URTICARIA, ANGIOEDEMA

THE EFFECTIVENESS AND SAFETY OF HIGHER DOSES OF OMALIZUMAB IN PATIENTS WITH CHRONIC SPONTANEOUS URTICARIA: REAL-LIFE DATA FROM A RETROSPECTIVE COHORT STUDY

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Introduction: Omalizumab is a third-line treatment option in chronic spontaneous urticaria (CSU) at the dose of 300mg every 4 weeks. In patients unresponsive to regular doses, higher doses may provide better disease control. However, the studies investigating the use of higher doses of omalizumab in patients with CSU are limited.

Objective: This study aims to investigate the effectiveness and safety of omalizumab 450mg in patients with CSU who did not respond to omalizumab 300mg. The demographic and clinical predictors of patients requiring omalizumab 450mg were also analyzed.

Materials and Methods: A retrospective cohort study was done. The response to therapy was evaluated using urticaria activity score over 7 days (UAS7) and urticaria control test (UCT). The patients showing CR (UAS7:0-1) to omalizumab 300mg (Group 1) and the patients treated with omalizumab 450mg (Group 2) between 2016 and 2018 were included.

Results: A total of 71 patients (Group 1:59; Group 2:12) were included. The mean age of the patients was 43.7. The mean UAS7 and UCT scores at the baseline were 25.5 and 6.1, respectively. The baseline characteristics between two groups did not show any significant differences. The mean UAS7 and UCT scores in Group 2 before updosing were 17.4 and 8.8, respectively. After a mean 3.3 doses of 450mg omalizumab treatment, the UAS7 and UCT scores were 6 and 11.4, respectively. Of the 12 patients in group 2, 4 had CR, 4 had good disease control (UAS7:2-6), the remaining patients showed partial or no improvement. No adverse effects were observed.

Conclusions: The present study demonstrates the effectiveness and safety of higher doses of omalizumab in patients with CSU unresponsive to omalizumab 300mg. Although the results of our study failed to show any predictors of patients in whom updosing may be of benefit, future prospective studies are warranted.