

Title: Real-world treatment patterns of newly diagnosed asthma patients

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INTRO

- Powerful data visualizations to understand and address current gaps in clinical care for asthma patients.

METHODS

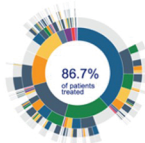
- Collected adult patients first diagnosed with asthma, having at least 1 year prior and 3 year follow-up database time since diagnosis. Excluded patients with a concomitant condition of chronic obstructive pulmonary disease (COPD) or emphysema, or a diagnosis related to chronic systemic corticosteroid use in their history.
- Treatment patterns analyzed at class level. We define a combination as an overlap of drug eras longer than 30 days, and consider it a switch otherwise.

RESULTS

- Approximately one-third of the prescriptions are in line with historic* guideline recommendations to start treatment with SABA.
- Drugs associated with poorly controlled asthma (i.e. systemic glucocorticosteroids) are frequently used as initial treatment in the US databases.
- In the Netherlands combination therapies are more frequently prescribed, quite some patients in IPCI directly start with a treatment recommended for moderate instead of mild asthma (i.e. ICS-LABA).

* Since 2019 GINA no longer recommends treating adults and adolescents with asthma with SABA monotherapy.

IPCI (NL)



CCAE (USA)



MDCD (USA)



MDCR (USA)



Data sources

	Subjects	Age (mean)	Charlson index
IPCI (NL)	7,567	48.8	0.6
CCAE (USA)	411,740	42.3	0.8
MDCD (USA)	91,261	44.7	1.8
MDCR (USA)	42,285	73.3	2.7

Treatment patterns of asthma patients vary across countries with **substantial differences** in initial treatments and the obedience of guidelines

Frequency combination therapy (% of people treated in each layer)

	1st	2nd	3rd
IPCI (NL)	27.2%	49.5%	64.6%
CCAE (USA)	24.5%	32.9%	52.6%
MDCD (USA)	22.5%	36.9%	58.7%
MDCR (USA)	21.2%	39.8%	60.3%



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