

Demographic and clinical characteristics of patients with severe asthma in Japan and South Korea

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Disclosures

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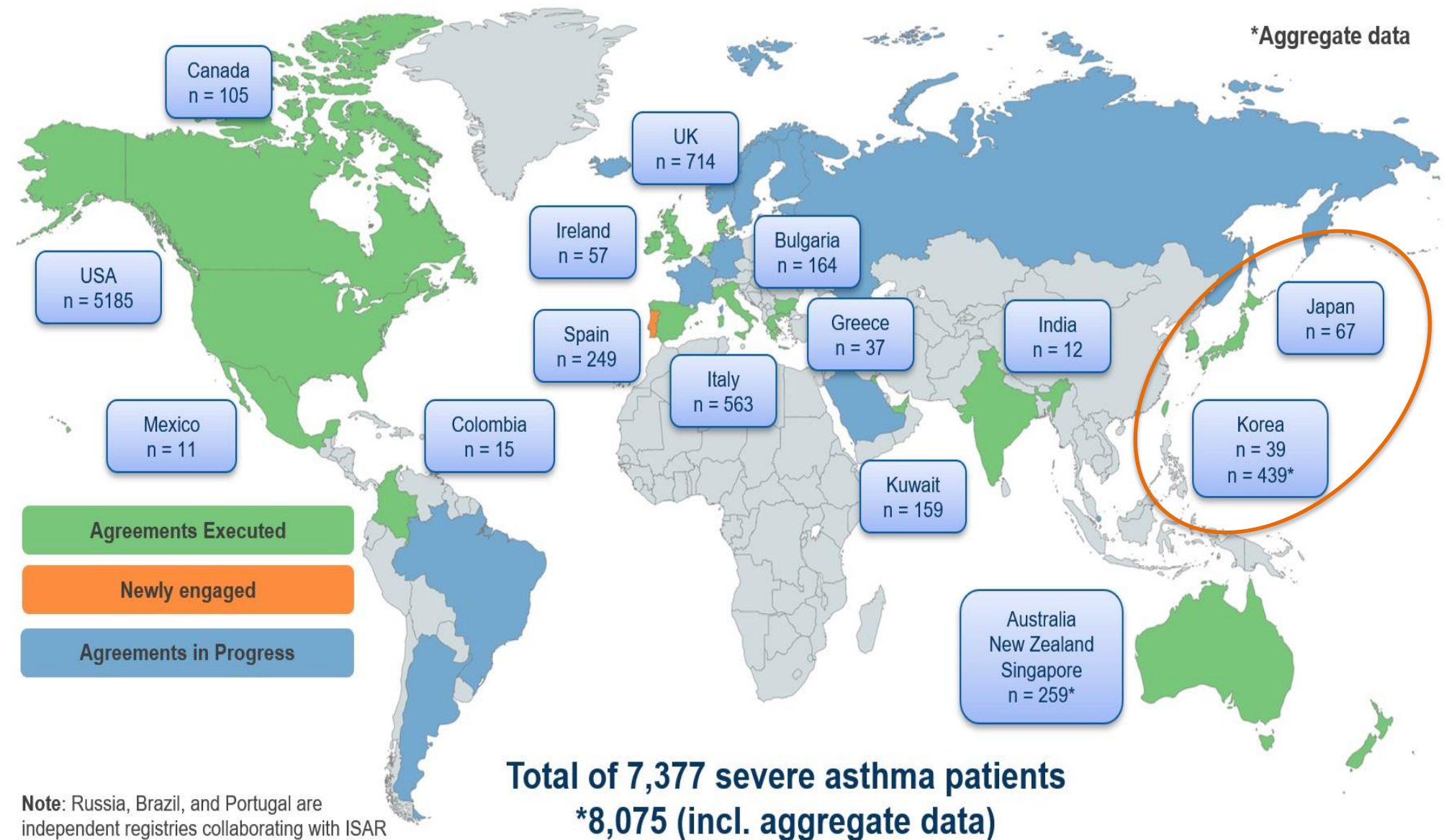
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Rationale

- Regional and/or national severe asthma registries provide valuable country-specific information.
- Inter-country comparisons are hindered by fundamental differences in data collected, making cross comparisons difficult
- What is missing?:
 - a worldwide registry,
 - bringing all severe asthma data together in a cohesive way, under a single umbrella,
 - based on standardized data collection protocols,
 - permitting data to be shared seamlessly.

