Understanding the impact of Chronic Spontaneous Urticaria (CSU) and what is most important to patients – **Results from qualitative patient interviews** *Maurer M¹, Balp, M-M², O'Donoghue J³, Danyliv, A², Christen, L², Smeets, S², Mueller, M⁴, LopezOrtiz, D⁵, McKenna, SJ⁶, De Ruijter, A⁷, Freedle, K⁸, Morrison S⁹, *Winders, T¹⁰, *Bernstein, J¹¹, *Giménez-Arnau, A.M¹²

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Background

- With new injectable biologic treatments planned to launch in chronic spontaneous urticaria (CSU) it is important to capture, in a structured manner, patient preferences for different treatments profiles
- Patient preference studies are a means of generating data on patients' perception of existing or new treatments¹ and can be beneficial in informing reimbursement/market access discussions^{2,3}
- Here we present the results of the qualitative phase of the CHOICE study conducted in order to inform the discrete choice design of the quantitative phase

Objective

• To understand the patient view on disease and its impact, knowledge and expectations related to treatments among patients with CSU in USA, Germany and Spain

Methods

- Telephone interviews (~45 minutes) were conducted with patients diagnosed with CSU who were recruited via physician referral in the USA, Germany and via a patient panel in Spain
- The interview focused on areas such as:
 - Physical and emotional impact
 - Perception/knowledge of CSU
 - Patient journey
 - Treatment experience and expectations from future treatments
- **Inclusion:** CSU patients inadequately controlled on H1 antihistamines despite up-dosing and eligible for a biologic
- **Exclusion:** Less than 1 year since confirmed medical diagnosis of CSU
- Country-specific and pooled content thematic analysis was conducted
- Results are presented for the pooled cohort

