Characterizing the Perspective of Patients With HAE on Prophylactic Treatment

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Background

- Hereditary angioedema (HAE) is a rare genetic disease resulting in deficiency (type I) or dysfunction (type II) in the C1inhibitor protein and subsequent uncontrolled activation of the kallikrein-kinin system
- People living with HAE experience unpredictable, painful and debilitating attacks of tissue swelling in various locations of the body that can be life-threatening depending on the location affected
- WAO/EAACI 2021 updated guidelines recommend that all HAE patients¹
- consider treating all attacks as early as possible
- have access to sufficient medication to treat two attacks
- carry on-demand treatment at all times, regardless of prophylactic therapy
- Patients on prophylaxis still face the risk of having an attack and continue to experience burden in their day-to-day life and challenges associated with parenteral on-demand therapy

Objective

 The objective of this analysis was to characterize the patient perspective and experience related to on-demand therapy among those living with HAE on prophylactic HAE treatment

Methods

- The US Hereditary Angioedema Association (HAEA) recruited people living with HAE to complete an online survey
- Recruitment was stratified to include 50% of patients taking on-demand only and 50% receiving LTP plus on-demand
- The survey was self-reported and took respondents approximately 20 minutes to complete
- The survey was completed by 107 individuals between September 6 and October 19, 2022; response rate 69% (107/155)
- Respondents provided consent for their data to be used anonymously or in aggregate
- Analysis was performed using descriptive statistics

References

1. Maurer M., et al. The international WAO/EAACI guideline for the management of hereditary angioedema - The 2021 revision and update. World Allergy Organ J. 2022 Apr 7;15(3):100627.

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Results

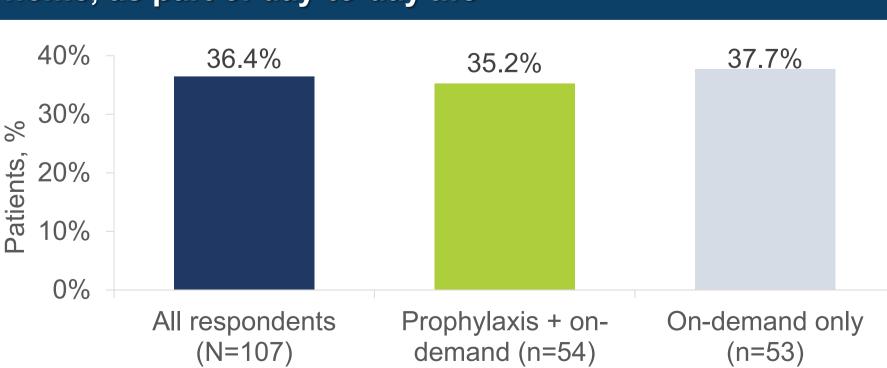
- Respondents included 107 Type I/II HAE patients, mean age 41 years (range 16-83); 50% using on-demand therapy only, 50% using prophylaxis + on-demand therapy (**Table 1**)
- Most common prophylactic treatment was lanadelumab injection (57.4%)

Table 1. Respondent characteristics

Characteristic	Total (N=107)
Age, mean (range), years	41 (16-83)
Gender, n (%) Female Male	86 (80.4) 21 (19.6)
Type of therapy, n (%) On-demand only Prophylaxis and on-demand	53 (49.5) 54 (50.5)
On-demand treatments used Icatibant C1 esterase inhibitor (recombinant) C1 esterase inhibitor (human) Ecallantide	84 (78.5) 13 (12.1) 9 (8.4) 1 (0.9)
Prophylactic treatments used, n (%) of those using prophylaxis (n=54) Lanadelumab Berotralstat C1 esterase inhibitor (subcutaneous) Androgens/steroids C1 esterase inhibitor (intravenous)	31 (57.4) 7 (13.0) 7 (13.0) 5 (9.3) 4 (7.4)

