SUPPLEMENTARY MATERIAL

Supplementary Tables

Supplementary Table 1. Cluster analysis

Clusters	Patients	Cluster characteristics
Clusters C1 • Exacerbations • OCS • Eosinophils	Patients 141	 Cluster characteristics More females (75.2%) with a median age of 55 (48.0, 65.0) years Reduced lung function: 86.5% had FEV₁ ≤80% Clinically significant exacerbations (median, 3.0 [2.0, 4.0]) Elevated total IgE (median, 246.0 [106.0, 517.0] IU/mL) FeNO levels: (43.0 [25.0, 52.0] ppb) Blood eosinophils: 81.6% of patient with ≥ 3% Mostly received ICS high dose (85.8%) and treated with OCS (74.5%) ER visits due to the asthma exacerbations (median, 3.0 [2.0, 4.0]) 68.1% reported positive skin tests Only 27.7% had family history of atopy
		• Only 27.7% had family history of atopy
C2Lung functionFeNOIgE	96	 More females (56.3%) with younger age (median, 40.5 [26.5, 51.0] years) than C1 cluster Better lung function: 42.7% had a FEV₁ ≤ 80% Less clinically significant exacerbations (median, 2.0 [1.0, 4.0]) Elevated FeNO levels and higher blood eosinophil percentages Total IgE values higher than C1 cluster Mostly receiving ICS high doses but fewer patients treated with OCS (45.8%) than C1 cluster Less ER visits due to asthma exacerbations (median, 1.0 [0.0, 3.0]) More patients reported positive skin tests (89.6%) than C1 cluster Almost half of the patients had a family history of atopy
C3Positive skin testsAtopy	12	 More patients reported positive skin tests 91.7% (11/12) and all were poorly controlled Greater proportion of patients had atopy Median time of 2.6 (0.0, 6.6) years from asthma diagnosis to severe asthma diagnosis, much shorter (P = 0.0073) elapsed time than C1, C2 and C4 clusters

J Investig Allergol Clin Immunol 2022; Vol. 32(3): 213-215 doi: 10.18176/jiaci.0731

		 Median time from asthma diagnosis to start of treatment with omalizumab was 20.0 (1.5, 28.9) years, >20 times the median time in C1, C2 and C4 clusters (P<0.0001) One patient (8.3%) had been admitted to ICU within the previous year
• ICU • ER visit	7	 Smallest cluster, mostly characterized by high rate (3.0 [2.0, 3.5]) and the severity of the exacerbations All patients had been admitted to ICU at least once within the previous year
• EX VISIT		 ER visits due to the asthma exacerbations (median, 5.0 [1.0, 6.0]; P<0.0001)

ER, emergency room; FEV₁, forced expiratory volume in one second; FeNO, fractional exhaled nitric oxide; ICS, inhaled corticosteroid; ICU, intensive care unit; OCS, oral corticosteroids

Non-severe asthma exacerbations were exacerbations that did not require oral corticosteroids, emergency assistance or hospitalization. If provider doubles the OCS dose after an episode, this was considered a severe or clinically significant asthma exacerbation.

J Investig Allergol Clin Immunol 2022; Vol. 32(3): 213-215 doi: 10.18176/jiaci.0731

Supplementary Table 2. Summary of the cluster calculation and patient distribution in each group

	Cluster Summary							
Cluster	Frequency	RMS Std Deviation	Maximum Distance from Seed to Observation	Radius Exceeded	Nearest Cluster	Distance Between Cluster Centroids		
1	141	0.8917	5.3017		1	2.4130		
2	96	0.9345	6.3766		2	2.4130		
3	12	1.0325	6.8262		2	4.3659		
4	7	0.9607	4.7255		2	5.8553		

RMS, root mean square

J Investig Allergol Clin Immunol 2022; Vol. 32(3): 213-215 doi: 10.18176/jiaci.0731

Supplementary Table 3. Mean values of canonical vectors for each cluster found

	Class Means on Canonical Variables								
Cluster	Cluster Can1 Can2 Can3								
1	-0.65422160	-0.64221837	1.04065998						
2	-0.19494051	0.14360993	-1.76731366						
3	-0.67037699	6.42119806	1.54153741						
4	17.00057973	-0.04116290	0.63294354						

