# Article information:

Dupilumab improves symptoms, quality of life, and productivity in uncontrolled persistent asthma - Annals of Allergy, Asthma & Immunology  
<https://www.annallergy.org/article/S1081-1206(18)30665-3/fulltext>

# Article summary:

1. Dupilumab significantly improves asthma control, symptoms, quality of life (QoL), and productivity in patients with uncontrolled persistent asthma.

2. The efficacy of dupilumab is consistent across most subgroups defined by baseline characteristics.

3. Patient-reported outcome (PRO) questionnaires are important in assessing the impact of asthma treatment, and should be included in clinical trials along with traditional endpoints such as exacerbations and lung function.

# Article rating:

Appears moderately imbalanced: The article provides some useful information, but is missing several important points or pieces of evidence that would be required to present the discussed topics in a balanced and reliable way. You are encouraged to seek a more balanced perspective on the presented issues by exploring the provided research topics and looking at different information sources.

# Article analysis:

The article titled "Dupilumab improves symptoms, quality of life, and productivity in uncontrolled persistent asthma" published in the Annals of Allergy, Asthma & Immunology presents a post hoc analysis of a phase 2b study on the efficacy and safety of dupilumab in patients with uncontrolled persistent asthma. While the study provides valuable insights into the potential benefits of dupilumab for asthma control, there are several limitations and biases that need to be considered.

One potential source of bias is the fact that the study was funded by Sanofi and Regeneron Pharmaceuticals, which manufacture dupilumab. This could lead to a conflict of interest and influence the interpretation of results. Additionally, the article does not provide information on whether any of the authors have financial ties to these companies.

The article also presents a one-sided view of dupilumab's effectiveness by focusing solely on positive outcomes such as improvements in asthma control, symptoms, QoL, and productivity. It does not explore any potential risks or adverse effects associated with dupilumab treatment. This lack of balance could mislead readers into thinking that dupilumab is entirely safe and effective without considering its potential drawbacks.

Furthermore, while the study claims that dupilumab produced significant improvements in PROs such as symptom control and QoL, it does not provide sufficient evidence to support this claim. The article only reports response rates for various measures but does not provide data on how much improvement was actually achieved or how long these improvements lasted.

Another limitation is that the study only included patients who had already been treated with medium-to-high-dose ICS+LABA for at least one month before screening. This means that the results may not be generalizable to patients who have not received this type of treatment or who have more severe forms of asthma.

Finally, while the article acknowledges that poor asthma control can lead to adverse outcomes such as hospitalization and decreased productivity, it does not explore the potential economic implications of dupilumab treatment. The high cost of biologic therapies like dupilumab could limit access for patients who cannot afford them, which could exacerbate existing health disparities.

In conclusion, while the study provides some evidence to support the use of dupilumab for uncontrolled persistent asthma, readers should be aware of its limitations and biases. It is important to consider both the potential benefits and risks of any treatment before making clinical decisions.

# Topics for further research:

* Conflict of interest
* Potential risks and adverse effects
* Lack of balance in reporting
* Insufficient evidence for claims
* Limited generalizability
* Economic implications

# Report location:

<https://www.fullpicture.app/item/cd89d927bd44c7e1bb6a95066719d4b4>