



URTICARIA, ANGIOEDEMA

OMALIZUMAB FOR THE TREATMENT OF CHRONIC INDUCIBLE URTICARIAS: A REAL-LIFE STUDY

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BACKGROUND: Chronic inducible urticarias (CIndU) are characterized by the appearance of symptoms as a response to specific triggers. Cold urticaria (ColdU), cholinergic urticaria (CholU) and delayed pressure urticaria (DPU) are the most common CindU after dermatographism. Omalizumab (OMZ) was approved for chronic spontaneous urticaria (CSU) unresponsive to H1-antihistamines in 2014 but few data are available for CindU.

OBJECTIVE: To assess the effectiveness of omalizumab in CindU.

MATERIELS AND METHODS: We conducted a retrospective study on patients with U alone or with CSU treated with OMZ. Patients with symptomatic dermatographism were excluded because of the strong association with CSU. The response was subjectively evaluated in absence of a validated score available for CindU: controlled, partially controlled or uncontrolled urticaria.

RESULTS: From January 2011 to March 2018, 29 patients with CindU were treated with OMZ. Twenty-four patients were treated with OMZ 300 mg every 4 weeks (9 ColdU, 9 DPU, 6 CholU). Seventeen patients were controlled or partially controlled (12 controlled, 5 partially controlled) with a response rate of 70.8% (77.8% for ColdU, 88.9% for DPU, 33.4% for CholU). Intensification of treatment (OMZ 300 mg every 2 weeks) was performed in 4 patients, OMZ was introduced at this dose for 4 other patients. OMZ 300 mg every 2 weeks was effective for all patients (6 controlled, 2 partially controlled). Spacing OMZ (300 mg every 6 weeks) was performed in 9 responders at 300 mg every 4 weeks (2 ColdU, 7 DPU). Six patients relapsed and 3 patients remained under control. When OMZ was stopped for controlled urticaria, most of the patients relapsed. OMZ was rapidly effective when rechallenged.

CONCLUSION: Our study suggests the effectiveness of OMZ in the management of CindU. These findings call for controlled clinical trials at standard and optimised doses of OMZ.