Can1, canonical vector 1; Can2, canonical vector 2; Can3, canonical vector

Supplementary Table 4. Clusters demographics and clinical characteristics

		C1	C2	С3	C4	P-value test
		n=141	n=96	n=12	n=7	
Age (years)	Median	55.0	40.5	44.0	41.0	$< 0.0001^{\dagger}$
	(Q1, Q3)	(48.0, 65.0)	(26.5, 51.0)	(36.0, 51.5)	(30.0, 65.0)	
Female	n (%)	106 (75.2)	54 (56.3)	6 (50.0)	6 (85.7)	0.0058^{ζ}
Smoking status						
Non-smoker	n (%)	113 (80.2)	76 (79.2)	10 (83.3)	6 (85.7)	0.9594^{ζ}
Former smoker (without smoking ≥1)	n (%)	23 (16.3)	14 (14.6)	2 (16.7)	1 (14.3)	
Smoker	n (%)	5 (3.6)	6 (6.3)	0 (0.0)	0 (0.0)	
Number of comorbidities	Median	1.0 (0.0, 1.0)	1.0 (1.0, 2.0)	1.5 (1.0, 2.0)	1.0 (0.0, 1.0)	<0.0001†
	(Q1, Q3)					
Family history of atopy	n (%)	39 (27.7)	45 (46.9)	4 (33.3)	2 (28.6)	0.0162^{ζ}
Time from asthma diagnosis to severe asthma	Median	10.0	6.8	2.6	9.7	0.0073^{\dagger}
diagnosis (years)	(Q1, Q3)	(3.0, 19.4)	(2.2, 14.3)	(0.0, 6.6)	(1.6, 26.0)	
Duration of severe asthma until therapy	Median	1.2 (0.4, 2.8)	0.8 (0.1, 2.0)	20.0 (1.5,	2.0 (0.2, 4.9)	$< 0.0001^{\dagger}$
(years)	(Q1, Q3)			28.9)		
BMI (kg/m²)	Median	29.0 (25.6,	23.6 (20.6,	25.7 (23.8,	29.3 (26.8,	$< 0.0001^{\dagger}$
	(Q1, Q3)	32.5)	26.8)	28.0)	31.8)	
Daytime symptoms						
None or ≤ 2 days/week	n (%)	0 (0.0)	5 (5.2)	0 (0.0)	0 (0.0)	$< 0.0001^{\zeta}$
> 2 days/week	n (%)	21 (14.9)	49 (51.0)	3 (25.0)	2 (28.6)	
Daily symptoms	n (%)	82 (58.2)	36 (37.5)	8 (66.7)	5 (71.4)	
Continuous symptoms (several times a	n (%)	38 (27.0)	6 (6.3)	1 (8.3)	0 (0.0)	
day)						
Rescue medication						
None or ≤ 2 days/week	n (%)	1 (0.7)	5 (5.2)	0 (0.00)	1 (14.3)	$< 0.0001^{\zeta}$
>2 days/week (but not daily)	n (%)	34 (24.1)	49 (51.0)	4 (33.3)	2 (28.6)	
Every day	n (%)	74 (52.5)	39 (40.6)	8 (66.7)	4 (57.1)	
Several times a day	n (%)	32 (22.7)	3 (3.1)	0 (0.0)	0 (0.0)	

