What is claimed is:

1. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament for reducing from baseline one or more biomarkers in a subject suffering from severe asthma,

wherein the antibody comprises a heavy chain comprising heavy chain complementarity determining region (HCDR) sequences of SEQ ID NOs: 148, 150, and 152, and a light chain comprising light chain complementarity determining region (LCDR) sequences of SEQ ID NOs: 156, 158, and 160,

wherein the medicament is an add-on maintenance treatment to a moderate-to-high dose inhaled corticosteroid (ICS) and a second controller medication, and

wherein the one or more biomarkers are selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

2. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament, wherein said medicament is administered as an initial dose followed by one or more secondary doses, for reducing from baseline one or more biomarkers in a subject suffering from severe asthma,

wherein the antibody comprises a heavy chain comprising heavy chain complementarity determining region (HCDR) sequences of SEQ ID NOs: 148, 150, and 152, and a light chain comprising light chain complementarity determining region (LCDR) sequences of SEQ ID NOs: 156, 158, and 160,

wherein the medicament is an add-on maintenance treatment to the moderate-to-high dose inhaled corticosteroid (ICS) and a second controller medication, and

wherein the one or more biomarkers are selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

3. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament for reducing from baseline one or more biomarkers in a subject with severe asthma that is inadequately controlled with a moderate-to-high dose inhaled corticosteroid (ICS) and a second controller medication, comprising sequentially administering to the subject a single initial dose of a medicament comprising a therapeutically effective amount of the antibody, wherein the antibody specifically binds an interleukin-4 receptor (IL-4R), and

wherein administration of the single initial dose is followed by one or more secondary doses of the medicament comprising the antibody,,

wherein the antibody comprises a heavy chain comprising heavy chain complementarity determining region (HCDR) sequences of SEQ ID NOs: 148, 150, and 152, and a light chain comprising light chain complementarity determining region (LCDR) sequences of SEQ ID NOs: 156, 158, and 160,

wherein the medicament is an add-on maintenance treatment to the moderate-to-high dose inhaled corticosteroid (ICS) and the second controller medication, and

wherein one or more biomarkers are selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

4. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament for reducing from baseline one or more biomarkers in a subject suffering from severe asthma,

wherein the antibody comprises a heavy chain variable region (HCVR)/light chain variable region (LCVR) sequence pair of SEQ ID NOs: 162/164,

wherein the medicament is an add-on maintenance treatment administered in combination with a background therapy, and

wherein the one or more biomarkers are selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

5. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament for treating severe asthma in a patient,

wherein the antibody comprises heavy chain complementarity determining region (HCDR) sequences of SEQ ID NOs: 148, 150 and 152, and comprises light chain complementarity determining region (LCDR) sequences of SEQ ID NOs: 156, 158 and 160,

wherein the medicament is an add-on maintenance treatment administered in combination with a background therapy, and

wherein the patient achieves a reduction from baseline one or more biomarkers selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

6. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament for reducing or eliminating a severe asthma patient’s dependence on a background asthma therapy comprising inhaled corticosteroids (ICS), long-

acting beta-agonists (LABA), or a combination thereof for the treatment of one or more asthma exacerbations in a patient with severe asthma that is partially controlled or uncontrolled with a background asthma therapy comprising an ICS, a LABA, or a combination thereof,

wherein the patient is administered a defined dose of a therapeutically effective amount of the antibody at a defined frequency for an initial treatment period while maintaining the patient's background asthma therapy for the initial treatment period, wherein the antibody comprises heavy chain complementarity determining region (HCDR) sequences of SEQ ID NOs: 148, 150 and 152, and comprises light chain complementarity determining region (LCDR) sequences of SEQ ID NOs: 156, 158 and 160,

wherein the dosage of ICS, LABA, or a combination thereof administered is gradually reduced or eliminated over the course of a subsequent treatment period while continuing to administer the antibody to the patient at the defined frequency and dose used during the initial treatment period, and

wherein the patient achieves a reduction from baseline one or more biomarkers selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

7. Use of an antibody that specifically binds to interleukin-4 receptor (IL-4R) in the manufacture of at least one medicament for reducing the incidence of one or more asthma exacerbations in a subject suffering from severe asthma,

wherein the antibody comprises heavy chain complementarity determining region (HCDR) sequences of SEQ ID NOs: 148, 150 and 152, and comprises light chain complementarity determining region (LCDR) sequences of SEQ ID NOs: 156, 158 and 160,

wherein the medicament is an add-on maintenance treatment administered in combination with a background therapy, and

wherein the subject achieves a reduction from baseline one or more biomarkers selected from the group consisting of FeNO level, total IgE level, eotaxin-3 level, and TARC level.

