Poster 223

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Frequency of angioedema in chronic spontaneous urticaria patients: Report from the Urticaria Voices study

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CONCLUSIONS

- Patients with CSU can experience significant burden due to angioedema despite treatment
- Patients reported higher rates of ever experiencing angioedema compared to physicians; however, the number of episodes of angioedema per year was similar
- Both patients and physicians reported being free of angioedema as an important treatment goal
- New therapies that are consistent with patients' and physicians' treatment goals of urticaria and angioedema control are needed

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Age is represented as mean±SD; Patients may have been on combination therapies at the time of survey; Assessed over the previous 4 weeks. CSU, chronic spontaneous urticaria; n, number of patients; UCT, Urticaria Control Test.

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INTRODUCTION

• Chronic spontaneous urticaria (CSU) is characterized by recurrent occurrences of itchy wheals (hives) with or without angioedema for more than 6 weeks¹ • Approximately 50% of patients with CSU experience angioedema, which has been associated with increased disease severity and duration² The Urticaria Voices study aimed to assess the perceptions of patients with CSU, and physicians treating CSU on various aspects of disease management

OBJECTIVE

• The objective of this analysis was to describe the frequency and burden of angioedema as reported by patients and treatment goals from patients' and physicians' perspectives

METHODS

Study design and patients

 The Urticaria Voices was designed as a global (US, Canada, UK, Germany, France, Italy, and Japan) cross-sectional online quantitative survey including patients with CSU and physicians who treat CSU (Figure 1)

RESULTS

Overall, 582 patients with CSU (of which 36% had concomitant chronic inducible urticaria) and 862 physicians participated in the Urticaria Voices study • The mean±SD age of CSU patients was 42.2±11.9 years. Most of the patients were female (62%). Patients reported a delay of approximately 2 years from the onset of first symptoms (mean±SD, 9.2±10.3 years) to receiving a diagnosis for their CSU (7.1±8.5 years) (**Figure 2**) Figure 2. Patient demographics and disease characteristics YEARS DELAY GENDER AGE (ONSET TO DIAGNOSIS) **42** ±11.9 62% **20** years women **CURRENT THERAPIES**^a DISEASE CONTROL^b **79%** Antihistamines 80% (n=460) 14% **33%** Biologics (n=193) Well Completely Inadequately controlled controlled controlled 50% Steriods (UCT score<12) (UCT score=12-15) (UCT score=16)

Globally, patients reported higher rates of ever experiencing angioedema and number of angioedema episodes per year compared to physicians (Figure 3) Both physicians (69%) and patients (50%) reported being "free of angioedema" as an important treatment goal (Figure 3)

CSU, chronic spontaneous urticaria; N, total number of physicians or patients with CSU; n, number of patients with angioedema episodes in last 12 months; SD, standard deviation. Generally, a higher proportion of patients reported angioedema ever and the mean number of angioedema episodes per year was higher than physician reported data, regardless of the country (Table 1)

Number of episodes of angioedema reported in the last 12 months were broadly aligned between patients and physicians (Table 1)

(n=290)



Figure 3. Frequency of angioedema episodes in patients with CSU, and CSU treatment goals – Patients' and physicians' perception



Acknowledgments

- Eligible adult patients (aged \geq 18 years) had a self-reported clinician-provided diagnosis of CSU and were currently taking a prescribed treatment(s). Eligible physicians were medical specialists (dermatologists, allergists, or immunologists) who diagnose and treat patients with CSU
- Patients were recruited from online nationally representative panels and patient advocacy groups. Physicians were recruited from specialized online panels
- The 40-minute online patient survey and the 30-minute online physician survey were conducted between February 2022 and September 2022
- Patients survey assessed symptoms (itch, hives, angioedema), Urticaria Control Test (UCT), and treatments goals
- Physicians' survey assessed treatment, disease management, and goals
- Data by responder type were analyzed using descriptive statistics

Table 1. Country-wide data on frequency and number of angioedema episodes in patients with CSU, and CSU treatment goal as reported by patients and physicians

	Ever experienced angioedema (%)		Angioedema episodes in last 12 months ^a (mean±SD)		Treatment goal: Be free of angioedema (%)	
	Patients (N=582)	Physicians (N=862)	Patients (N=251)	Physicians (N=862)	Patients (N=582)	Physicians (N=862)
aly	22	23	2.38±1.69	4.85±7.06	48	73
anada	49	17.9	18.41±30.49	3.67±4.99	62	78
ance	58	21.27	7.62±11.33	4.04±3.91	51	66
ermany	59	24.68	5.81±15.95	7.19±17.62	39	71
pan	37	17.31	5.64±6.30	3.66 ± 5.87	46	55
Κ	62	28.92	4.74±3.47	7.14±14.04	53	65
SA	67	22.58	7.19±6.96	5.7±18.05	49	72

mong patients who reported angioedema in the last 12 months. CSU, chronic spontaneous urticaria; N, total number of patients or physicians.

- Overall, 44% of patients with currently adequately controlled CSU (UCT≥12) and 57% with inadequately controlled CSU (UCT<12) reported that they had
- experienced angioedema ever in their lifetime • Of patients currently on H1-antihistamines (79%; 460/582), 47% (215/460) reported
- angioedema in the last 12-months (mean±SD, 7.7±15 episodes)
- A proportion of 34% of patients reported pain at the site of angioedema as a symptom of CSU

Strengths and limitations of the Urticaria Voices study

- This was a multinational real-world evidence study on the perceived burden of CSU, captured from the perspective of patients with CSU and treating physicians with a large sample size supporting generalizability of the results
- Online surveys were limited to patients who had access to internet and as with all surveys were subjected to recollection bias
- The patient and physician populations were not matched (physicians surveyed were not treating the patients surveyed)

References

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