



URTICARIA, ANGIOEDEMA

OMALIZUMAB VERSUS CYCLOSPORIN-A FOR THE TREATMENT OF CHRONIC SPONTANEOUS URTICARIA: IS THERE SPECIFIC PATIENT CHARACTERISTICS OR BIOMARKERS TO INDICATE RESPONSE TO TREATMENT?

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Introduction: The international guidelines recommend omalizumab (oma) as a first line choice in antihistamine resistant chronic urticaria (CU). In patients who fail on oma treatment after a trial of 6 months, cyclosporine-A (cyc-A) is recommended as the second step. Biomarkers or clinical characteristics which indicates treatment success in CU patients before starting a specific drug would be very useful in the clinical setting.

Objective: We aimed to determine if specific patient characteristics or biomarkers could be used as indicators of oma response or cyc-A response in CU patients.

Materials and Methods: We retrospectively analysed patient files of 4 centers which are experienced in treating CU patients. The inclusion criteria for CU patients was to receive a trial of both oma and cyc-A treatment (not concurrently) long enough (at least 3 months) to decide if there was response to treatment or not. Four groups of patients were defined; patients who respond to oma, patients who respond to cyc-A, patients who respond to both drug and patients who do not respond to either drug. We analyzed clinical characteristics and laboratory markers of the patients and performed a comparison between groups.

Results: A total of 78 patient files were reached. Of these 34 (43,6%) were cyc-A responders, 19(24,4%) were oma-responders, 11 (14,1%) were responders to both drug and 14(17,9%) were non-responders to both drug. When oma-responders and cyc-A-responders were compared, no differences were found with respect to age, accompanying inducible urticaria, presence of angioedema, duration of disease, ASST positivity, CRP, ESR, total IgE, anti-tpo, H.pylori, autoimmune thyroiditis and baseline UCT ($p>0.05$). The





detailed patient characteristics will be presented.

Conclusion: We found no specific patient characteristics or biomarkers to define omalizumab or cyclosporine responders in CU patients. Serum immune markers or basophil histamine release assay could be potential markers to define cyc-A or oma responders.