Introducing the International Severe Asthma Registry (ISAR)¹

- ISAR is the first global severe asthma registry
- Collects patient-level, pseudonymized, longitudinal, real-life, standardized, high-quality data, using a set of core variables²
- Currently collaborating with 29 countries worldwide³
 - Asia: Taiwan, India Singapore, **Japan and South Korea**



1. <http://isaregistries.org/>; 2. Bulathsinhala et al, JACI Pract 2019; 3. ISAR Study Group Chest 2019; In press

Methods

Patients:

- From severe asthma secondary and tertiary care centres
- Aged ≥ 18 years old
- On GINA¹ Step 5 treatment or with uncontrolled asthma on GINA¹ Step 4

Data: what, where & when

- **What:** Demographic & clinical data
- **Where:** From centres in Japan and Korea
- **When:** Collected between May 2018 and Sept 2019

Results: demographic & clinical characteristics (new data)

Characteristic	Japan (n=67)	South Korea (n=39)	ISAR Global ¹ (n=4990)
Age, yrs, Mean (SD)	63.9 (14.0)	52.3 (15.1)	55.0 (15.9)
BMI, Mean (SD)	24.8 (4.2)	24.6 (3.6)	
Normal ($\geq 18.5 - <25$), n (%)	35 (55.5)	18 (47.3)	1345 (27.4)
Age of asthma onset, yrs Mean (SD)	39.3 (16.2)	38.3 (17.0)	30.7 (17.7)
Smoking status, n (%)			
Ever smoked	20 (31.7)	12 (31.5)	1950 (39.3)
Non-smoker	43 (68.2)	26 (68.4)	2997 (60.5)
Exacerbations, mean (SD)	1.7 (2.3)	0.7 (1.5)	1.7 (2.7)
PB FEV ₁ (% predicted), Mean (SD)	86.7 (23.7)	77.2 (21.3)	75.8 (17.1)
% Reversibility*, Mean (SD)	5.2 (5.2)	7.2 (5.4)	GINA 4: 6.8 (7.4) GINA 5: 7.1 (8.5)
% patients with FEV ₁ /FVC<0.7	39.6% (n=19/48)	52.6% (n=20/38)	GINA 4: 39.4% GINA 5: 34.6%

1. Wang et al, Chest 2019; SD: standard deviation; BMI: body mass index; PB: post bronchodilator; FEV₁: forced expiratory volume in 1 second; FVC: forced vital capacity *Reversibility calculated according to ERS guidelines (Quanjer et al, 1993)

