The evidence base for ICS/formoterol maintenance and reliever therapy in severe asthma

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Shareable abstract (@ERSpublications)
ICS/formoterol MART is an evidence-based alternative to high dose ICS/LABA in asthma patients at high risk of severe exacerbations; limited generalisability of RCTs to severe asthma registries applies similarly to high dose ICS/LABA therapy as to MART https://bit.ly/4aVFrNH

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Reply to P.J. McDowell and co-workers:

We agree with P.J. McDowell and co-workers that the patients whose data are recorded in the UK Severe Asthma Registry (UKSAR) have, on average, more severe asthma than participants in randomised controlled trials (RCTs) of inhaled corticosteroid (ICS)/formoterol maintenance and reliever therapy (MART) [1, 2]. However, poor generalisability from RCTs to severe asthma registries is also the case for RCTs of high dose ICS/long-acting β-agonist (LABA) plus short-acting β-agonist (SABA) reliever therapy. There are similar differences in average baseline severity between patients in the UKSAR database and participants in RCTs of high dose *versus* medium dose ICS/LABA plus SABA therapy, as with those in the MART studies (table 1) [3–13]. Of particular note, the MART study populations had an overall higher baseline rate of severe exacerbations, a marker of both severity and future exacerbation risk. In our view, it is unreasonable to discount one group of RCTs (MART) while concluding there is robust evidence from other RCTs (high dose ICS/LABA), which suffer similar (or greater) limitations in generalisability.