ASSURE-CSU PRELIMINARY UK AND CANADIAN RESULTS: A CHARACTERISATION OF ANGIOEDEMA IN PATIENTS WITH REFRACTORY CSU/CIU FROM THE UK AND CANADA

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BACKGROUND

- Chronic spontaneous (also known as idiopathic) urticaria (CSU/CIU) is a chronic disease characterized by the spontaneous appearance of wheals (hives), angioedema or both for ≥6 weeks due to known and unknown causes¹
- There is little information on how angioedema affects patients with CSU/CIU who are inadequately controlled on H₁-antihistamines

OBJECTIVES

- The ASSURE-CSU study is an observational, non-interventional, multinational, and multicenter study conducted in Canada, France, Germany, Italy, United Kingdom, Spain and the Netherlands to identify and quantify the humanistic and economic burden of illness in refractory CSU/CIU patients
- Here we describe the history and characteristics of concomitant angioedema in patients enrolled in the ASSURE-CSU study in Canada and the UK

METHODS

Study design

 This study included a 1-year retrospective medical record abstraction, a cross-sectional patient reported outcomes survey and a 7-day prospective patient diary

Patient population

 Adult patients (≥18 years) with a clinician-confirmed, guideline-defined diagnosis of CSU/CIU; who had received at least one treatment course with an H₁-antihistamine; and who had remained symptomatic for more than 12 months at least 3 days per week and were currently symptomatic despite treatment

Outcomes presented in this poster

- From cross-sectional patient survey
 - History, duration and characteristics of concomitant angioedema
 - Intensity of symptoms: Patients rated on a scale of 0 (none) –10 (severe) the amount of swelling, itching and pain during a typical episode of angioedema

Data Analysis

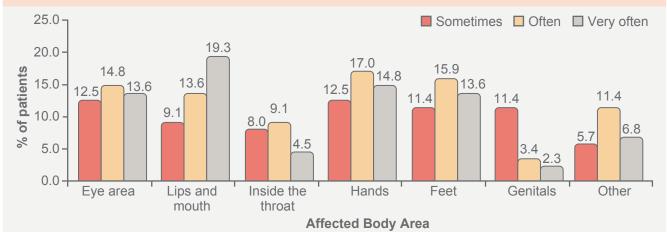
 Data were summarized descriptively using mean values and standard deviations for continuous variables and counts and proportions for categorical variables

RESULTS

Canada

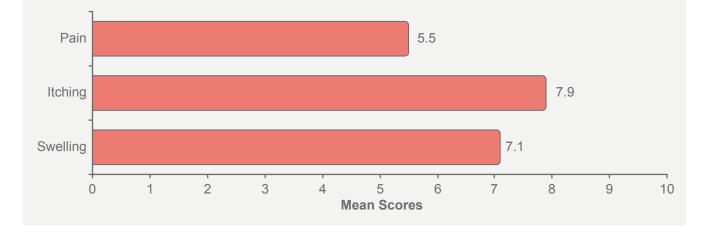
- At the time of the survey, 58/88 (65.9%) patients reported having experienced angioedema at any time in the past, while 55 (62.5%) reported experiencing it in the previous 12 months and 45 (51.1%) in the previous 4 weeks. Twelve patients (13.6%) reported currently experiencing an episode of angioedema
- An episode lasted >48 hours in 9 (10.2%), 25–48 hours in 6 (6.8%) and ≤24 hours in 38 (43.1%) patients
- Eye area, lips/mouth, hands and feet were the areas most commonly affected (Figure 1)

Figure 1. Angioedema characteristics in the Canadian cohort



- The mean (SD) score for pain, itching and swelling during a typical episode of angioedema (scale 0–10) in the past 12 months was 5.5 (3.5), 7.9 (2.4) and 7.1 (2.4), respectively (**Figure 2**)
- When patients experienced these episodes, the majority reported taking medication prescribed by their physician (39.8%) or over-the-counter medication (27.3%)

