# Assessment of a Patient-Centric Web Application Tool for Potential Adverse Events of Oral Corticosteroids

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Users found the tool simple to use and provided valuable, trustworthy, and novel information on OCS risk that they were previously unaware of.



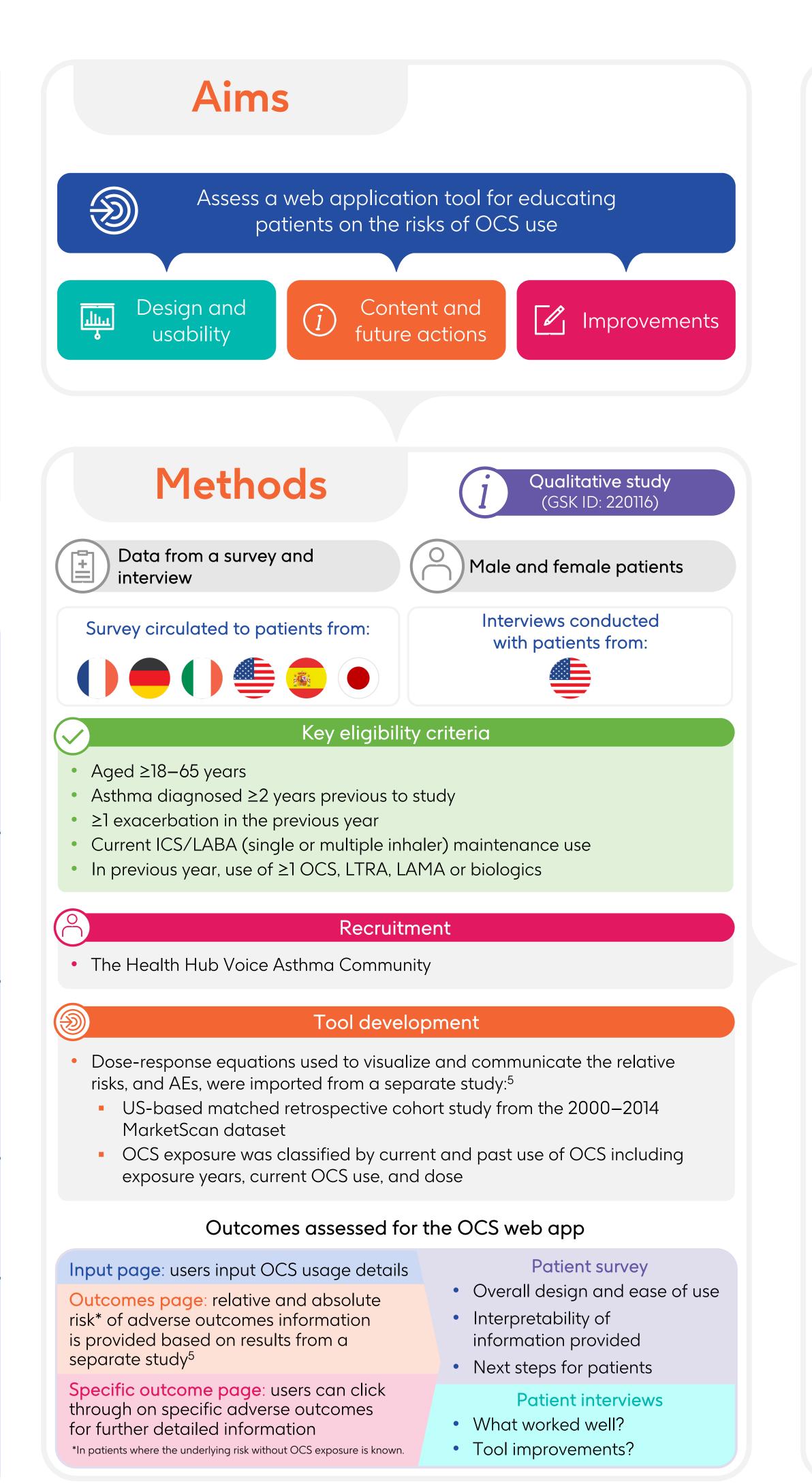
# Background

- OCS are frequently used in patients with severe asthma and uncontrolled symptoms, either as long-term maintenance therapy, or as rescue therapy for acute symptomatic exacerbations<sup>1,2</sup>
- Even short- and/or low-dose OCS treatment courses are associated with increased risk of adverse effects,<sup>3-5</sup> emphasizing the need to reduce exposure to OCS therapies via increased awareness<sup>6</sup>
- Tools that increase patient awareness through a shared decision-making process may increase patient education by communicating OCS exposure risk

## Conclusions

- Most patients found the tool on OCS risk simple to use, and the information provided considered valuable, trustworthy, and new for over three-quarters of participants
- More than two-thirds of participants would use the information from the tool to have discussions with their HCP, and therefore may assist with shared decision-making
- Providing context on the purpose of the tool and information on adverse outcomes, and more nuanced risk scoring based on a variety of patient characteristics may improve tool utility
- Future developments should investigate creating a tool to communicate absolute risk of OCS

Overall, these results suggest that this online web application, following further improvements, will be useful for raising awareness of OCS risk and informing shared decision-making and identifies a potential unmet need for online tools to support patient decision-making





#### **Abbreviations**

AE, adverse event; HCP, healthcare professional; ICS, inhaled corticosteroid; LABA, long-acting  $\beta_2$ -agonist; LAMA, long-acting muscarinic antagonist; LTRA, leukotriene receptor antagonist; OCS, oral corticosteroid.

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