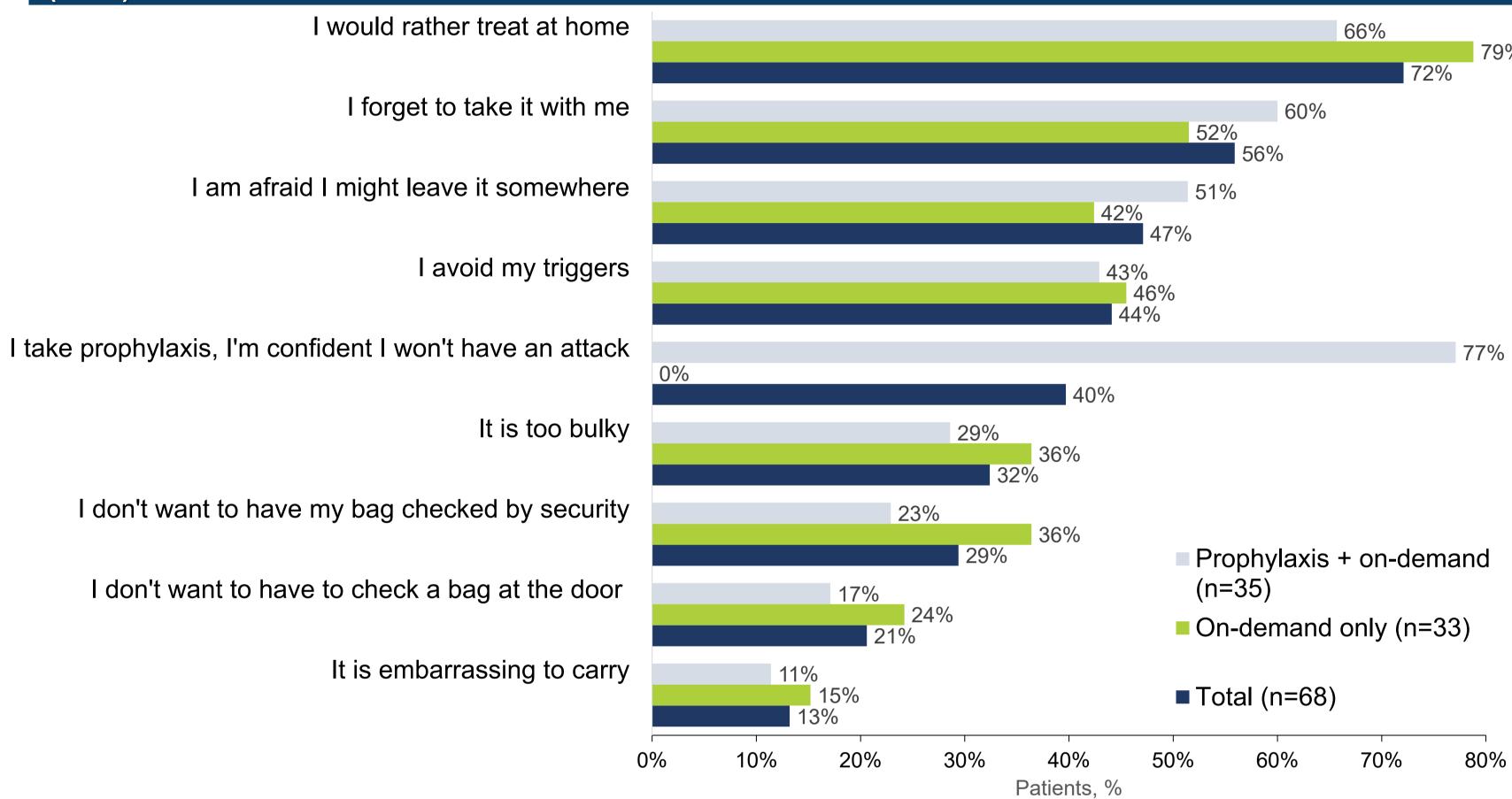
 Only 35.2% of prophylaxis patients always carry on-demand treatment when away from home, as part of day-to-day life (Figure 1)

Figure 1. Proportion of respondents who always carry their HAE on-demand treatment when they are away from home, as part of day-to-day life



