

SUPPLEMENTARY MATERIAL
APPENDIX**Appendix 1. Members of the Register of Severe Asthma of the Region of Murcia Group****Registro de Asma GRAve de la Región de MURcia (RE-ASGRAMUR)***Steering Committee*

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Investigators

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Appendix 2. Methods

We recorded the following characteristics: age, time with disease, personal history (comorbidities), type 2 biomarkers, and previous systemic/biological treatments. Disease control was assessed based on the Asthma Control Test (ACT), use of oral corticosteroids, and prebronchodilator forced expiratory volume in the first second (prebronchodilator FEV₁) scores at baseline, and at follow-up weeks 4 and 12.

Dupilumab was prescribed following the approved dosage: initial dose of 600 mg and then 300 mg every 2 weeks in patients taking long-term oral corticosteroids use or any relevant type 2 comorbidity, or 400 mg and then 200 mg every 2 weeks in the remaining patients. This study complied with guidelines on the indication of dupilumab, which was funded by the Spanish Agency of Medicines and Medical Products (Agencia Española de Medicamentos y Productos Sanitarios, AEMPS). The treatment effect was monitored according to regulations.

Lung function was measured according to the reference values and z score set out in the guidelines of the Spanish Society of Pulmonology and Thoracic Surgery.

Fractional exhaled nitric oxide was measured using a NioxVero electrochemical analyzer according to standard procedures.

The diagnosis of polyposis was established using nasal endoscopy and/or sinus computed tomography.

The presence of atopy was established based on positive skin test or specific IgE results.