

Markers that predict omalizumab response identified

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(HealthDay)—Baseline serum periostin levels and levels of serum free

immunoglobulin E (IgE) during treatment follow-up may be useful in assessing response to omalizumab treatment for asthma, according to a study published online April 26 in *Allergy*.

Tomoko Tajiri, from Kyoto University in Japan, and colleagues assessed the utility of biomarkers of type 2 inflammation (free serum IgE levels) in predicting omalizumab [treatment](#) responses. Response was defined as the absence of asthma exacerbation during the first year of treatment. The study included 30 patients who were treated with omalizumab for at least one year, with 27 of them treated for two years.

The researchers found that patients without exacerbations during the first year of treatment had significantly higher baseline serum periostin levels and blood eosinophil counts than patients with exacerbations. There was a negative association between baseline serum periostin levels, but not eosinophil counts, and free serum IgE levels after 16 or 32 weeks of treatment. Reduced exacerbation numbers at two years were seen in those with reduced free serum IgE levels during treatment. For the 14 [patients](#) who had exacerbations during the first year of treatment, exacerbation numbers gradually and significantly decreased over the two-year study period, with simultaneous significant reductions in free serum IgE levels.

"Baseline serum periostin levels and serum free IgE levels during treatment follow-up may be useful in evaluating responses to omalizumab treatment," conclude the authors.

Several authors report financial ties to the pharmaceutical industry. One author disclosed a patent application for serum periostin for treatment of bronchial asthma.

More information: [Abstract](#)
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