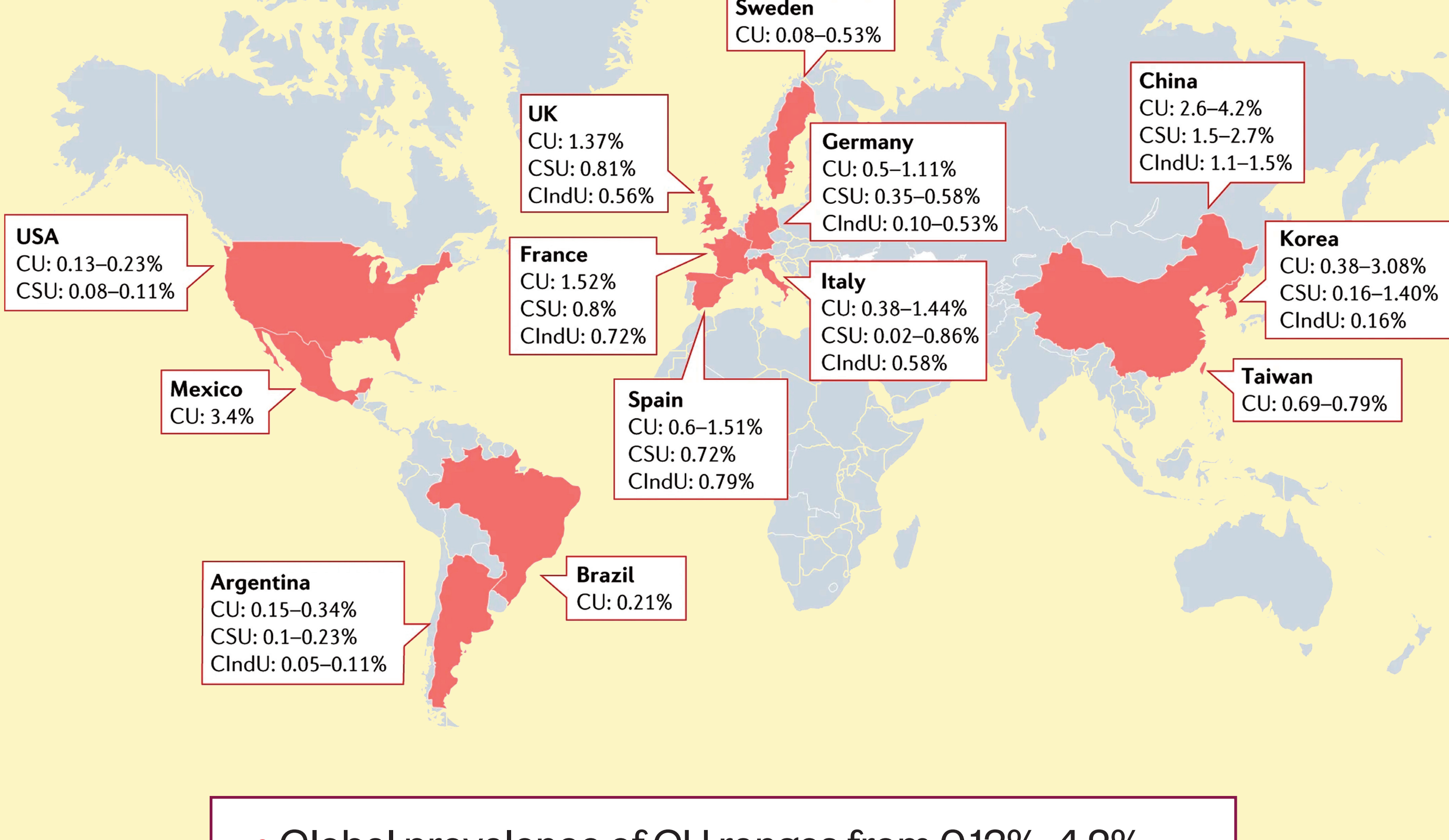


# THE BURDEN OF CHRONIC URTICARIA

## Global Prevalence of CU

CU is a mast cell-mediated condition characterized by the recurrent occurrence of urticaria and/or angioedema for at least 6 weeks. CU impacts the daily lives of many individuals, with a prevalence ranging from 0.1%-4% depending on the country.



