

USE OF OMALIZUMAB FOR TREATMENT OF MAST CELL ACTIVATION DISEASE

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Background

Evidence of the efficacy of omalizumab for mast cell activation disease (MCAD) is collected only at several case series and isolated cases. Not approved indication in USA or Europe.

Purpose

To describe omalizumab effectiveness in a patient with MCAD

Material and methods

Woman patient of 40 years old with MCAD syndrome, debuting with symptoms such as hives, itching, angioedema, flushing, palpitations, diarrhea, dizziness, dyspnea and episodes of anaphylaxis.

After maximum dose of antihistamines, the patient even refers with urticaria symptoms, with the same clinic, resulting constraint to their usual daily activities.

Results

She had improvement in symptoms with omalizumab therapy, reducing the flushing, urticaria, tachycardias and better exercise tolerance.

These symptoms had not improved at maximum dose of anti-histamine. To management of the disease, previous studies used the same dose of omalizumab, regardless of the levels of IgE and patient weight.

She describes generalized tingling the days prior to the next dose and days after administration. She continues to receive omalizumab 300 mg subcutaneously every 4 weeks showing a good clinical evolution.

Conclusions

This case supports the potential efficacy of omalizumab as mast cell stabilizer for MCAS, in adults not responding to maximal anti-histamine therapy.