

EFFECTIVENESS AND SAFETY OF OMALIZUMAB IN CHRONIC IDIOPATHIC URTICARIA

R03 - Anti

4CPS-181

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BACKGROUND

Omalizumab → recombinant humanized monoclonal antibody that suppress allergen-mediated skin reactions through its block of IgE receptor in basophils and mast cells. It is used in patients with chronic idiopathic urticaria who remained symptomatic despite antihistamine treatment.

PURPOSE

To assess the effectiveness and safety of omalizumab in chronic idiopathic urticaria in clinical practice.

MATERIAL AND METHODS

- Descriptive retrospective study.
- **Patients** treated with omalizumab for more than 6 months between 01/01/2014 and 31/03/2018.
- **Source of information:** Electronic clinical history and prescription program Farmatools®.
- **Recorded dates:** sex, age, previous treatment, dosage, number of doses received, duration of treatment and time until relapse.

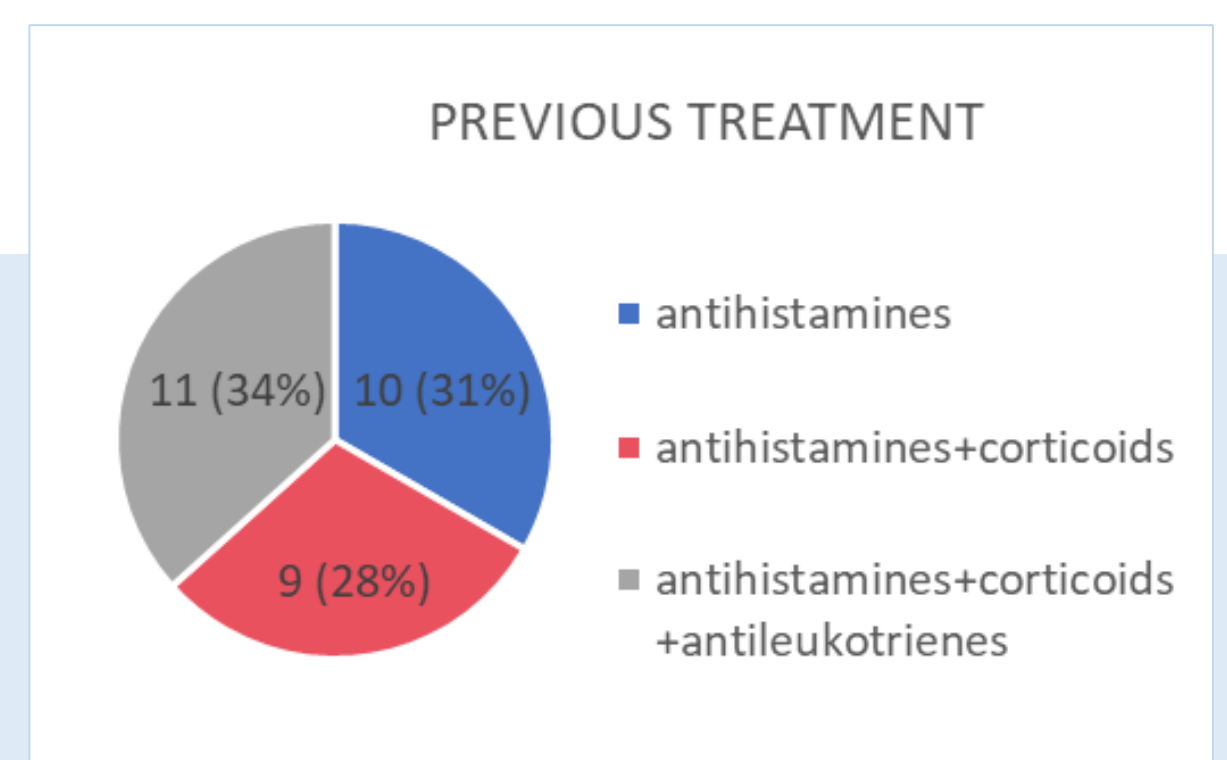
EFFECTIVENESS → measured by urticaria activity score during a 7-day period (UAS7). UAS7 ≤ 6 after 6 months of treatment was considered effective.

RELAPSE → defined as loss of effectiveness.

SAFETY → evaluated according to adverse effects (AE) profile.

RESULTS

- 32 patients: 8 (25%) men and 24 (75%) women. Mean age = 45 (18-79) years.
- **Initial UAS7** >15 in all patients; in 11 (34%) cases it was >25.
- Effectiveness was not evaluated in 2 patients due to lack of information.



EFFECTIVENESS:

- **Initially** → all patients received 300 mg of omalizumab once a month for 6 months. After this time 26 (81%) patients achieved a UAS7 ≤ 6.
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- **Retreatment** → 19 (59%) patients relapsed after a mean time of 4 (1-14) months, and received a 6-month retreatment. After retreatment 12 (38%) patients reached UAS7 ≤ 6.
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- **Maintenance** → required in 14 (44%) patients, with a dose of 300 mg in 6 (19%) patients and 150 mg in 8 (25%). After 6 months of maintenance treatment UAS7 was ≤ 6 in 10 (31%) patients.
 - In 4 (12%) cases UAS7 was never ≤ 6.

SAFETY: No AE were reported during the treatment.

CONCLUSIONS

- Omalizumab was effective in most cases after a 6-months treatment, but more than a half of patients required retreatment.
- Maintenance with lower doses was used in a considerable percentage of patients.
- Tolerance was excellent, without AE founded.



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