

Evidence gap identifier	AA1
Brief title	Clinical and cost effectiveness of anti-interleukin-5 therapy for acute asthma exacerbation
Report	https://www.hiqa.ie/sites/default/files/2026-02/Anti-interleukin-5-therapy-in-adults-presenting-to-hospital-with-acute-asthma-A-systematic-review-of-clinical-and-cost-effectiveness.pdf
Date identified	18/06/2025
Identified by	CICER
Supported by	Systematic review
Population	Patients aged 16 years or older presenting with an acute exacerbation of asthma
Intervention	Treatment with an anti-IL-5 therapy (including reslizumab, mepolizumab or benralizumab) during an acute exacerbation
Comparator	Usual care or other treatment or no treatment
Outcome(s)	Death; intensive care admission; ventilation; subsequent severe asthma exacerbations; length of hospital stay; adverse events; any subsequent asthma exacerbation; asthma control; asthma-related quality of life
Setting	Acute care setting (emergency department, inpatient, or intensive care unit)
Study design	Randomised controlled trials; Economic evaluation studies
Further information	Anti-IL-5 therapy has shown promise in managing severe eosinophilic asthma, and case reports have begun to appear advocating for its evaluation in the treatment of acute asthma exacerbation. We evaluated the evidence for the use of anti-IL-5s for the treatment of acute asthma exacerbation. Only one small study met the inclusion criteria. No economic evaluation studies were located. Due to the lack of evidence identified in this review, limited conclusions regarding the potential value of anti-IL-therapy in this context may be made, with further primary research required to inform clinical guidelines.