- Global prevalence of CU ranges from 0.13%-4.2%
- CSU accounts for over two-thirds of CU cases
- More prevalent in women than men (2-4:1 ratio)

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## Time to Symptom-Free Recovery

Although approximately 70% of patients with CU can expect to recover from their symptoms within 6 months, for the remaining 30%, finding relief can be a complex and extended process.

In 8.7% of patients, CU persists for 1-5 years, whereas in 11.3% of patients, it endures for over 5 years.

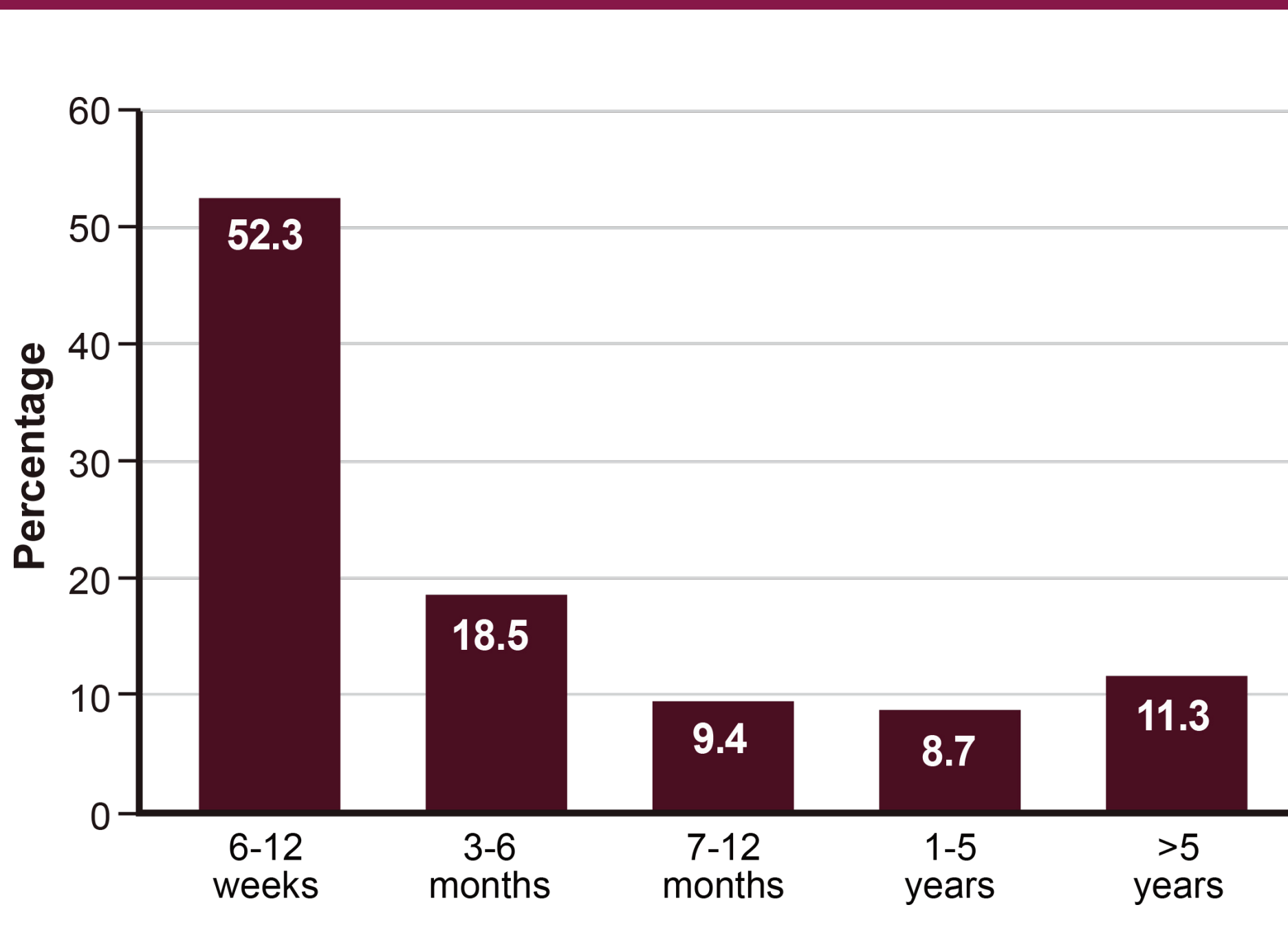


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## Physical Burden



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The physical burden of CU can be immense, with symptoms ranging from itching and discomfort to severe pain, and even disability. The recurrent occurrence of urticaria and/or angioedema can lead to sleep disturbances, fatigue, and a decrease in physical activity, ultimately impacting an individual's QOL. Additionally, the unpredictable nature of CU can cause significant stress and anxiety, leading to further physical and emotional strain.