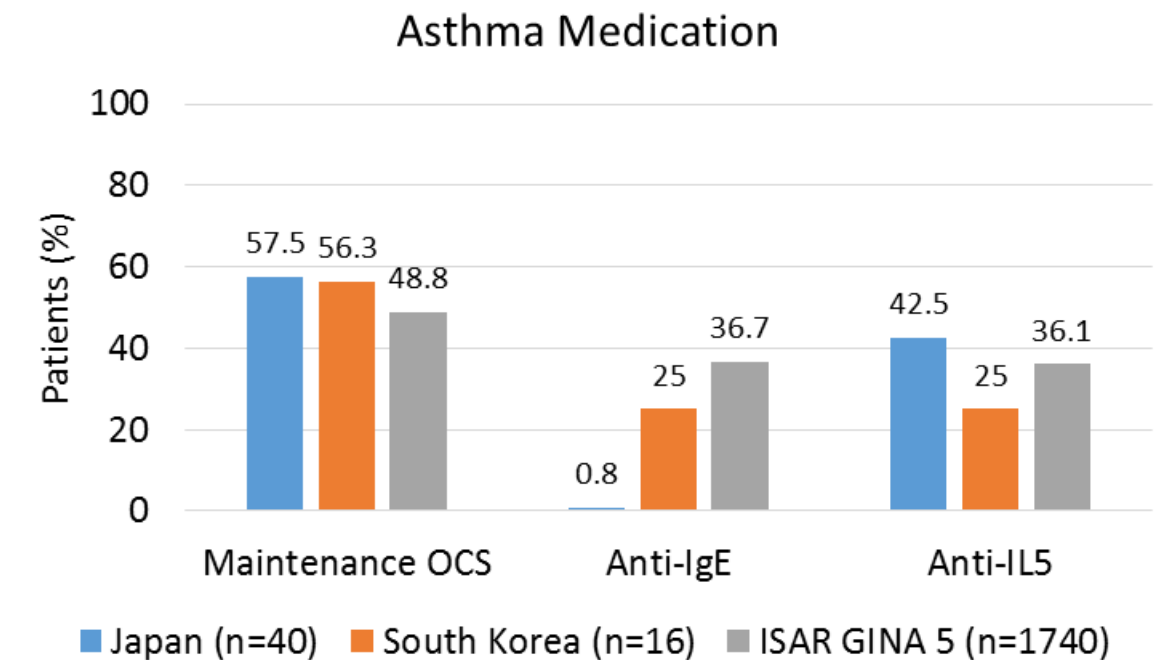
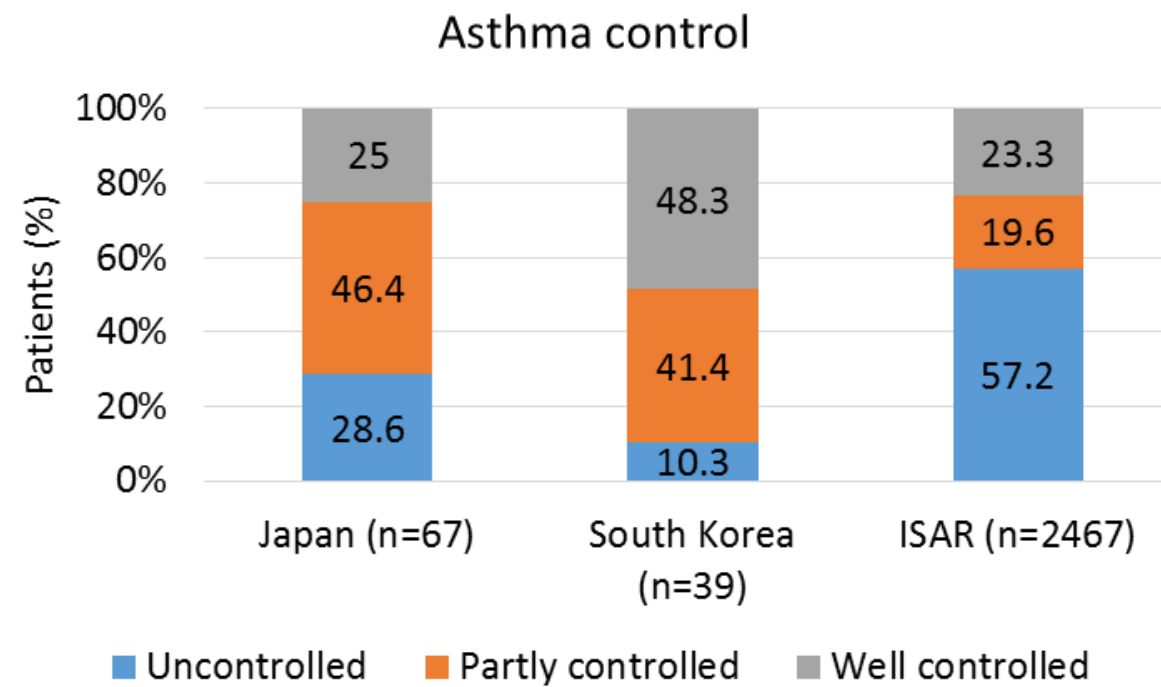
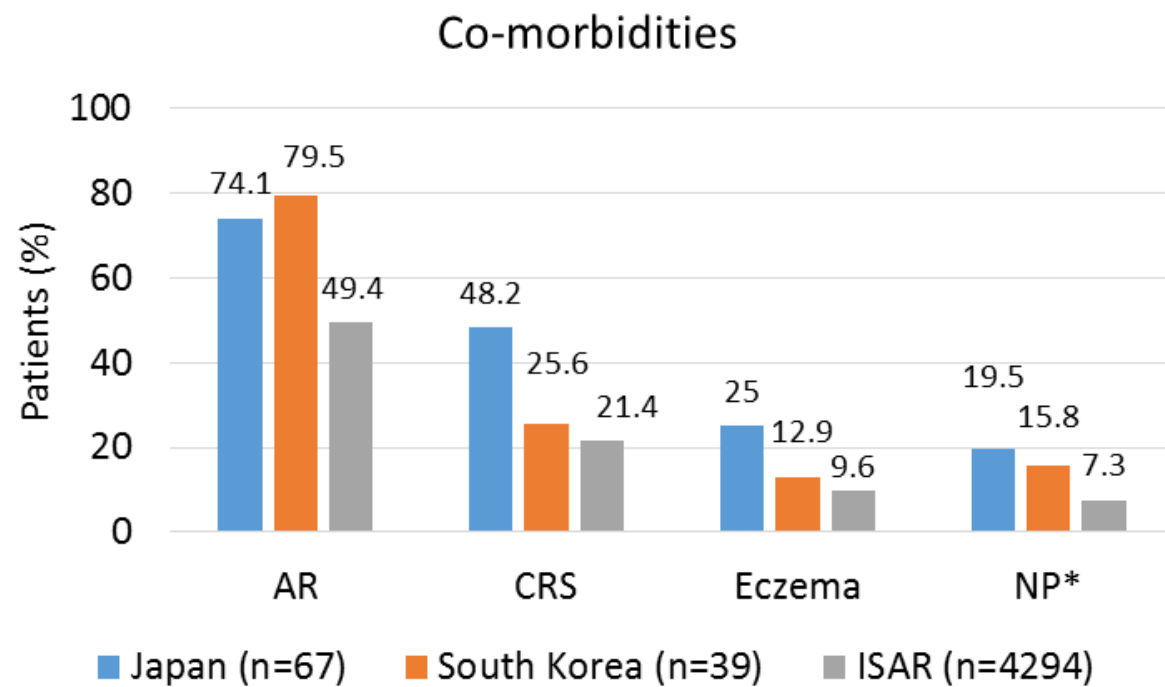
Results: Biomarkers

