Divergent Patients' and Physicians' Perceptions of Chronic Urticaria Disease Control: An Urticaria Voices Study Outcome

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INTRODUCTION

- Chronic urticaria (CU) is a common skin disorder characterized by recurrent occurrences of itchy wheals (hives) with or without angioedema for more than 6 weeks[1]. It can be spontaneously occurring (chronic spontaneous urticaria [CSU]) or induced (chronic inducible urticaria [CIndU])[1,2]
- Patients with CU experience considerable physical and psychological burden, which negatively impact their quality of life[2,3]
- CU is often undertreated and there is a frequent disconnect between physician- and patient-assessed disease burden[3]
- Difference between patients' and physicians' perception of disease control may lead to suboptimal disease management, prolonged discomfort, and dissatisfaction with care[3]
- The Urticaria Voices study aimed to assess CU patients' and physicians' perceptions on the burden, treatment and management of disease to identify potential misalignment, miscommunication and any unmet needs or opportunities to improve CU care

OBJECTIVE

- The objective of this analysis was to evaluate potential physician-patient perception gaps in chronic urticaria disease control captured in the Urticaria Voices study

METHODS

- Urticaria Voices was designed as a multi-national (Canada, France, Germany, Italy, UK, USA, Japan), cross-sectional, internet-based quantitative survey of patients with CU and physicians treating CU, conducted between February 2022 and September 2022
- Eligibility criteria for patients included:
  - Aged ≥18 years, with a confirmed diagnosis of CU (either CSU and/or CIndU)
  - Currently receiving a physician prescribed medical treatment for their chronic urticaria
- Patients completed Urticaria Control Test (UCT) which comprises of questions on urticaria disease activity, disease control and quality of life in the past 4 weeks (UCT <12, inadequately controlled CU; UCT ≥12, well-controlled CU; UCT = 16, completely controlled CU)
- Patients also completed the Patient Global Impression of Severity (PGI-S), a self-reported measurement of symptom severity in the last 7 days
- Eligible participant physicians were dermatologists, allergists or immunologists currently treating patients with CU
- Data from the patients' and physicians' surveys were analysed separately using descriptive statistics, and results were compared to identify differences

Table 1. Patient demographics and disease characteristics of the Urticaria Voices study

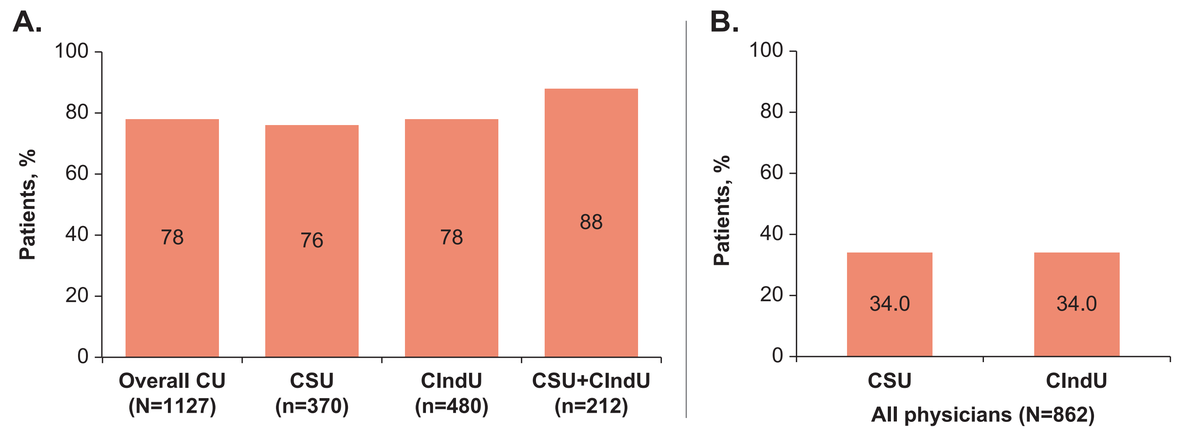
	Overall All CU N=1127	CSU* n=370	CIndU* n=480	CSU+CIndU n=212	Unspecified n=65
Age (years), mean ± SD	42.2 ± 11.9	43.2 ± 12.1	41.1 ± 11.8	40.4 ± 11.2	48.4 ± 11.3
Sex (female), n (%)	716 (64)	225 (61)	310 (65)	137 (65)	44 (68)
Duration of CU (years), mean ± SD	9.8 ± 10.6	8.1 ± 9.8	10.3 ± 10.7	11.1 ± 10.8	12.4 ± 12.5
Disease severity, n (%)**					
No symptoms	192 (17)	65 (18)	89 (19)	23 (11)	15 (23)
Mild	356 (32)	109 (29)	152 (32)	60 (28)	35 (54)
Moderate	466 (41)	164 (44)	205 (43)	84 (40)	13 (20)
Severe	80 (7)	26 (7)	25 (5)	27 (13)	2 (3)
Very severe	33 (3)	6 (2)	9 (2)	18 (8)	0 (0)
Angioedema in the last 12 months, n (%)	375 (33)	143 (39)	118 (25)	108 (51)	6 (9)
Angioedema episodes in the last 12 months, mean ± SD	6.9 ± 12.7	8.2 ± 13.9	4.3 ± 4.7	7.0 ± 14.1	25.3 ± 34.0
Comorbidities, mean ± SD	2.3 ± 2.5	1.9 ± 2.1	2.2 ± 2.3	3.3 ± 3.3	1.9 ± 1.8
Current therapies, n (%)					
Antihistamines	884 (78)	272 (74)	374 (78)	188 (89)	50 (77)
Biologics	297 (26)	106 (29)	104 (22)	87 (41)	0 (0)
Steroids	551 (49)	173 (47)	242 (50)	117 (55)	19 (29)