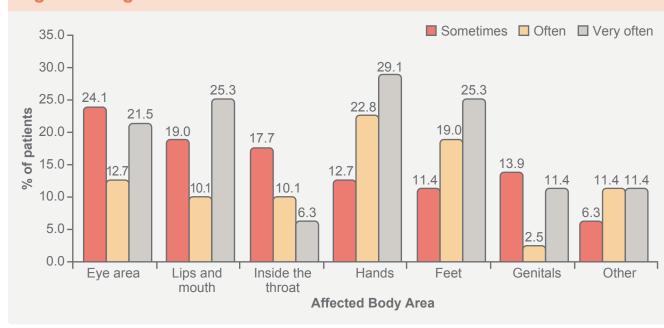
Figure 2. Mean symptom score during a typical episode of angioedema in the past 12 months: Canadian cohort



UK

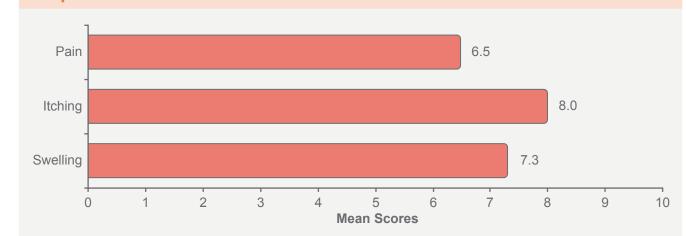
- At the time of the survey, 67/79 (84.8%) patients reported having experienced angioedema at any time in the past, while 64 (81.0%) reported experiencing it in the previous 12 months and 51 (64.6%) in the previous 4 weeks. Nineteen patients (24.1%) reported currently experiencing an episode of angioedema
- An episode lasted >48 hours in 12 (15.2%), 25–48 hours in 7 (8.9%) and ≤24 hours in 42 (53.2%) patients
- Eye area, lips/mouth, hands and feet were the areas most commonly affected (Figure 3)

Figure 3. Angioedema characteristics in the UK cohort



- The mean (SD) score for pain, itching and swelling during a typical episode of angioedema in the past 12 months was 6.5 (2.9), 8.0 (2.4) and 7.3 (2.0), respectively (Figure 4)
- When patients experienced these episodes, the majority reported taking medication prescribed by their physician (53.2%) or going to general practitioner's office (22.8%)

Figure 4. Mean symptom score during a typical episode of angioedema in the past 12 months: UK cohort



CONCLUSIONS

- These results from the Canadian and UK cohort suggests that angioedema affects a considerable proportion of CSU/CIU patients
- This analysis shows that patients are most likely using medication (previously prescribed or OTC) and are not seeking special medical care during an episode of angioedema
- This analysis shows that more patients in the UK reported experiencing angioedema compared with Canadian patients. Further investigation is required to understand the reasons for this difference. However, patients in the UK and Canada reported the extent of swelling, itching and pain in a similar manner, suggesting that their personal experience of angioedema is comparable

REFERENCE

1. Zuberbier T et al. Allergy 2014;69:868–87

FUNDING

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CONFLICT OF INTEREST

GS has acted as a consultant for Novartis and in the past three years, he has conducted studies for Novartis, CSL Behring, Merck, and DBV Technologies. He is also president of the Allergy, Asthma & Immunology Society of Ontario. CG has participated in an advisory board for Novartis, was a principal investigator for a Novartis supported study and has received honoraria for Novartis supported meetings.CL has served as a consultant, principal investigator, and speaker for Amgen, AbbVie, Janssen, Novartis, Merck, Eli Lilly, LEO Pharma, and Celgene. MA is a member of the Coeliac Disease Guidelines Development Group with N.I.C.E. AN has received honoraria from Novartis for participation in advisory board Meetings in 2014. KH, DMcB, and CR are employed by RTI Health Solutions, which provides consulting and other research services to pharmaceutical, device, government, and non-government organizations. In this salaried position, they work with a variety of companies and organizations. They receive no payment or honoraria directly from these organizations for services rendered. SCR, OC, AH, HT and MMB are employed by Novartis