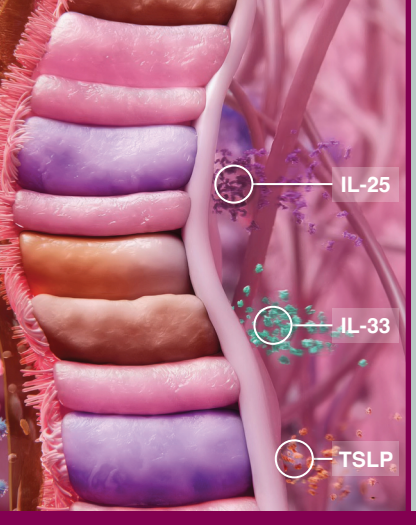

Epithelial Driven Disease Patient Cases

Gender: **Male**	Age: **32**	Diagnosis: **Severe asthma with upper airway disease**

32-year-old male with shortness of breath and wheezing

Background and clinical history

The patient is a 32-year-old male who complains of shortness of breath and periods of wheezing during physical activity at a visit with his family physician

Childhood

- History of childhood allergies and frequent ‘colds’ that would last for months
- As a child, he always experienced shortness of breath while exercising, but that resolved when he reached his early teens

Adulthood

- Dyspnoea and wheezing while exercising returned in his late 20s

Current situation

- **He complains he cannot keep up with his young children or even walk the dog**
- **He is exhausted during physical activity and has chronic nasal congestion**
  - Additionally, he experiences frequent sneezing, increased sinus pressure and rhinorrhoea
- **He states he has lost his sense of smell and has migraines during certain seasons**

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IL, interleukin; TSLP, thymic stromal lymphopoietin.

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Gender: **Male**	Age: **32**	Diagnosis: **Severe asthma with upper airway disease**

32-year-old male with shortness of breath and wheezing

Examination and diagnosis

Examination

- A physical exam reveals wheezing as well as nasal polyps

Diagnosis

- Allergic eosinophilic asthma with upper airway involvement and comorbid CRSwNP

Tests	
Spirometry (FEV_1 predicted)	62% + 18% improvement post β2-agonist
Biomarkers	
Blood eosinophil count	320 cells/μL
Total IgE	675 IU/mL
• Tree pollen (skin prick test)	Positive
• Grass (skin prick test)	Positive
FeNO	55 ppb
Scores	
NPS	5
SNOT-22	56

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CRSwNP, chronic rhinosinusitis with nasal polyps; ENT, ear, nose and throat; FeNO, fractional exhaled nitric oxide; FEV_1, forced expiratory volume in 1 second; ICS, inhaled corticosteroid; IgE, immunoglobulin E; LABA, long-acting beta agonist; NPS, nasal polyp score; ppb, parts per billion; SNOT, Sino–Nasal Outcomes Test.

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