

# Anti-IL-5/5R versus anti-IL4R switching strategies for uncontrolled severe asthma treated by anti-IL5/5R : A target trial emulation (RAMSES-Switch)

**First published:** 14/06/2023

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Study

Ongoing

## Administrative details

### EU PAS number

EUPAS105374

### Study ID

105375

### DARWIN EU® study

No

### Study countries

France

### Study description

Severe asthma, affects for 5 to 10% of asthma patients. Biologic therapies have emerged as effective treatments for severe asthma, and five monoclonal antibodies (mAbs) are now available in France to target different subtypes of severe asthma. Intensity of clinical response varies from patient to patient: therefore, for patients with insufficient response, a switch to another drug is possible, since most of the biologics target similar populations of patients with severe asthma. Although response to a biologic given as a second or third line of treatment has been documented, the best strategy to switch from a molecule to another one has not been evaluated yet. In case of failure of anti-IL5 or anti IL5R drugs, two main strategies are used: switching to dupilumab, an anti IL4/13R mAb that also targets eosinophilic asthma or switching to another anti IL5 drug. This study aimed to compare the efficacy of the two switching strategies on asthma control in patients with severe eosinophilic asthma with insufficient clinical response to a first-line anti-IL5/5R mAb treatment. We planned an emuation of a target trial using the data of the Research on severe asthma cohort (RAMSES-cohort). We planned to use a propensity score framework to deal with potential cofounders to the observational nature of the data.

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#### **Study status**

Ongoing

## Research institutions and networks

### Institutions

[Assistance Publique - Hôpitaux de Paris \(AP-HP\)](#)

France

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**Institution**

**Hospital/Clinic/Other health care facility**

yon-HC de Lyon - La Croix Rousse (9) Clamart-HIA  
Percy (33)Colmar-Hôpitaux Civils de Colmar (4)  
Paris-APHP - Cochin (16)-Saint-Denis-Centre  
Cardiologique du Nord - Moulins Gémeaux (25)  
Antony-Hôpital Privé d'Antony (47)andoeuvre-lès-  
Nancy-CHRU de Nancy - Brabois (53)Brest-CHU de  
Brest, Paris-APHP - Bichat (1) Montfermeil-GHI Le  
Raincy Montfermeil (10), Lille-CHRU de Lille -  
Albert Calmette (8) Reims-CHU de Reims - Maison  
Blanche (21), Montpellier-CHU de Montpellier -  
Arnaud de Villeneuve (11) Orléans-CHR d'Orléans -  
La Source (15), Marseille-APHM - Nord (37) Pierre-  
Bénite-HC de Lyon - Sud (19), Dijon-CHRU de Dijon  
- François Mitterrand (34) Pringy-CHR d'Annecy  
(20), Crêteil-CHI Crêteil (5) Suresnes-Hôpital Foch

(57), La Tronche-CHU de Grenoble - La Tronche (6)  
Caen-CHU de Caen - Côte de Nacre (3), Le  
Kremlin-Bicêtre-APHP - Bicêtre (7 Amiens-CHU  
d'Amiens Sud (46), Besançon-CHU de Besançon -  
Jean Minjoz (39) Paris-GH Paris Saint Joseph (51)

## Networks

RAMSES Study Group, CRISALIS (Clinical Research  
Initiative in Severe Asthma : a Lever for Innovation  
& Science)

## Contact details

### **Study institution contact**

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[Study contact](#)

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### **Primary lead investigator**

Candice Estellat

[Primary lead investigator](#)

# Study timelines

## **Date when funding contract was signed**

Actual: 10/12/2018

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## **Study start date**

Planned: 01/09/2019

Actual: 30/09/2022

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## **Data analysis start date**

Planned: 01/03/2023

Actual: 01/05/2023

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## **Date of final study report**

Planned: 15/09/2023

# Sources of funding

- Pharmaceutical company and other private sector
- Other

# More details on funding

Astrazeneca, GlaxoSmithKLine, Sanofi, Boston Scientific, Novartis, French Society of Pneumology

# Regulatory

## **Was the study required by a regulatory body?**

No

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### **Is the study required by a Risk Management Plan (RMP)?**

Not applicable

## Methodological aspects

### Study type

#### Study type list

##### **Study type:**

Non-interventional study

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##### **Scope of the study:**

Effectiveness study (incl. comparative)

##### **Main study objective:**

In severe asthma patients after first failure of an anti-IL5/anti-IL-5R (mepolizumab or benralizumab), we aim to compare the variation of asthma control, measured by ACT, of two switching strategies : switching from anti-IL5/anti-IL-5R to an anti-IL4R (dupilumab) vs. switching from anti IL5/anti-IL-5R to another anti-IL5/anti-IL-5R.

## Study Design

### **Non-interventional study design**

Cohort

## Study drug and medical condition

## **Anatomical Therapeutic Chemical (ATC) code**

(R03DX09) mepolizumab

mepolizumab

(R03DX10) benralizumab

benralizumab

(D11AH05) dupilumab

dupilumab

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## **Medical condition to be studied**

Asthma

## **Population studied**

### **Age groups**

- Adults (18 to < 46 years)
- Adults (46 to < 65 years)
- Adults (65 to < 75 years)
- Adults (75 to < 85 years)
- Adults (85 years and over)

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### **Estimated number of subjects**

200

## **Study design details**

### **Outcomes**

Change in Asthma Control Test (ACT). Time Frame 6 months. ACT >20 (n,%)

Time frame 6 mo for all outcomes Change in Annual asthma exacerbation rate,

in Annual asthma severe exacerbation rate, in maintenance oral corticosteroids dose, in Forced expiratory volume in one second, Asthma Quality of Life Questionnaire, inSino-nasal Outcome Test 22, in Blood eosinophil count Maintenance of treatment at time of switch +Exploratory outcomes

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## **Data analysis plan**

Patient characteristics will be described .Use of Target trial emulation framework and propensity score framework for potential cofounders. Marginal effect will be estimated via linear regression model, adjusted on the propensity score applying IPTW (ATE). Bootstrap will be performed to estimate robust variances. Secondary endpoints analysis will involve logistic regression for binary variables, linear regression for continue variables in the weighted populations. Kaplan-Meier estimator is used to estimate survival probabilities over time. Missing data on covariates and outcomes will be managed by multiple imputations assuming data will be missing at random. Causal contrasts : modified intention-to-treat analysis. 3 Subgroups analysis according to history of chronic rhinosinusitis, treatment before the switch, and history of treatment by omalizumab. Sensitivity analysis, restriction to switches after 2020 and using an IPTW to get an ATT.

## **Data management**

### **ENCePP Seal**

The use of the ENCePP Seal has been discontinued since February 2025. The ENCePP Seal fields are retained in the display mode for transparency but are no longer maintained.

## **Data sources**

## **Data source(s), other**

Research on Severe Asthma (RAMSES), French nationwide cohort of severe asthma patients registered on ClinicalTrials.gov (NCT04077528) France

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## **Data sources (types)**

Other

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## **Data sources (types), other**

Prospective patient-based data collection

# Use of a Common Data Model (CDM)

## **CDM mapping**

No

# Data quality specifications

## **Check conformance**

Unknown

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## **Check completeness**

Unknown

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## **Check stability**

Unknown

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## **Check logical consistency**

Unknown

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# Data characterisation

**Data characterisation conducted**

No