

# DOES COMORBIDITY AFFECT ADHERENCE TO INHALERS IN SEVERE ASTHMA PATIENTS TREATED WITH BIOLOGICS?

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## BACKGROUND AND IMPORTANCE

Comorbidities are often associated with severe asthma (SA) including those patients treated with biologics. That often contribute to poorly controlled asthma, which could be related to deficient adherence to inhalers.

## PURPOSE

To evaluate proportion of non-adherence to inhalers in patients with SA treated with biologics according to their comorbidity and to compare two methods to assess non-adherence.

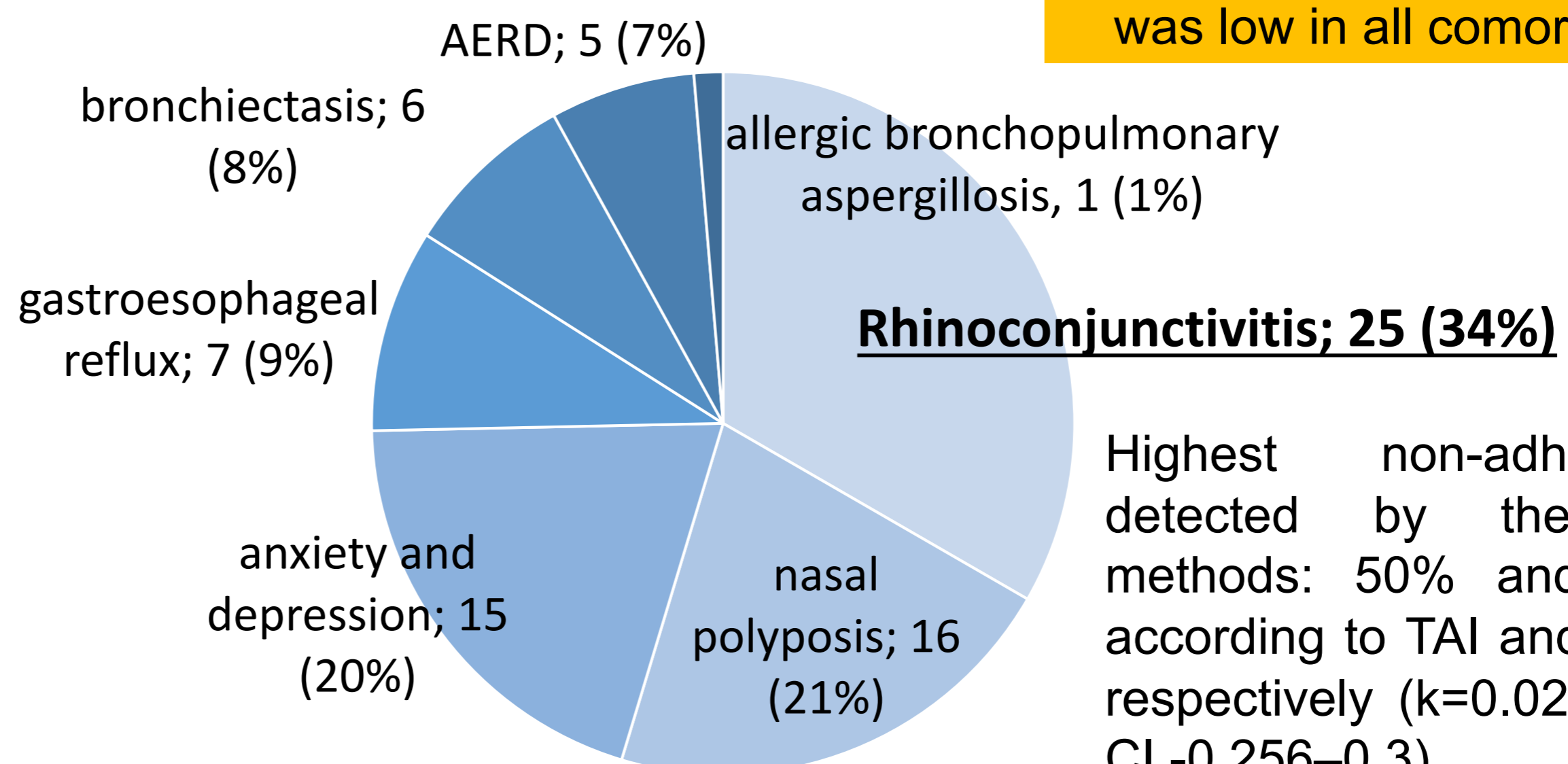
## MATERIAL AND METHODS

- ➔ Cross-sectional retrospective observational study of patients with SA recruited from the SA unit of a tertiary hospital in Madrid from June to December 2020.
- ➔ Demographic data, comorbidities and concomitant therapy for asthma.
- ➔ Primary variable: Proportion of patients classified as not having therapeutic adherence measured by both of the following methods: PRD<80% in the previous 6 months, and TAI questionnaire: a value <50.

Non-adherence was defined as pharmacy refill data (PRD) <80% to the primary inhaler and/or Test of Adherence to Inhalers questionnaire (TAI) results <50.

## RESULTS

- 53 patients
- 41(77%) had comorbidity
- 61 years (IQR 51.8-67)
- 33 (61%) women



Agreement of both methods was low in all comorbidities

Highest non-adherence detected by the two methods: 50% and 55% according to TAI and PRD, respectively (k=0.022 95% CI -0.256–0.3).

## CONCLUSION

Our results highlight a **high prevalence of non-adherence to inhalers in patients with SA and other comorbidities treated with biologics.** Hospital pharmacists should focus on these patient's adherence to inhalers, especially those with rhinoconjunctivitis, when providing pharmaceutical care to SA treated with biologics in practice.