J Investig Allergol Clin Immunol 2022; Vol. 32(3): 213-215

© 2022 Esmon Publicidad

doi: 10.18176/jiaci.0731

		C1	C2	C3	C4	P-value test
		n=141	n=96	n=12	n=7	
Nighttime symptoms						
None	n (%)	7 (5.0)	9 (9.4)	0 (0.0)	1 (14.3)	0.0540^{ζ}
\leq 2 times/month	n (%)	11 (7.8)	15 (15.6)	2 (16.7)	2 (28.6)	
> 2 times/month	n (%)	22 (15.6)	22 (22.9)	1 (8.3)	1 (14.3)	
More than once a week	n (%)	54 (38.3)	35 (36.5)	6 (50.0)	2 (28.6)	
Common	n (%)	47 (33.3)	15 (15.6)	3 (25.0)	1 (14.3)	
ACT score	Median	13.0	15.00	13.00	15.00	0.2307^{\ddagger}
	(Q1, Q3)	(10.0, 15.0)	(11.00, 18.00)	(12.00, 16.00)	(15.00, 15.00)	
ACQ score	Median (Q1, Q3)	3.0 (2.0, 3.6)	1.8 (1.4, 2.2)	3.0 (3.0, 3.0)	1.5 (1.5, 1.5)	0.1051‡
Positive skin prick test	n (%)	96 (68.1)	86 (89.6)	11 (91.7)	3 (42.9)	$< 0.0001^{\zeta}$
Blood eosinophils						
<3%	n (%)	26 (18.4)	16 (16.7)	4 (33.33)	2 (28.57)	0.7189^{ζ}
3-<5%	n (%)	31 (22.0)	16 (16.7)	1 (8.33)	0 (0.00)	
5%-<8%	n (%)	40 (28.4)	27 (28.1)	3 (25.00)	3 (42.86)	
≥8%	n (%)	44 (31.2)	37 (38.5)	4 (33.33)	2 (28.57)	
$FEV_1 \leq 80\%$	n (%)	122 (86.5)	41 (42.7)	10 (83.3)	6 (85.7)	$< 0.0001^{\zeta}$
FeNO (ppb)	Median (Q1, Q3)	43.0 (25.0, 52.0)	34.5 (21.0, 60.0)	38.0 (16.0, 56.0)	22.0 (14.0, 28.0)	0.3414^{\dagger}
Serum IgE (IU/mL)	Median (Q1, Q3)	246.0 (106.0, 517.0)	397.5 (184.5, 825.5)	364.0 (68.0, 1361.0)	358.0 (144.0, 730.0)	0.0095^{\dagger}
Number of non-severe asthma episodes	Median (Q1, Q3)	5.0 (3.0, 9.0)	4.0 (2.0, 6.0)	6.5 (4.5, 18.5)	5.0 (1.0, 12.0)	0.0108^{\dagger}
No. of clinically significant and/or severe exacerbations	Median (Q1, Q3)	3.0 (2.0, 4.0)	2.0 (1.0, 4.0)	3.0 (2.0, 3.5)	5.0 (1.0, 6.0)	0.0120^{\dagger}
No. of visits to the emergency room due to asthma exacerbation	Median (Q1, Q3)	3.0 (2.0, 4.0)	1.0 (0.0, 3.0)	2.5 (1.5, 4.0)	5.0 (1.0, 6.0)	<0.0001†
No. of hospitalizations due to exacerbations	Median (Q1, Q3)	0.0 (0.0, 1.0)	0.0 (0.0, 0.0)	0.5 (0.0, 1.5)	3.0 (1.0, 5.0)	<0.0001†

J Investig Allergol Clin Immunol 2022; Vol. 32(3): 213-215 doi: 10.18176/jiaci.0731

		C1	C2	С3	C4	P-value test
		n=141	n=96	n=12	n=7	
No. of admissions to ICU due to exacerbations	Median (Q1, Q3)	0.0 (0.0, 0.0)	0.0 (0.0, 0.0)	0.0 (0.0, 0.0)	1.0 (1.0, 3.0)	<0.0001†
No. of admissions to ICU due to exacerbations (ranges)						
0	n (%)	141 (100.0)	96 (100.0)	11 (91.7)	0 (0.0)	$<.0001^{\zeta}$
≥1	n (%)	0 (0.0)	0 (0.0)	1 (8.3)	7 (100.0)	
Oral corticosteroids	n (%)	105 (74.5)	44 (45.8)	7 (58.3)	5 (71.4)	$< 0.0001^{\zeta}$
Dose of oral corticosteroids (mg)	Median (Q1, Q3)	10.0 (0.0, 50.0)	10.0 (0.0, 30.0)	50.0 (45.0, 50.0)	30.0 (0.0, 50.0)	0.4691 [†]

ACT: Asthma Control Test; ACQ: Asthma Control Questionnaire; BMI: Body mass index; FeNO: Fractional exhaled nitric oxide; FEV₁: Forced expiratory volume in 1 second; ICU: Intensive care unit

Non-severe asthma exacerbations were exacerbations that did not require oral corticosteroids, emergency assistance or hospitalization. If provider doubles the OCS dose after an episode, this was considered a severe or clinically significant asthma exacerbation.

