

EXPERIENCE WITH OMALIZUMAB IN THE TREATMENT OF UNCONTROLLED PERSISTENT ASTHMA



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BACKGROUND

- ✓ Allergic asthma is the most prevalent phenotype of severe asthma in which treatment with Omalizumab has been proven to be beneficial.

OBJECTIVES

- ✓ Analyse the effectiveness, efficiency and safety of Omalizumab in patients with uncontrolled moderate-to-severe asthma.

MATERIAL AND METHODS

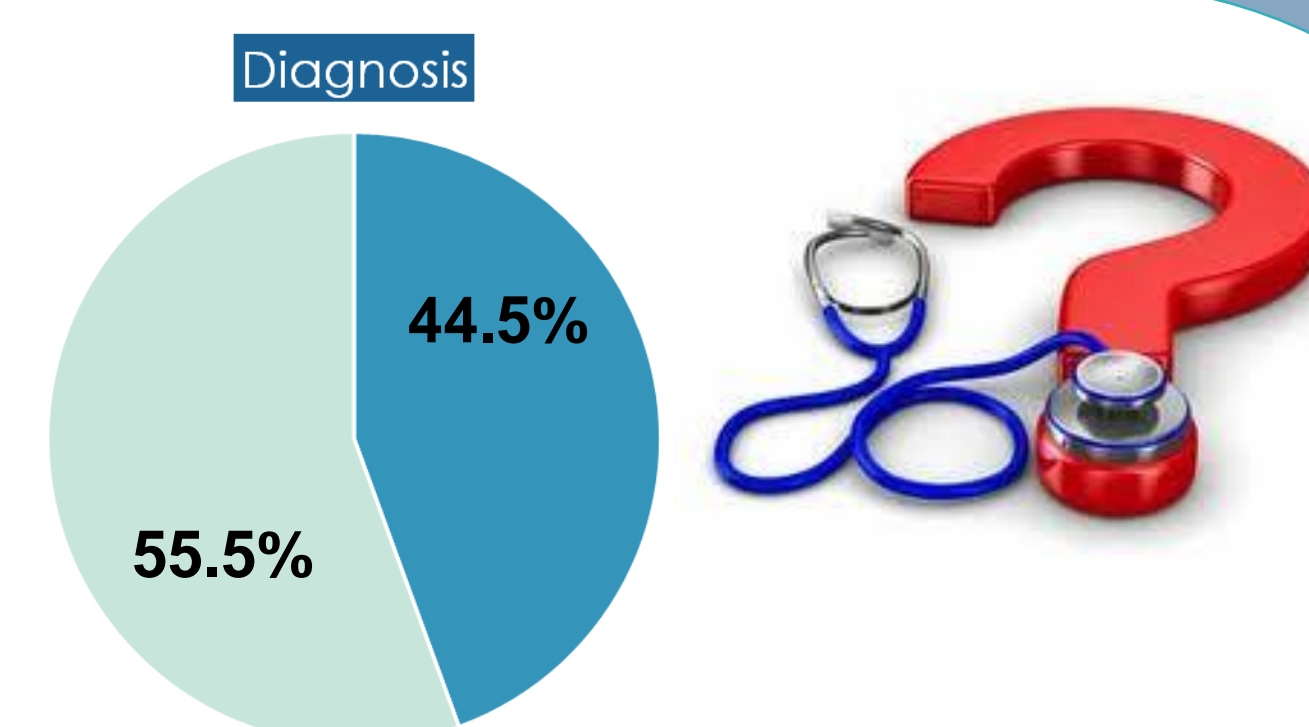
- ✓ Retrospective observational study of all patients with uncontrolled persistent asthma who received omalizumab for at least 52 weeks from March 2007 until September 2018.
- ✓ Variables collected were: age, sex, diagnosis, baseline IgE levels, FEV1 (baseline and at 52 weeks after omalizumab); number of exacerbations (NEX), corticosteroid cycles (CC) and emergency visits (EV) 12 months prior to omalizumab and at 12 months after, duration, discontinuation and side effects; and ACT quality of life questionnaire after last administration.
- ✓ The main variable was the reduction in NEX and as secondary variables reduction in CC and EV. Efficiency was estimated by the reduction in EV/patient cost

RESULTS

N = 36

- 67% females
- Mean age 44,2 years (SD: 16,9)
- Mean IgE level 590.7 IU/ml (SD: 1210.2)
- 70% of patients FEV1 <80%.

- Asthma moderate-severe
- Asthma severe



Average treatment duration was 52 months (SD=30)

Variables prior and after omalizumab	12 months prior omalizumab	12 months after omalizumab
Number of exacerbations (NEX)	4.5 (SD=3),	0.6 (SD=0.9)
Corticosteroid cycles (CC)	4.4 (SD=3)	0.7 (SD=0.9)
Emergency visits (EV)	2.2 (SD=1.8)	0.3 (SD=0.6)

20 patients discontinued treatment

Reason for discontinuation	Number of patients
Because of efficacy	3
Inefficacy	12
Poor tolerance (diarrhoea, myalgias and tremors)	1
Hospital change	4

50% patients with decreased lung function reached FEV1 >80% after 52 weeks

The mean cost of asthma EV/patient

Prior to omalizumab	422.9€ (SD=356.8)
After omalizumab	97.2 € (SD=247.4)

After last administration of omalizumab: 72% of patients under control or reasonably well controlled and 28% not well controlled

CONCLUSIONS

- This analysis shows that omalizumab decreases NEX and CC, achieving a substantial improvement in patients with uncontrolled moderate-to-severe asthma, as well as a reduction in the direct costs of EV.
- Interruption of treatment in three patients suggests that the effects of omalizumab may persist over time.