8. The use according to any one of claims 1-7, wherein the incidence of one or more asthma exacerbations is reduced, wherein the asthma exacerbation is selected from the group consisting of:

(a) a 30% or greater reduction from baseline in morning peak expiratory flow (PEF) on two consecutive days;

(b) six or more additional reliever puffs of albuterol or levalbuterol in a 24-hour period (compared to baseline) on two consecutive days; and

(c) a deterioration of asthma requiring:

(i) systemic (oral and/or parenteral) steroid treatment, or

(ii) an increase in inhaled corticosteroids to at least 4 times the last dose received prior to discontinuation, or

(iii) hospitalization.

9. The use according to any one of claims 1-7, wherein the medicament is formulated for administration to the subject at a dosing frequency of once every two weeks.

10. The use according to any one of claims 1-7, wherein the initial and secondary doses are 75 mg to 600 mg of the antibody.

11. The use according to any one of claims 1-7, wherein said medicament is formulated for administration to the subject systemically, subcutaneously or intravenously.

12. The use according to any one of claims 1-7, wherein said medicament is formulated for administration to the subject using an autoinjector, a needle and syringe, or a prefilled pen delivery device.

13. The use according to any one of claims 1-10, wherein said medicament is formulated for administration with a background therapy selected from the group consisting of a TNF inhibitor, an IL-1 inhibitor, an IL-5 inhibitor, an IL-8 inhibitor, an IgE inhibitor, a steroid, a leukotriene inhibitor, a methylxanthine, an NSAID, nedocromil sodium, cromolyn sodium, an anti-fungal agent, and a combination thereof.

14. The use according to any one of claims 1-7, wherein said medicament is formulated for administration with a background therapy comprising an inhaled corticosteroids (ICS) and/or a long-acting beta-agonist (LABA), optionally wherein:

the ICS is fluticasone, budesonide, or mometasone;

the LABA is salmeterol or formoterol;

the ICS/LABA combination is fluticasone/salmeterol, budesonide/formoterol or mometasone/formoterol;

the dosage of LABA, ICS, or a combination thereof is gradually reduced or eliminated over the course of 2 to 8 weeks; or

the subject is a subject whose background therapy comprises LABA and ICS or LABA only eliminates the dosage of LABA at the end of the subsequent treatment period.

15. The use according to any one of claims 1-7, wherein the antibody comprises a heavy chain variable region (HCVR)/light chain variable region (LCVR) sequence pair of SEQ ID NOs: 162/164.

16. The use according to claim 15, wherein the antibody is dupilumab.

17. The use according to any one of claims 1-16, wherein the subject has asthma with Type 2 inflammation.

18. The use according to claim 17, wherein the subject has elevated blood eosinophils and/or an elevated level of fractional exhaled nitric oxide (FeNO).

19. The use according to claim 18, wherein the subject has a blood eosinophil level of at least 300 cells per microliter, and/or a sputum eosinophil level of at least 3%.

20. The use of claim 2 or 3, wherein each of the secondary doses is administered 1 to 8 weeks after the immediately preceding dose.

21. The use of claim 2 or 3, wherein a systemic corticosteroid is administered to the subject before, after, or concurrent with the medicament.

22. The use of claim 2 or 3, wherein the initial dose and the secondary doses of the medicament each comprises the same amount of the antibody.

23. The use of claim 2 or 3, wherein the initial dose and the secondary doses of the medicament are administered every two weeks.

24. The use of claim 2 or 3, wherein the initial dose and the secondary doses of the medicament are administered every four weeks.

25. The use of claim 2, wherein at least 8 secondary doses of the antibody are administered to the subject, wherein each of the secondary doses is administered 2 weeks after the immediately preceding dose.

26. The use according to any one of claims 1-25, wherein the medicament is an add-on maintenance treatment.