Poster 224

Dhaval Patil | dhaval.patil@novartis.com

Burden of angioedema among patients with chronic spontaneous urticaria in the United States

Patil D.¹, Balp M-M.², Rodrigues J.¹, Kohli R.K.³, Krupsky K.⁴, Balkaran B.L.⁴, Gupta S.⁴, Williams B.J.⁵, Soong W.⁶

¹Novartis Pharmaceuticals Corporation, USA, ²Novartis Pharma AG, Basel, Switzerland, ³Novartis Healthcare Pvt Ltd., Hyderabad, India, ⁴Cerner Enviza, an Oracle Company, Kansas City, MO, USA, ⁵Dermatologist, Midvale, UT, USA, ⁶AllerVie Health-Alabama Allergy & Asthma Center, Clinical Research Center of Alabama, Birmingham, AL, USA



To download a copy of this poster, visit the web at: https://bit.ly/UKCAAAAI

Copies of this poster obtained through quick response (QR) code are for personal use only and may not be reproduced without written permission of the author

CONCLUSIONS

- CSU patients with angioedema reported significantly worse physical and mental outcomes, lower utility scores, a higher percentage with anxiety and depression, along with significantly increased ER visits and hospitalizations compared to patients without angioedema in the US
- Similarly, CSU patients with angioedema reported a significantly higher work and activity impairment than those without angioedema

Poster presented at The American Academy of Allergy, Asthma & Immunology Annual Scientific Meeting, Washington, DC, 23-26 February 2024



OBJECTIVE • To evaluate the burden of CSU on patients with and without angioedema in the United States (US)

Demographics and Clinical Characteristics • Among the 74,994 respondents, 371 had a physician diagnosis of CSU with 38.3% of patients with CSU were categorized into YES-ANGIO and 61.7% into NO-ANGIO groups • Only 7.7% of YES-ANGIO patients had well-controlled CSU (UCT \ge 12) compared to 48.9% of patients with NO-ANGIO (p<0.001)

Humanistic Burden

(a)

*p=0.001; MCS: mental component summary; PCS: physical component summary; SE: standard error; SF-6D: Short form-6 dimension: Lower scores worse status

Disclosures

Dhaval P. and Rodrigues J. are employees of Novartis Pharmaceutical Corporation USA. Balp M-M. is an employee of Novartis Pharma AG, Basel, Switzerland. Kohli, R.K. is an employee of Novartis Healthcare Pvt Ltd., Hyderabad, India. Krupsky K., Balkaran B.L., Gupta S. are employees of Cerner Enviza, formally Kantar Health, who owns the NHWS and conducted the data analysis. Williams B.J., is a Dermatologist in Midvale, UT, USA. Soong W. is an employee of AllerVie Health-Alabama Allergy & Asthma Center, Clinical Research Center of Alabama, Birmingham, AL, USA.

