**INTRODUCTION**

- Chronic spontaneous urticaria (CSU) is a distressing and unpredictable disease characterized by the spontaneous appearance of wheals (hives) and/or angioedema for >6 weeks due to unknown or unknown causes in the absence of specific and definite stimuli.
- CSU can have a substantial negative impact on patients’ quality of life (QoL), and it often does.
- Current treatments often inadequately control symptoms that impact patients’ QoL.
- Remibrutinib, a Bruton’s tyrosine kinase inhibitor (BTK) that leads to blockade of mast cell and basophil activation, is a potential new treatment option for patients with CSU.
- This study explored the effect of remibrutinib on patients with dermatology Life Quality Index (DLQI).

**METHODS**

- This Phase 2b, randomized, double-blind, placebo-controlled trial was conducted at 82 sites in 17 countries.
- Patients (n=311) were ≥18 years old, had moderate/severe CSU for ≥6 months which was inadequately controlled by second-generation H1-antihistamines, and were on background H1-antihistamines and rescue therapy when needed.
- Data reported in the current study were collected during a 12-week treatment period (Figure 1).
- Patients were randomized to 1:1:1:1:1 to receive remibrutinib 10 mg once daily (qd), 35 mg qd, 100 mg qd, 10 mg twice daily (b.i.d), 25 mg b.i.d, 100 mg b.i.d. or placebo.
- The outcome reported here is DLQI (range 0–30) in which a decrease score indicates improved QoL and a score of 0–1 indicates no disease effect on QoL.

**RESULTS**

- Over 36,051 patients screened were included in the full analysis (Figure 2).
- Randomized patients (N=311) were aged 45.0±14.9 years (71.4% female) and had lived with CSU for 4.9±6.23 years (Table 1).
- Improvements were seen in DLQI scores from baseline to Week 4 and 12 and the proportions of patients achieving DLI<0 at Week 12 were analyzed.

**CONCLUSIONS**

- Compared to placebo, all remibrutinib doses provided marked improvements in DLQI as early as Week 4, which were maintained at Week 12.
- These findings are consistent with the previously reported results of remibrutinib treatment on weekly urticaria Activity Score.

**REFERENCES**


**ACKNOWLEDGEMENTS**

All authors participated in the development of the poster for presentation. The authors wish to thank all investigators and patients involved in the trial. The authors thank Susan Hart and Monarch Medical Communications (Macclesfield, UK, this company was funded by Novartis Pharma AG, Basel, Switzerland, in accordance with the Good Publication Practice (GPP3) guidelines by the International Committee of Medical Journal Editors). This investigation was sponsored by Novartis Pharma AG, Basel, Switzerland.

**Figure 2. Patient disposition up to Week 12**

**Figure 3. Changes in DLQI scores from baseline to Week 4 and 12**

**Figure 4. Proportions (with 90% confidence interval) of patients achieving DLI<0 at Week 4 and 12**