. Characterization of patients with non-Type 2 asthma and assessment of biologic effectiveness in patients with different Type 2 biomarkers (EMBER and IGNITE projects).
4. Defining and characterising biologic treatment responders in severe asthma patients (BEAM project).
5. Impact of biologic initiation on clinical outcomes in severe asthma patients with high exposure to oral corticosteroids (GLITTER project).
6. Comparing the effectiveness of Anti-IL5 versus Anti-IgE biologic therapies in severe asthma patients eligible for both (FIRE project).

If you wish to submit a research question utilising ISAR data, you may do so via the **["submit a proposal or research request"](#)** tab on ISAR website.



ISAR Website

The ISAR website has had a facelift. It now contains a new "Dissemination" tab for the latest news on ISAR abstracts and publications, and a "FAQ" tab which provides answers to frequently asked questions about ISAR.

www.isaregistries.org