### Physical burden varies depending on the:

- Severity of the disease
- Individual patient

### Patients experience:

- Severe itching, hives, and skin swelling
- Pain and discomfort
- Interference with daily activities
- Fatigue
- Loss of sleep

## Associated Comorbidities of CU

Individuals with CU are also at an increased risk of developing comorbidities, including skin disorders, autoimmune diseases, and psychiatric conditions. The presence of these comorbidities can further exacerbate the burden of CU on an individual, leading to increased symptom severity, decreased QOL, and additional healthcare costs.

## Concomitant CSU and CIndU



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- CIndU is a frequent comorbidity of CSU, with most studies reporting rates >10%
- Multiple types of CIndU may coexist in the same patient with CSU
- Delayed pressure urticaria is present in up to 36% of patients with CSU
- Symptomatic dermographism is present in up to 25% of patients with CSU

### Autoimmune Disorders

- Occur in women twice as often as in men
- Patients are more likely to have:
  - Hyperthyroidism
  - Hypothyroidism
  - Rheumatoid arthritis
  - Sjögren syndrome
  - Type 1 diabetes
  - Celiac disease
- Abnormal serologic markers are often present, including:
  - Anti-thyroid antibodies
  - Mean platelet volume
  - Rheumatoid factor
  - Antinuclear antibodies

### Psychiatric Disorders

- Almost one-third of patients with CU have ≥1 underlying psychiatric disorder
- Associated with severity, duration, and psychological functioning
- Most common disorders are:
  - Sleep disorders
  - Anxiety
  - Mood disorders (depressive or dysthymic disorder)
  - Post-traumatic stress disorder
  - Obsessive-compulsive disorder
  - Substance use disorder

## Quality of Life

The impact of CU on an individual's QOL cannot be overstated. The unpredictability of the condition and its chronic nature can lead to social isolation, anxiety, and depression. Furthermore, the symptoms of CU, such as itching, pain, and fatigue, can significantly impact daily activities, leading to decreased productivity and an overall reduction in QOL.

### Compared with patients awaiting double coronary bypass:

- Patients with CSU had similar health status scores
- Limitation of mobility and pain were more severe in patients with heart disease, but sleep disruption was more severe in patients with CSU

### Compared with patients with psoriasis:

- Patients with CSU had significantly lower QOL when considering:
- Physical and mental components
  - Work productivity
  - Activity impairment
  - Self-reported psychological complaints
  - Comorbidities (nasal allergies, dermatologic conditions, severe allergic asthma, and dyspepsia)

## Socioeconomic Burden

CU can have a significant socioeconomic impact, with individuals experiencing lost productivity due to missed work or school. The cost of healthcare utilization, such as doctor visits, medication, and hospitalization, also contributes to the economic burden of CU.

- Before biologic treatments (in the United States):
  - Total direct and indirect costs per patient with CSU, mean (SD): **\$2047 (\$1483) annually**
  - Total direct and indirect costs of CSU: **\$244 million annually**
- Economic burden is higher with biologic treatments

## Limitations of Conventional Treatments

Conventional treatments for CU, such as antihistamines and immunosuppressants, are often ineffective in a significant proportion of patients and are associated with numerous adverse events. Additionally, some individuals may require long-term use of these medications, further increasing the risk of adverse events. The limitations of conventional treatments highlight the need for novel and effective treatment options for individuals with CU.

- Approximately 40%-55% of patients do not respond to antihistamines, even with maximal doses
- Only 40% of patients with CSU in clinical trials achieve complete symptom control with anti-IgE therapy
  - 60% of responders will relapse within 2 months of treatment discontinuation
- Overall, about 1 in 5 patients do not achieve adequate control with available treatments

### Abbreviations

CIndU: chronic inducible urticaria  
 CSU: chronic spontaneous urticaria  
 CU: chronic urticaria  
 IgE: immunoglobulin E  
 QOL: quality of life

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