*Isolated cases of CSU or CIndU. **PGI-S based.
Diagnosis of CSU, CIndU or CSU+CIndU in the patient cohort was self-reported
UCT <12, inadequately controlled CU; UCT ≥12, well-controlled CU; UCT = 16, completely controlled CU
CIndU, chronic inducible urticaria; CSU, chronic spontaneous urticaria; n, number of patients in each group; N, total number of patients; PGI-S, Patient Global Impression of Severity; SD, standard deviation; UCT, Urticaria Control Test

RESULTS

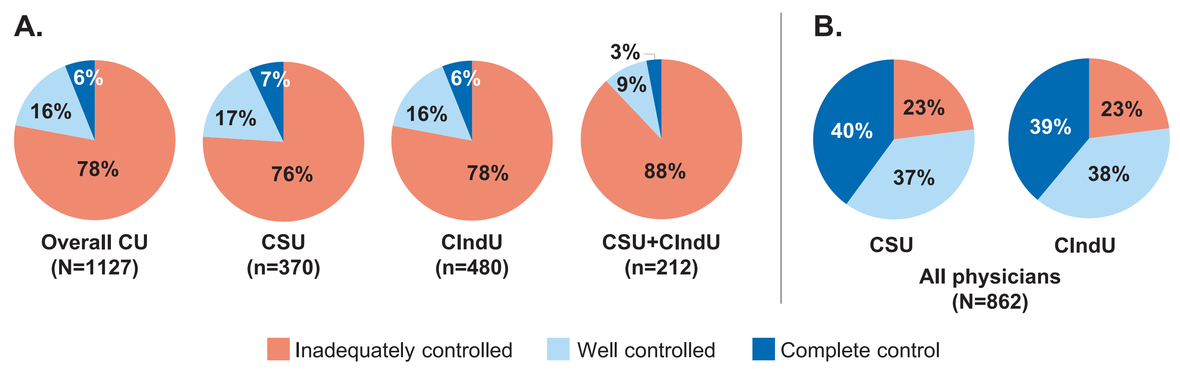
- A total of 1127 patients (64% women; mean [SD] age, 42.2 [11.9] years; mean disease duration, 9.8 [10.6] years) and 862 physicians were interviewed online (**Table 1**)
- Complete control (UCT=16) was reported by only 6% of the total patient sample
- Overall, 78% of patients reported being inadequately controlled by antihistamines while physicians assessed only 34% of patients as being so (**Figure 1**)
- Based on UCT scores, 78% of patients reported to be currently inadequately controlled while physicians assessed 23% of patients as inadequately controlled (**Figure 2**)
- While 52% of patients believed that complete control was achievable for them, physicians believed that 65% of their patients could achieve complete control (**Figure 3**)
- Physicians aimed to achieve complete control of CU in at least 70% of their patients and reported achieving this goal

Figure 1. Percentage of inadequately controlled CU patients on antihistamines: (A) Patient reported (B) Physician reported



