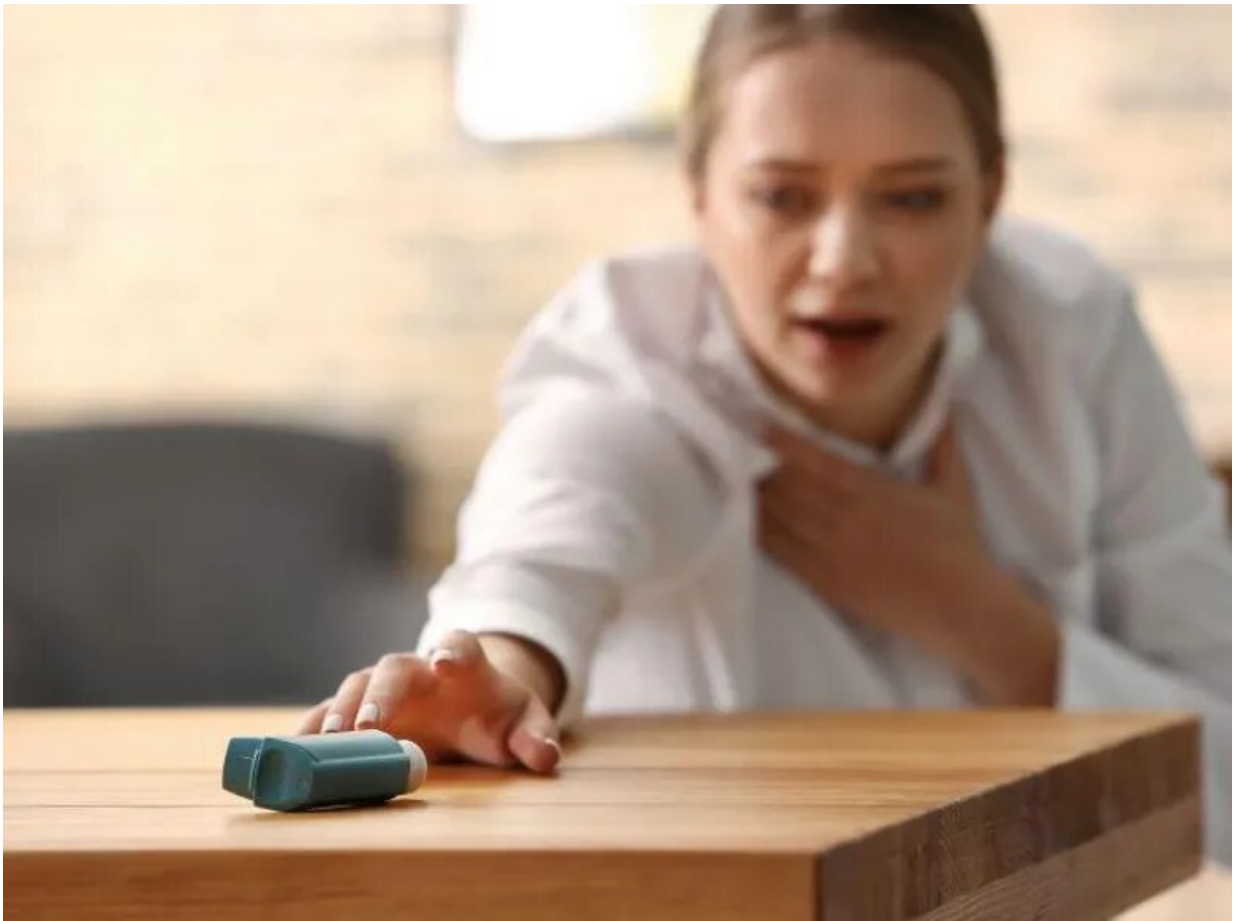


OCS-sparing effect of dupilumab for severe asthma maintained

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Long-term treatment of severe asthma with dupilumab supports

sustained reduction in oral corticosteroid (OCS) dosage and improvement in clinical end points for up to 96 weeks, according to a study published in the July issue of *CHEST*.

Lawrence D. Sher, M.D., from Peninsula Research Associates in Rolling Hills Estates, California, and colleagues assessed whether the reduction in OCS use and the clinical efficacy of dupilumab treatment is maintained long-term in patients with severe OCS-dependent [asthma](#). The analysis included 187 patients previously enrolled in a dupilumab clinical trial.

The researchers found that at baseline, the mean daily OCS dosage was 3.1 mg/day and 6.4 mg/day for the dupilumab/dupilumab group and placebo/dupilumab group, respectively. At week 48, OCS decreased to 2.2 mg/day and 4.9 mg/day (78.3 and 53.4 percent reductions, respectively), which further declined to 1.2 mg/day and 3.0 mg/day (89.3 and 74.4 percent reductions, respectively) at week 96. Exacerbation rates were low, and further improvements were seen for forced expiratory volume in one second and 5-item Asthma Control Questionnaire scores. Safety findings were consistent with the established dupilumab safety profile.

"In the open-label TRAVERSE study, dupilumab demonstrated the ability to sustain the OCS dosage reduction from the parent OCS-sparing study, while maintaining a low exacerbation rate and improved lung function," the authors write.

Several authors disclosed financial ties to pharmaceutical companies, including Sanofi and Regeneron, the manufacturers of [dupilumab](#).

More information: Lawrence D. Sher et al, Dupilumab Reduces Oral Corticosteroid Use in Patients With Corticosteroid-Dependent Severe Asthma, *Chest* (2022). [DOI: 10.1016/j.chest.2022.01.071](https://doi.org/10.1016/j.chest.2022.01.071)

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