[‡] ANOVA; * Chi-square test; ζ Fisher's exact test; † Kruskal-Wallis test; §Wilcoxon signed-rank test

Supplementary Table 5. Comparison of Clusters 1 and 2

		C1	C2	P-value test
		n=141	n=96	
Age (years)	Median	55.0	40.5	<0.0001§
	(Q1, Q3)	(48.0, 65.0)	(26.5, 51.0)	
Female	n (%)	106 (75.2)	54 (56.3)	0.0023*
Smoking status				
Non-smoker	n (%)	113 (80.1)	76 (79.2)	0.6018*
Former smoker (without	n (%)	23 (16.3)	14 (14.6)	
smoking ≥1 years)				
Smoker	n (%)	5 (3.6)	6 (6.3)	
Number of comorbidities	Median (Q1, Q3)	1.0 (0.0, 1.0)	1.0 (1.0, 2.0)	<0.0001§
Family history of atopy	n (%)	39 (27.7)	45 (46.9)	0.0023^{ζ}
Time from asthma diagnosis to severe	Median (Q1,	10.0	6.8	0.0635^{\S}
asthma diagnosis (years)	Q3)	(3.0, 19.4)	(2.2, 14.3)	
Duration of severe asthma until	Median (Q1,	1.2	0.8	0.0083^{\S}
therapy (years)	Q3)	(0.4, 2.8)	(0.1, 2.0)	
BMI (kg/m²)	Median (Q1,	29.0	23.6	<0.0001§
	Q3)	(25.6, 32.5)	(20.6, 26.8)	
Daytime symptoms				,
None or ≤ 2 days/week	n (%)	0 (0.00)	5 (5.2)	$< 0.0001^{\zeta}$
> 2 days/week	n (%)	21 (14.9)	49 (51.1)	
Daily symptoms	n (%)	82 (58.2)	36 (37.5)	
Continuous symptoms (several times a day)	n (%)	38 (27.0)	6 (6.3)	
Rescue medication				
None or ≤ 2 days/week	n (%)	1 (0.7)	5 (5.2)	$< 0.0001^{\zeta}$
> 2 days/week (but not daily)	n (%)	34 (24.1)	49 (51.0)	
Every day	n (%)	74 (52.5)	39 (40.6)	
Several times a day	n (%)	32 (22.7)	3 (3.1)	
Night time symptoms	11 (70)	02 (22.7)	0 (0.1)	
None	n (%)	7 (4.96)	9 (9.4)	0.0096*
≤ 2 times/month	n (%)	11 (7.8)	15 (15.6)	0.0070
> 2 times/month	n (%)	22 (15.6)	22 (22.9)	
More than once a week	n (%)	54 (38.3)	35 (36.5)	
Common	n (%)	47 (33.3)	15 (15.6)	
	11 (70)	47 (33.3)	13 (13.0)	
Control as per GEMA Partially controlled asthma	n (04)	6 (4.3)	20 (20 %)	<0.0001*
•	n (%)	` ′	20 (20.8)	<0.0001*
Poorly controlled asthma	n (%)	135 (95.7)	76 (79.2)	0.00014
Positive skin prick test	n (%)	96 (68.1)	86 (89.6)	0.0001*
Blood eosinophils count	(0/)	26 (10.4)	16 (16 5)	0.6140#
<3%	n (%)	26 (18.4)	16 (16.7)	0.6113*

J Investig Allergol Clin Immunol 2022; Vol. 32(3): 213-215 doi: 10.18176/jiaci.0731

