QUALITY OF LIFE, QUALITY OF CARE, AND PATIENT SAFETY

THE EFFECT OF OMALIZUMAB ON QUALITY OF LIFE IN PATIENTS WITH CHRONIC SPONTANEOUS URTICARIA: REAL-LIFE DATA FROM A RETROSPECTIVE COHORT STUDY

A Salman [1] - G Demir [1] - N Bekiroglu [2]

Marmara University School Of Medicine, Department Of Dermatology, Istanbul, Turkey [1] - Marmara University School Of Medicine, Department Of Biostatistics, Istanbul, Turkey [2]

Introduction: Despite the availability of various treatment options for chronic spontaneous urticaria (CSU), it still poses a significant burden on patients. Omalizumab is a third-line treatment alternative for CSU and its effectiveness has been demonstrated in numerous studies. However the real-life data on the effects of omalizumab on CSU-related quality of life remains scarce.

Objective: We aimed to investigate the effects of omalizumab on quality of life in patients with CSU.

Materials and Methods: A retrospective cohort study was done. The patients treated with omalizumab between 2017 and 2018 were included. The response to therapy was evaluated using urticaria activity score over 7 days (UAS7) and urticaria control test (UCT), whereas the impairment in quality of life was assessed monthly using Dermatology Life Quality Index (DLQI) and Chronic Urticaria and Quality of Life Questionnaire (CU-Q2oL).

Results: A total of 53 patients were included. The mean UAS7, UCT, DLQI, and CU-Q2oL scores at the baseline (n=53), first (n=53) and third months (n=42) were compared. The mean scores at the baseline, first and third months were as follows, respectively: 26.5, 8.6 and 3.7 for UAS7; 6, 12.5 and 13.9 for UCT; 12.8, 6.6 and 4.6 for DLQI; 55, 39.5 and 34.2 for CU-Q2oL. All index and subdomain scores improved significantly from baseline to first month and remained stable at the third month ($p<0.001$). The complete responders (UAS7: 0-1) had better improvement rates in all scores compared to others. The baseline UAS7, DLQI and CU-Q2oL scores were significantly lower at the baseline in patients completely responded to omalizumab ($p=0.0001$).

Conclusions: A rapid and continual improvement in disease-related quality of life and disease activity has been obtained with omalizumab treatment in real-life settings. A better UAS7, UCT, DLQI, and CU-Q2oL score at the baseline might be a predictor of a better response to omalizumab.