Biologics in Respiratory Care

Q&A WITH JAMES TRACY, DO



Q. What are biologics?

Biologics are a class of medications that target a specific area of inflammation in a treatment target. If the area of concern is your lungs, biologics target the lining of the airways, also known as lung mucosa. Biologics have been shown to improve lung function, break down mucus in the airways, and facilitate structural changes in the airways.¹

Each patient is different and responds to treatments differently.



Q. How can biologics improve respiratory conditions?

Biologics target the specific inflammatory pathways involved in the development of asthma, allergic diseases and other respiratory illnesses. This specificity allows for personalized treatment options because biologics attack different root causes of each disease.

Q. What are the barriers to accessing biologics?

Many insurance companies do not want to cover biologics because they tend to be newer and consequently more expensive. Instead, insurance companies will often approve the use of medications like corticosteroids first which in most cases carry substantially more side effects. Patients then must fail treatment to potentially be approved for a biologic.

Sometimes insurance companies approve only one or a few types of biologics for respiratory conditions. But each patient is different and responds to treatments differently, so ensuring access to the full range of biologics is important for personalized care.

Q. How can policymakers improve access to biologic treatments?

Policymakers should reduce barriers to biologic treatments for respiratory conditions.

Patients often need to move to the next level of therapy—like a biologic—but insurers often don't allow that to happen. And each time a patient is denied, reevaluation is needed, which is costly and time-consuming for both clinicians and patients.

Q. What do you think is the future of biologics in respiratory care?

I think that the use of biologics will continue to grow. For a long time, there were little to no options for respiratory patients. Then, the first biologic became available, offering patients hope of better disease management. Now, we have several biologics available in respiratory care, offering patients new options for managing asthma, COPD, nasal polyps and more. It's an exciting time to be treating patients, with more options available than ever before.



Policymakers should reduce barriers to biologic treatments for respiratory conditions.

 Varricchi G, Poto R, Lommatzsch M, et al. Biologics and airway remodeling in asthma: early, late, and potential preventive effects. Allergy. 2025;80(2):408-422. doi:10.1111/ all.16382

ABOUT THE AUTHOR

James Tracy, DO is the President of the American College of Asthma Allergy and Immunology and a board-certified allergist practicing in Omaha, NE.



The Alliance for Patient Access is a national network of policy-minded health care providers advocating for patient-centered care.

AllianceforPatientAccess.org



