# Article information:

Long-term safety and efficacy of dupilumab in patients with moderate-to-severe asthma (TRAVERSE): an open-label extension study - The Lancet Respiratory Medicine
[https://www.thelancet.com/journals/lanres/article/PIIS2213-2600(21)00322-2/fulltext](https://www.thelancet.com/journals/lanres/article/PIIS2213-2600%2821%2900322-2/fulltext)

# Article summary:

1. TRAVERSE study evaluated the long-term safety and efficacy of dupilumab in patients with moderate-to-severe asthma for up to 96 weeks.

2. Safety during TRAVERSE was consistent with the known dupilumab safety profile, and efficacy was also consistent with the results of parent studies.

3. Data show that safety and efficacy of dupilumab in adult and adolescent patients with moderate-to-severe asthma are sustained when treatment is extended up to 148 weeks, supporting its long-term use in this patient population.

# 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 reports on the results of an open-label extension study that evaluated the long-term safety and efficacy of dupilumab in patients with moderate-to-severe asthma. The study found that the treatment benefits of dupilumab were sustained when treatment was extended up to 148 weeks, supporting its long-term use in this patient population.

However, the article has several potential biases and limitations. Firstly, it is funded by Sanofi and Regeneron Pharmaceuticals, which may have influenced the reporting of the study's results. Secondly, the study only included patients who had completed a previous dupilumab asthma study, which may not be representative of all patients with moderate-to-severe asthma. Thirdly, the statistical analyses were descriptive rather than inferential, which limits the strength of the conclusions that can be drawn from the data.

The article also lacks consideration of potential risks associated with long-term use of dupilumab, such as adverse effects on immune function or increased risk of infections. Additionally, there is no exploration of any potential counterarguments or limitations to using dupilumab as a long-term treatment for moderate-to-severe asthma.

Overall, while the article provides some useful information about the long-term safety and efficacy of dupilumab in patients with moderate-to-severe asthma, it should be read critically and with an awareness of its potential biases and limitations.

# Topics for further research:

* Potential biases and limitations
* Funding sources
* Patient selection
* Statistical analyses
* Risks associated with long-term use
* Lack of exploration of counterarguments or limitations

# Report location:

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