

# Comorbidities & Severe Asthma

**In the severe asthma population, comorbidities...**

Comorbidity is the co-occurrence of more than one disease or disorder in the same person

## 1 ARE COMMON AND AFFECT MANY BODY SYSTEMS...

### Upper airways



ALLERGIC RHINITIS

44%

CHRONIC RHINOSINUSITIS

36%

VOCAL CORD DYSFUNCTION (VCD)

32%

DYSFUNCTIONAL BREATHING

30%



SLEEP APNOEA

39%

### Lower airways



COPD

20%

BRONCHIECTASIS

24%

### Extrapulmonary



OBESITY

42%



ANXIETY / DEPRESSION

31%



GASTRO-OESOPHAGEAL REFLUX DISEASE (GORD)

23%



OSTEOPOROSIS

(7x rate in people without asthma)



CARDIOVASCULAR & METABOLIC DISEASE

(e.g. increased risk of diabetes mellitus, dyslipidaemia and hypertension)

Percentages indicate the reported proportion of the severe asthma population with each comorbidity

## 2 ARE UNDER-DIAGNOSED...

Recognition of comorbidities requires systematic & multidimensional assessment and specialist input



## 3 AND WORSEN OUTCOMES

Some comorbidities can mimic asthma symptoms, reduce asthma control and interfere with treatment



### CLINICAL APPROACH



Initial Screening  
(e.g. Questionnaires)



Systematic Clinical Evaluation



Tailored Evaluation & Referrals

### MULTIDIMENSIONAL MANAGEMENT IMPROVES OUTCOMES

Multidimensional assessment & management improve asthma control and quality of life and reduce asthma attacks

