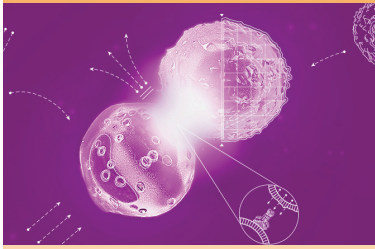


Improving Care in Eosinophil-associated Diseases (EADs): A Charter

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Eosinophils are a type of white blood cells that have a major effect on the immune system.

Unmet Need in EADs

EADs are associated with substantial patient burden, including chronic, debilitating symptoms; economic burden; decreased health-related quality of life; and the need for repeated visits to multiple different healthcare professionals (HCPs), emergency departments, and/or hospitals.



EADs involve abnormal regulation of the number and/or activation state of eosinophils, which can lead to inflammation. EADs can affect multiple organ systems and tissues:



Respiratory



Dermatological



Gastrointestinal

4 Key Principles

Developed by leading patient advocacy groups and treating clinicians, the Patient Charter for EADs outlines a set of **4 key rights** which people living with these conditions should expect from their care



Principle 1

People with EADs, their support networks, HCPs, and the public must have greater awareness and education about EADs.

Targeted education and awareness programs for HCPs to drive timely diagnosis, as well as patient education campaigns and resources

Principle 2

People with EADs must receive a timely, accurate diagnosis.

Establish clear referral guidelines and an easily accessible registry of EAD experts from whom patients are more likely to receive a clear, accurate, and timely diagnosis

Principle 3

All people with EADs must have access to an appropriate multidisciplinary team (MDT), when necessary.

Increase use of telemedicine, disease management smartphone apps, and home diagnostic kits or biomarker monitoring, as well as increased electronic record-sharing across a patient's MDT

Principle 4

People with EADs must have access to safe and effective treatment options without unnecessary regulatory delays.

Robust global treatment guidelines need to be developed or updated to reflect new treatment options, which address the underlying causes of the disease