Results

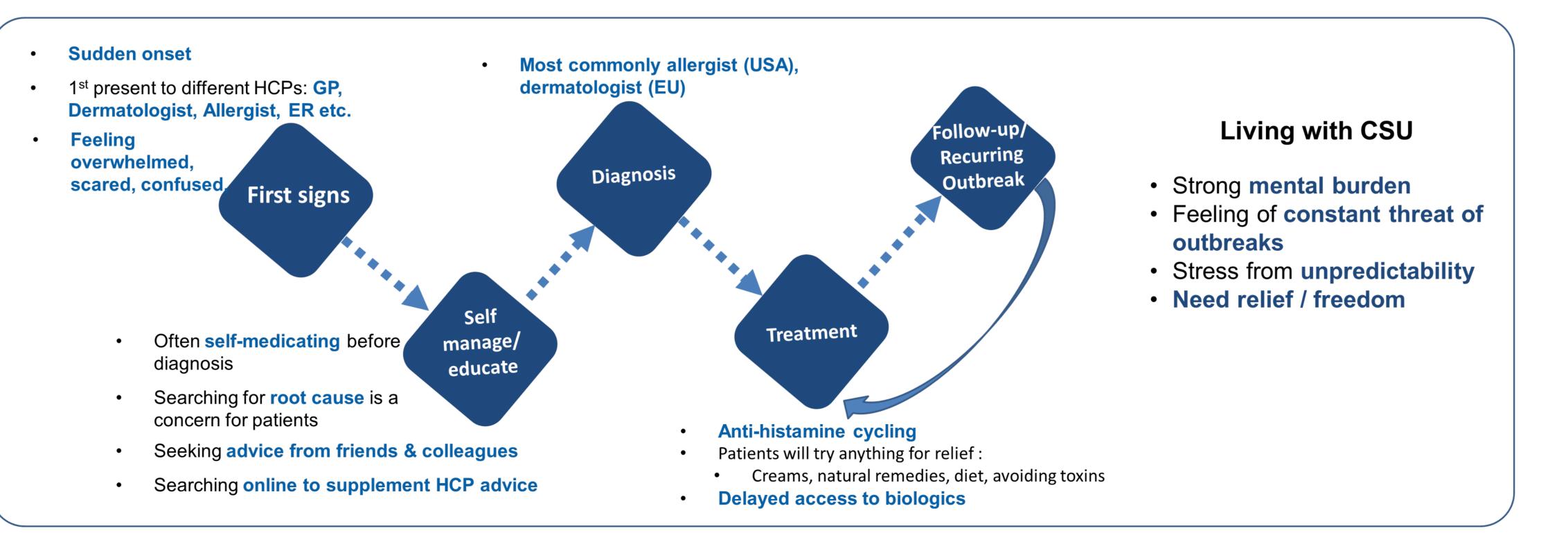
Figure 1: Comorbidities

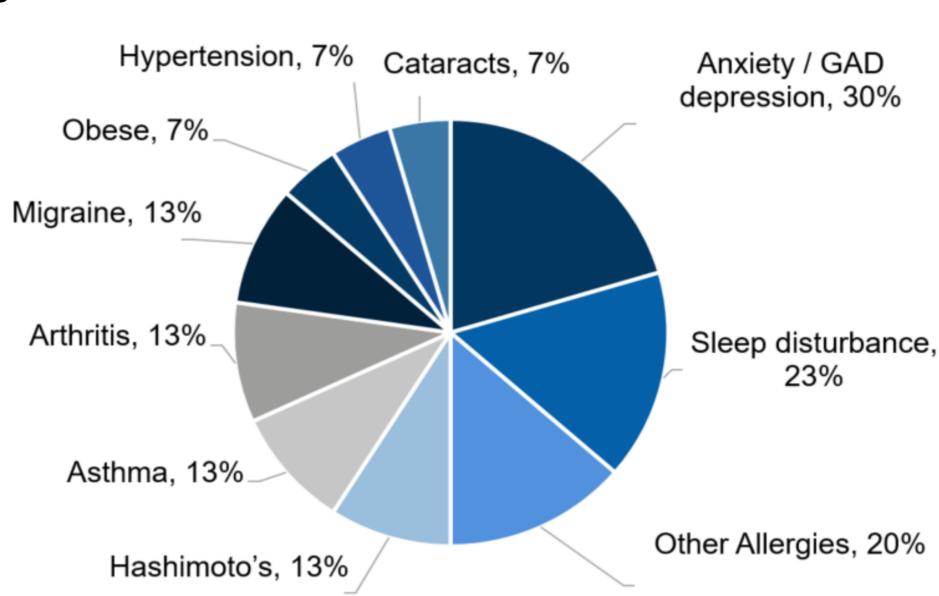
- The cohort comprised 30 patients (10 per country) described in Table 1
- Most commonly reported comorbidities were anxiety/depression (30%), sleep disturbance (23%) and allergies (20%) (Figure 1)

Table 1: Patient demographics

	Total cohort (N=30)
Mean (SD) age, years	42 (15)
% Female	77%
CSU severity	
Moderate, n (%)	15 (50%)
Severe, n (%)	15 (50%)
Mean (SD) time since CSU diagnosis, years	9 (8.9)
Current CSU treatments, n (%)	
Antihistamines	30 (100%)
Omalizumab	16 (53%)
Corticosteroids	14 (47%)
Cyclosporine	2 (7%)
Doxepin	2 (7%)

Figure 2: Patient Journey and experience living with CSU





• Figure 2 summarizes the key steps in a patient journey and patient experience

Physical and emotional impact

 The unpredictability of the symptoms and uncertainty around the duration of disease were consistently reported • Itching intensity, swelling, soreness were high but variable over time

- The emotional burden was high at disease onset and worsening over time
- Patients reported inability to function normally, their social and personal life was highly impacted

Perception/knowledge of CSU

- There was variability in the level of knowledge of CSU, patients rely on information from their physician and online sources
- Patients felt a strong need to understand their condition further and seek ways to manage their condition and identify potential triggers

Treatment experience and expectations from future treatments

- There was a feeling of dependency on medication and high daily pill burden was a problem
- Patients were desperate for complete relief and considered this a key outcome for future treatments
- Most patients would accept mild short-term downsides for high efficacy and long-term symptom-free periods

Conclusions

- This study highlights the complex impact of CSU and reveals expectations that patients have from treatments • The data will be used to design a discrete choice experiment to assess in a quantitative way preferences for treatment profiles which could support future HTA assessment of new drugs in CSU

References

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