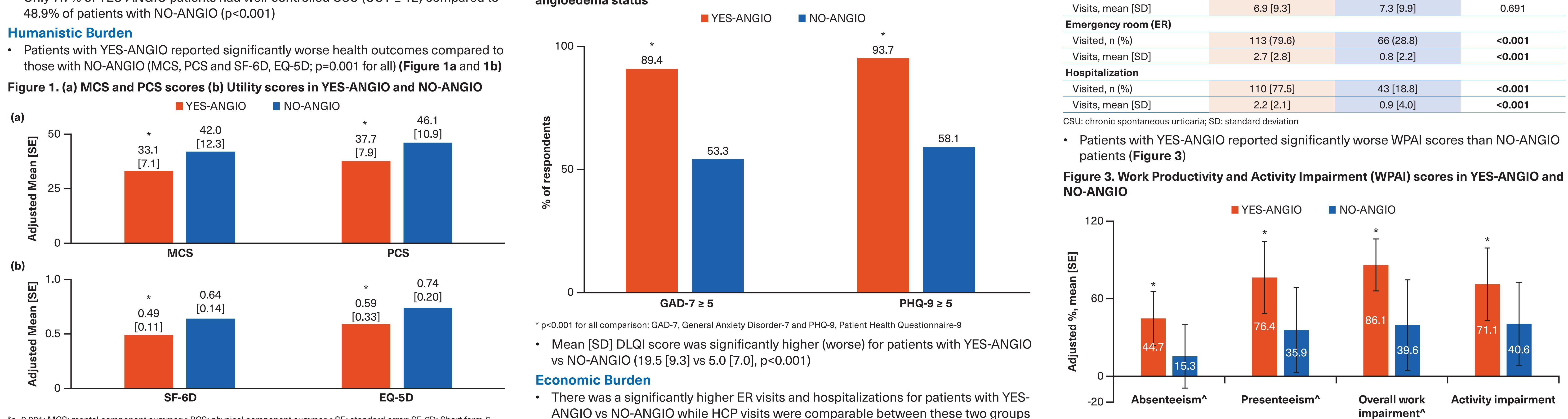
INTRODUCTION

Angioedema associated with chronic spontaneous urticaria (CSU) has a negative impact on patient's health outcomes, healthcare resource use (HRU), work and activities¹⁻³

METHODS

- Real world data from adult respo National Health and Wellness Su
- Patients were grouped into YES-A
- Disease control was assessed w
- Patient's health outcomes were Component [PCS] Summary sco analogue scale (VAS, score: 0–1
- General Anxiety Disorder-7 (GAD with 2-week recall period for bot severe anxiety and depression, r

RESULTS



ondents with a physician diagnosis of CSU was collected from the 2019 US Survey	 HRU to ar
-ANGIO and NO-ANGIO based on angioedema experiences in past 3 months	thep
with Urticaria Control Test (UCT)	• The
e assessed using Short-Form (SF)-36v2 (Mental [MCS] and Physical	and
ores: 0–100), health utility scores (SF-6D, EQ-5D, score: 0–1), EQ-5D visual 100)	perc emp
D-7, score: 0–21), and Patient Health Questionnaire-9 (PHQ-9, score: 0–27)	impa
oth were also assessed; GAD-7 \geq 5 and PHQ-9 \geq 5 represent mild/moderate/	Outo
respectively	squa

 Percentage of YES-ANGIO patients reporting mild/moderate/severe anxiety (GAD-7 \geq 5) and depression (PHQ-9 \geq 5) was significantly higher than those with NO-ANGIO (p<0.001) (**Figure 2)**

Figure 2. Respondents with mild/moderate/severe (a) anxiety and (b) depression by angioedema status

ANGIO vs NO-ANGIO while HCP visits were comparable between these two groups (Table 1)

Acknowledgments

thank Preety Rajora (Novartis, India) for editorial and medical writing support.

Funding

The study was funded by Novartis Pharma AG, Basel, Switzerland.

All authors participated in the development of the poster for presentation. The authors

^Assessed only among employed respondents; * p<0.001 for all comparison

R	E
1.	_
2.	
3.	

U was measured in terms of % patients reporting visits and mean number of visits any healthcare provider (HCP), emergency room (ER) visits and hospitalizations in past 6 months

- e impact on work and activities was assessed using the Work Productivity d Activity Impairment (WPAI) questionnaire and scores were calculated as rcentage impairment (absenteeism, presenteeism, overall work impairment for ployed respondents, and activity impairment for all); higher scores indicate higher pairment
- tcomes between YES-ANGIO and NO-ANGIO groups were assessed using the chilared tests for categorical variables and one-way ANOVAs for continuous variables

Table 1. Healthcare resource use in CSU patients by angioedema status

YES-ANGIO (N=142)	NO-ANGIO (N=229)	p-value
136 (95.8)	219 (95.6)	0.948
6.9 [9.3]	7.3 [9.9]	0.691
113 (79.6)	66 (28.8)	<0.001
2.7 [2.8]	0.8 [2.2]	<0.001
110 [77.5]	43 [18.8]	<0.001
2.2 [2.1]	0.9 [4.0]	<0.001
	(N=142) 136 (95.8) 6.9 [9.3] 113 (79.6) 2.7 [2.8] 110 [77.5]	(N=142) (N=229) 136 (95.8) 219 (95.6) 6.9 [9.3] 7.3 [9.9] 113 (79.6) 666 (28.8) 2.7 [2.8] 0.8 [2.2]

eferences

- Weerasubpong et al. Asian Pac J AllergyImmunol. 2023;41(1), 12–19.
- Rodríguez-Garijo et al. J Allergy Clin Immunol Pract. 2022;10(11):3039-3043.e3
- Sussman et al. *Allergy*. 2018;73 (8):1724–1734.