

Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: <https://reachmd.com/programs/clinicians-roundtable/new-frontiers-in-severe-asthma-management/54213/>

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New Frontiers in Severe Asthma Management

Announcer:

This is *Clinician's Roundtable* on ReachMD. On this episode, Dr. Geoffrey Chupp will be discussing therapeutic advances in the management of severe asthma. Dr. Chupp is the Executive Director of the Yale Center for Asthma and Airways Disease and a Professor at Yale School of Medicine in New Haven.

Let's hear from him now.

Dr. Chupp:

The drugs that we have are excellent, and they've brought us a long way, but what they haven't done is allowed us to cure the disease.

So we're able to control the disease very well and achieve very high levels of control we haven't had before. What we're starting to see is that, as we shift our goals for patients, we're recognizing that we can put a patient on these medications and achieve optimal control—which is virtually no symptoms and no need for systemic steroids for control or exacerbations. We have some improvement in their lung function, but what we're also able to achieve now is a reduction in the amount of inhaled medications they take. So we can get these patients down to sometimes just a reliever level of medications, as opposed to being on chronic inhaled steroids. And I think that this needs to be done scientifically. It needs to be studied, but I think it's an opportunity that is within our sight right now and is starting to be achieved in a small percentage of patients.

The other thing is that we have newer medications coming out that I'd like to group into three categories. The first category is the me-too category, which is medications that are targeting the same molecule but have different dosing characteristics—for example, long-acting agents, which you may dose every six months instead of every month or every two weeks, which a lot of the agents are now.

The second class of agents are bispecific antibodies, which are biologic therapies where they may target two or sometimes three different mediators of the inflammatory process in patients with inflammatory airway disease.

Then the third class are novel targets, and those are targets that are novel, both in that they may be part of the T2 inflammatory pathway that allows us to achieve control through an oral drug against a different target, or a completely novel pathway that's been shown to be relevant in asthma and airway disease.

These drugs are currently in phase 1, 2, and 3 clinical trials. But I think that we have a future where we may be able to achieve not just a clinical remission in some patients, but actually a biologic remission.

Announcer:

That was Dr. Geoffrey Chupp talking about how treatment for severe asthma is evolving. To access this and other episodes in our series, visit *Clinician's Roundtable* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!