© 2022 Esmon Publicidad

		C1	C2	P-value test
		n=141	n=96	
3-<5%	n (%)	31 (22.0)	16 (16.7)	
5%-<8%	n (%)	40 (28.4)	27 (28.1)	
≥8%	n (%)	44 (31.2)	37 (38.5)	
FEV ₁				
≤ 80%	n (%)	122 (86.5)	41 (42.7)	<.0001*
>80%	n (%)	19 (13.5)	55 (57.3)	
FeNO (ppb)	Median	43.0	34.5	0.5129^{\S}
	(Q1, Q3)	(25.0, 52.0)	(21.0, 60.0)	
Serum IgE (IU/mL)	Median	246.0 (106.0,	397.5 (184.5,	0.0007^{\S}
	(Q1, Q3)	517.0)	825.5)	
Number of non-severe asthma	Median	5.0 (3.0, 9.0)	4.0 (2.0, 6.0)	0.0027^{\S}
episodes	(Q1, Q3)			
No. of clinically significant and/or	Median	3.0 (2.0, 4.0)	2.0 (1.0, 4.0)	0.0020^{\S}
severe exacerbations	(Q1, Q3)			
No. of visits to the emergency room	Median	3.0 (2.0, 4.0)	1.0 (0.0, 3.0)	<0.0001§
due to asthma exacerbation	(Q1, Q3)			
No. of hospitalizations due to	Median	0.0 (0.0, 1.0)	0.0(0.0, 0.0)	0.3005§
exacerbations	(Q1, Q3)			
Oral corticosteroids	n (%)	105 (74.5)	44 (45.8)	<0.0001*
Dose of oral corticosteroids (mg)	Median	10.0	10.0	0.9074^{\S}
_	(Q1, Q3)	(0.0, 50.0)	(0.0, 30.0)	
Short-acting β_2 agonists, as needed	n (%)	137 (97.2)	92 (95.8)	0.7181^{ζ}

ACT: Asthma Control Test; ACQ: Asthma Control Questionnaire; BMI: Body mass index; FeNO: Fractional exhaled nitric oxide; FEV₁: Forced expiratory volume in 1 second. *, Chi-square test; ζ , Fisher's exact test; \dagger , Kruskal-Wallis test; δ , Wilcoxon signed-rank test

Non-severe asthma exacerbations were exacerbations that did not require oral corticosteroids, emergency assistance or hospitalization. If provider doubles the OCS dose after an episode, this was considered a severe or clinically significant asthma exacerbation.

Supplementary Table 6. Summary of results from multivariate analysis

		Cluster 1 (n=141)	Cluster 2 (n=96)	P-value test
Inhaled corticosteroids?		, ,	, ,	
Missing	n	0	0	
Valid	n	141	96	
No change	n (%)	133 (94.33)	81 (84.38)	.0111*
Yes→No	n (%)	8 (5.67)	15 (15.63)	
Was the dose of inhaled corticosteroids of	decreased	!?		
Missing	n	10	16	
Valid	n	131	80	
No	n (%)	65 (49.62)	47 (58.75)	$.2046^{\zeta}$
Yes	n (%)	66 (50.38)	33 (41.25)	
Oral corticosteroids?				
Missing	n	0	0	
Valid	n	141	96	
No change	n (%)	52 (36.88)	58 (60.42)	$.0005^{\zeta}$
No→Yes	n (%)	1 (0.71)	0 (0.00)	
Yes→No	n (%)	88 (62.41)	38 (39.58)	
Did the number of non-severe asthma ep	oisodes de	ecrease?		
Missing	n	0	2	
Valid	n	141	94	
No	n (%)	3 (2.13)	9 (9.57)	$.0150^{\zeta}$
Yes	n (%)	138 (97.87)	85 (90.43)	
Did asthma severity improve as per GE	MA?			
Missing	n	1	0	
Valid	n	140	96	
No	n (%)	1 (0.71)	0 (0.00)	1.0000^{ζ}
Yes	n (%)	139 (99.29)	96 (100.00)	
Was rescue medication reduced?			•	
Missing	n	0	0	
Valid	n	141	96	
No	n (%)	2 (1.42)	1 (1.04)	1.0000^{ζ}
Yes	n (%)	139 (98.58)	95 (98.96)	

GEMA: Spanish Guidelines on the Management of Asthma.

J Investig Allergol Clin Immunol 2022; Vol. 32(3) doi: 10.18176/jiaci.0731

^{*}Chi-square test; ζ , Fisher's exact test