New data hot off the press

Characteristic	Japan (n=67)	South Korea (n=39)	ISAR Global ¹
BEC (x 10⁹/L), mean (SD)	0.48 (0.50)	0.49 (0.56)	
≤0.30, n (%)	22 (46.8)	17 (56.7)	1923 (51.4)
>0.30, n (%)	25 (53.2)	13 (43.3)	1813 (48.5)
FeNO (ppb)			
<25, n (%)	17 (37.8)	7 (38.9)	934 (43.1)
≥25, n (%)	28 (62.2)	11 (61.1)	1234 (56.9)

1. Wang et al, Chest 2019; SD: standard deviation; BEC: blood eosinophil count; FeNO: fractional exhaled nitric oxide; ppb: parts per billion; IgE: Immunoglobulin E

Results: clinical characteristics



- **JP:** More patients with CRS, AD & NP vs SK
- **JP & SK:** greater co-morbidity burden vs ISAR Global

- **JP:** More patients with uncontrolled asthma vs SK
- **JP & SK:** less patients with uncontrolled asthma vs ISAR Global
- Note: consider treatment landscape

- High Maintenance OCS burden in JP, SK and ISAR Global
- Similar Biologic (Anti-IgE or anti-IL5) utilization in JP & SK
 - SK: Bx not reimbursed
 - JP: Bx partially reimbursed
- Note: many patients still had high BEC

AR: allergic rhinitis; CRS; chronic rhinosinusitis; AD: atopic dermatitis; NP: nasal polyps; OCS: maintenance oral corticosteroids; BEC: blood eosinophil count; JP: Japan; SK: South Korea; ISAR: International Severe Asthma Registry; Bx: biologics; * non-missing data – JP: n=46; SK: n=38

Conclusions

RESEARCH REQUESTS AND PROPOSALS



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