
Title: Biomarker-defined clusters by level of Type 2 inflammatory involvement in severe asthma

David Price^{1,2,3}, Sarah Burkill^{1,2}, Eileen Wang^{4,5}, Michael E. Wechsler⁶, Eve Denton^{7,8}, Trung N. Tran⁹, Neil Martin^{9,10}, Rohit Katial⁹, Peter Barker⁹, Jorge Maspero^{11,12}, Mark Hew^{13,14}, Guy Brusselle^{15,16}, George C. Christoff¹⁷, Mohsen Sadatsafavi¹⁸, Carlos A. Torres-Duque¹⁹, Celeste M. Porsbjerg²⁰, Charlotte Ulrik²¹, Susanne Hansen^{22,23}, Alan Altraja²⁴, Arnaud Bourdin²⁵, Nikolaos G. Papadopoulos^{26,27}, Konstantinos Kostikas²⁸, Sundeep Salvi²⁹, Richard W. Costello³⁰, Puggioni Francesca^{31,32}, Takashi Iwanaga³³, Chin Kook Rhee³⁴, Mona Al-Ahmad³⁵, Désirée Larenas-Linnemann³⁶, João A. Fonseca³⁷, Borja G. Cosío³⁸, Mariko Koh Siyue^{39,40}, Bruce Kirenga⁴¹, Chau-Chyun Sheu^{42,43}, Ming-Ju Tsai^{42,43}, Bassam Mahboub^{44,45}, John Busby⁴⁶, Liam G. Heaney⁴⁷, Paul E. Pfeffer^{48,49}, Pujan H Patel⁵⁰, Flavia Hoyte^{4,5}, Yang Liu⁵¹, Juntao Lyu^{1,52}, Celine Goh^{1,2}, Thendral Uthaman,¹ William Henley^{1,2,53}, on behalf of the ISAR EMBER working group.

Affiliations: ¹Observational and Pragmatic Research Institute, Singapore; ²Optimum Patient Care Global, Cambridge, UK; ³Centre of Academic Primary Care, Division of Applied Health Sciences, University of Aberdeen, Aberdeen, UK; ⁴Division of Allergy & Clinical Immunology, Department of Medicine, National Jewish Health, Denver, CO, USA; ⁵Division of Allergy & Clinical Immunology, Department of Medicine, University of Colorado School of Medicine, Aurora, CO, USA; ⁶NJH Cohen Family Asthma Institute, Department of Medicine, National Jewish Health, Denver, CO, USA; ⁷Allergy, Asthma & Clinical Immunology, Alfred Health, Melbourne, Australia; ⁸Public Health and Preventive Medicine, Monash University, Australia; ⁹AstraZeneca, Gaithersburg, MD, USA; ¹⁰University of Leicester, Leicester, UK; ¹¹Clinical Research for Allergy and Respiratory Medicine, CIDEA Foundation; ¹²University Career of Specialists in Allergy and Clinical Immunology at the Buenos Aires University School of Medicine, Argentina; ¹³Allergy, Asthma & Clinical Immunology Service, Alfred Health, Melbourne, Australia; ¹⁴Public Health and Preventive Medicine, Monash University, Melbourne, Australia; ¹⁵Departments of Respiratory Medicine, Ghent University Hospital, Ghent, Belgium; ¹⁶Department of Epidemiology and Respiratory Medicine, Erasmus Medical Center Rotterdam, Rotterdam, The Netherlands; ¹⁷Medical University-Sofia, Faculty of Public Health, Sofia, Bulgaria; ¹⁸Respiratory Evaluation Sciences Program, Faculty of Pharmaceutical Sciences, University of British Columbia, Vancouver, British Columbia, Canada; ¹⁹Fundación Neumológica Colombiana, Bogotá, Colombia; ²⁰Respiratory Research Unit, Copenhagen University Hospital-Bispebjerg; ²¹Respiratory Research Unit, Department of Respiratory Medicine, Copenhagen University Hospital-Hvidovre, Hvidovre, Denmark; ²²Respiratory Research Unit, Bispebjerg University Hospital, Copenhagen, Denmark; ²³Center for Clinical Research and Prevention, Bispebjerg and Frederiksberg Hospital, Copenhagen, Denmark; ²⁴Department of Pulmonology, University of Tartu and Lung Clinic, Tartu University Hospital, Tartu, Estonia; ²⁵PhyMedExp, Univ Montpellier, CNRS, INSERM, CHU Montpellier, Montpellier, France; ²⁶Division of Infection, Immunity & Respiratory Medicine, University of Manchester, Manchester, UK; ²⁷Allergy Department, 2nd Pediatric Clinic, University of Athens, Athens, Greece; ²⁸Respiratory Medicine Department, University of Ioannina, Greece; ²⁹Pulmocare Research and Education Foundation, Pune, India; ³⁰Clinical Research Centre, Smurfit Building Beaumont Hospital, Department of Respiratory Medicine, RCSI, Dublin, Ireland; ³¹Personalized Medicine, Asthma and Allergy, Humanitas Clinical and Research Center IRCCS, Rozzano, Italy; ³²Department of Biomedical Sciences, Humanitas University, Pieve Emanuele, Italy; ³³Center for General Medical Education and Clinical Training, Kindai University Hospital, Osakasayama, Japan; ³⁴Division of Pulmonary and Critical Care Medicine, Department of Internal Medicine, Seoul St. Mary's Hospital, College of Medicine, The Catholic University of Korea, Seoul, South Korea; ³⁵Microbiology Department, Faculty of Medicine, Kuwait University, Al-Rashed Allergy Center, Ministry of Health, Kuwait; ³⁶Directora Centro de Excelencia en Asma y Alergia, Hospital Médica Sur, Ciudad de México, Mexico; ³⁷Health Information and Decision Sciences Department (MEDCIDS) & Center for Health Technology and Services Research (CINTESIS), Faculty of Medicine of University of Porto, Porto, Portugal; ³⁸Son Espases University Hospital-IdISBa-Ciberes, Mallorca, Spain; ³⁹Respiratory & Critical Care Medicine, Singapore General Hospital, Singapore; ⁴⁰SingHealth Duke-NUS Lung Centre, Singapore; ⁴¹Makerere University Lung Institute, Kampala Uganda; ⁴²Division of Pulmonary and Critical Care Medicine, Department of Internal Medicine, Kaohsiung Medical University Hospital, Kaohsiung Medical University,