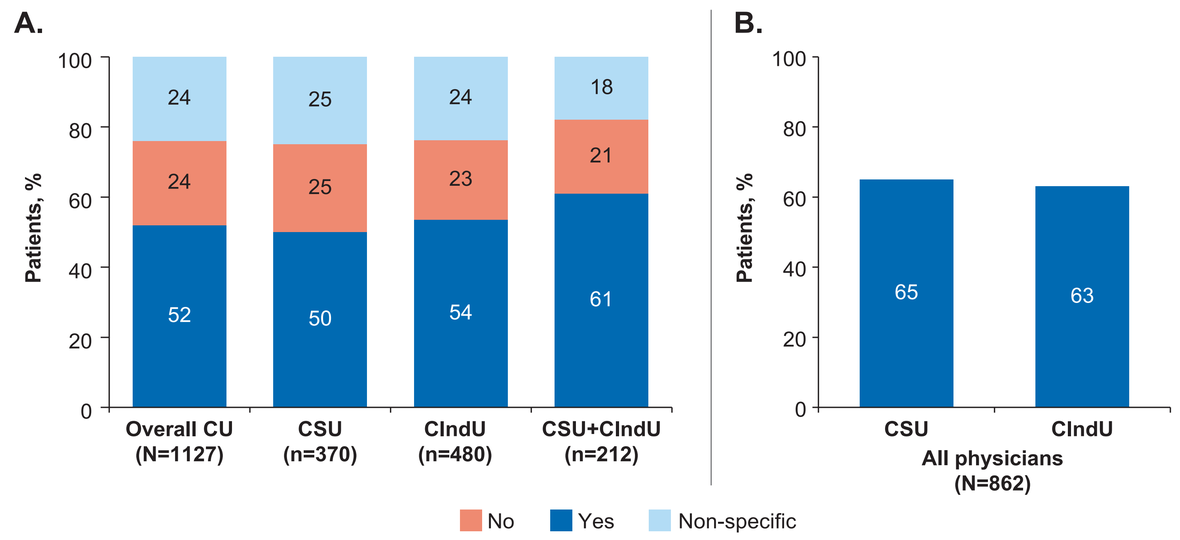
N, total number of participants (patients or physicians); n, number of participants in each group; CIndU, chronic inducible urticaria; CSU, chronic spontaneous urticaria; CU, chronic urticaria; UCT, Urticaria Control Test

Figure 2. Disease control based on UCT: (A) Patient reported (B) Physician reported



UCT <12, inadequately controlled CU; UCT ≥12, well-controlled CU; UCT = 16, completely controlled CU
Sum of the individual groups (n) is not equal to the Overall CU group (N) as n=65 patients did not have the type of urticaria specified
N, total number of participants (patients or physicians); n, number of participants in each group; CIndU, chronic inducible urticaria; CSU, chronic spontaneous urticaria; CU, chronic urticaria; UCT, Urticaria Control Test

Figure 3. Patients' (A) and physicians' (B) belief in achieving complete control



N, total number of participants (patients or physicians); n, number of participants in each group; CIndU, chronic inducible urticaria; CSU, chronic spontaneous urticaria; CU, chronic urticaria; UCT, Urticaria Control Test

CONCLUSIONS

- Patients report higher rates of inadequate disease control on antihistamines (78%) compared to physicians (34%), which was also confirmed by UCT scores (patients, 78% vs. physicians, 23%)
- More physicians than patients believe complete control is achievable
- Consistent use of Patient Reported Outcome Measures (e.g. UCT) may support physicians and patients to align on current level of disease control and treatment effectiveness
- A substantial proportion of CU patients on antihistamine treatment remain inadequately controlled, indicating a need for more effective treatment options

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Disclosures

Pedro Laires and **Laura Christen** are former employees of Novartis Pharma AG, Basel, Switzerland. **Maria-Magdalena Balp, Nico Janssens** and **Serge Smeets** are employees of Novartis Pharma AG, Basel, Switzerland. **Karsten Weller** is a speaker and/or advisor for and/or received research funding from CSL Behring, Dr. Pfleger, Moxie, Novartis, Shire/Takeda, and Uriach. **Tonya Winders** reports to GAAPP and receives funds from unbranded disease awareness & education from Novartis, AstraZeneca, Sanofi-Regeneron, Amgen, Roche & Genentech outside of the submitted work and was an employee of the Allergy & Asthma Network, a not-for-profit patient advocacy organization, which has received grants for unbranded awareness and education initiatives. **Jonathan A Bernstein** reports grants from Novartis, Astra Zeneca, Sanofi-Regeneron, Amgen, Roche, Allakos, Celldex, CSL Behring, Takeda/Shire, Biocryst, Pharming, Ionis, Biomarin and Genentech outside the submitted work. Personal fees from Novartis, Astra Zeneca, Sanofi-Regeneron, Amgen, Roche, Allakos, Celldex, CSL Behring, Takeda/Shire, Biocryst, Pharming, Ionis, Biomarin and Genentech outside the submitted work. **Mihai Dricu** and **Sandra Flierl** are employees of Ipsos SA, Basel, Switzerland and confirm no conflicts of interest.

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