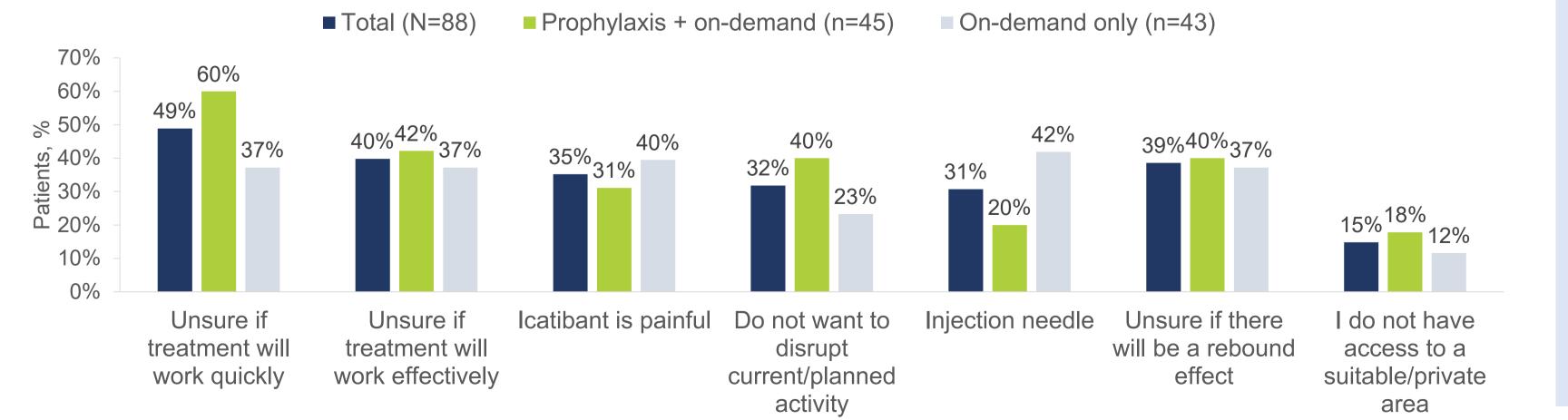
 Various reasons were given for not carrying on-demand treatment at all times, including 43% of prophylaxis patients avoiding potential triggers (Figure 2)

Figure 2. Reasons given for not carrying on-demand treatment at all times, by those who do not always carry (n=68)



Survey participants who indicated that they do not always carry an HAE on-demand treatment (n=68) were asked to select from a list of reasons they do not take on-demand treatment when away from home

Figure 3. Most common reasons* provided for experiencing anxiety when anticipating on-demand treatment



*Participants who reported having any degree of anxiety when anticipating on-demand treatment (>1 on scale; n=88) were asked to rank the top two reasons why their on-demand treatment makes them feel anxious.

- Time to feel fully recovered from an HAE attack following ondemand treatment was 1.7 days for patients taking prophylaxis and 1.6 days for those taking on-demand treatment only
- Common reasons for experiencing anxiety when anticipating on-demand treatment were uncertainty about whether ondemand treatment would work quickly (49%) or be effective (40%) (**Figure 3**)

Table 2. Reported level of anxiety when anticipating ondemand treatment, %

	Total (n=107)	Prophylaxis + On-demand (n=54)	On-demand Only (n=53)
'Extremely anxious' (7-10 on scale of 0 to 10)	32.7	35.2	30.2
'Moderately anxious' (4-6 on scale of 0 to 10)	15.9	16.7	15.1
'Mildly anxious' (1-3 on scale of 0 to 10)	33.6	31.5	35.8
'Not anxious' (0 on scale of 0 to 10)	17.8	16.7	18.9

Participants were asked, "Please rate your level of anxiety when you anticipate using your current on-demand treatment," and provided a scale to select from 0-Not anxious to 10-Extremely anxious.

• Overall, 48.6% of patients reported feeling moderately to extremely anxious when anticipating their on-demand treatment administration (**Table 2**); this proportion was even higher (57.2%) among those taking berotralstat.

Conclusions

- Only 35.2% of prophylaxis patients always carried on-demand treatment when away from home while 43% of prophylaxis patients cited avoiding potential triggers as a reason for not carrying on-demand treatment at all times
- Time to attack resolution after on-demand treatment was similar for patients using prophylaxis and those using on-demand treatment only
- 48.6% of prophylaxis patients experienced moderate to extreme levels of anxiety when anticipating ondemand treatment administration, often associated with uncertainty whether their on-demand treatment would work quickly or be effective

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