Taiwan; ⁴³Department of Internal Medicine, School of Medicine, College of Medicine, Kaohsiung Medical University, Taiwan; ⁴⁴College of Medicine, University of Sharjah, Sharjah, United Arab Emirates; ⁴⁵Rashid Hospital, Dubai Health Authority, Dubai, United Arab Emirates; ⁴⁶Centre for Public Health, Queen's University Belfast, Belfast, Northern Ireland; ⁴⁷Wellcome-Wolfson Centre for Experimental Medicine, Queen's University Belfast, Belfast, Northern Ireland; ⁴⁸Department of Respiratory Medicine, Barts Health NHS Trust, London, UK; ⁴⁹Barts and The London School of Medicine and Dentistry, Queen Mary University of London, London, UK; ⁵⁰Respiratory Medicine, Royal Brompton Hospital, London, UK; ⁵¹Consulting, Strategy AI & Transformation, Deloitte, Brisbane, Australia; ⁵²Optimum Patient Care, Queensland, Australia; ⁵³Health Statistics Group, Institute of Health Research, University of Exeter Medical School, Exeter, United Kingdom.

Introduction/Background: Biomarker-defined clusters of severe asthma patients were previously identified via hierarchical cluster analysis; a cluster of older females with low-to-medium Type 2 (T2) biomarkers was characterized (Denton, E. et al. *J Allergy Clin Immunol Pract* 2021;9:2680-8.e7).

Aims and Objectives: To describe biomarker-defined clusters (blood eosinophil counts [BEC], FeNO, and serum IgE [IgE]) in severe asthma patients, and characterize T2-low asthma.

Methods: Patients in the International Severe Asthma Registry (ISAR) with biomarker data were included, regardless of biologic use. The Gaussian finite mixture 5-cluster model was used to perform cluster analyses using BEC, FeNO, IgE and demographic variables standardized by z score. The prespecified thresholds for low biomarkers were BEC <300cells/ μ L, FeNO <25ppb and IgE <75 IU/mL.

Results: Of 4459 patients, five clusters were identified. Cluster 1 had females with low T2 biomarkers. Cluster 2 had high BEC and FeNO; Cluster 3, triple T2 biomarker high; Cluster 4, high BEC; Cluster 5, high IgE.

Figure: Median (IQR) biomarker levels and characteristics of clusters

	Cluster 1	Cluster 2	Cluster 3	Cluster 4	Cluster 5	$p \leq 0.001$
N	747	1038	357	1,503	814	
BEC (cells/μL)	200 (200)	850 (752)	1160 (2900)	400 (400)	300 (300)	
FeNO (ppb)	16 (12)	93 (75)	52 (77)	37 (36)	24 (22)	
IgE (IU/mL)	28 (40)	304 (362)	1669 (2525)	115 (126)	650 (657)	
Females	73%	56%	54%	63%	58%	
Age	55 (21)	54 (20)	55 (23)	56 (19)	52 (22)	
BMI	29 (10)	27 (7)	26 (7)	29 (8)	28 (9)	

Conclusions: In line with previous findings, a cluster with females and low biomarkers suggested low T2 involvement. The other 4 clusters varied in biomarker elevations, highlighting the complexity of T2 inflammatory involvement in severe asthma.

Funding: This study was conducted by the Observational and Pragmatic Research Institute (OPRI) Pte Ltd and was partially funded by Optimum Patient Care Global and AstraZeneca Ltd. No funding was received by OPRI for its contribution.

Current length of abstract: 1758 characters

Maximum Length of an abstract: 1810 characters