Recombinant Human C1 Esterase Inhibitor for the Prevention of Acute Hereditary Angioedema Attacks: A Case Report

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BACKGROUND
Hereditary angioedema (HAE) is a genetic disorder characterized by unpredictable, episodic swelling that can occur in various locations (eg, feet, gastrointestinal tract, hands, oropharyngeal-laryngeal region)1,2,3. Treatments normally used for angioedema are ineffective for swelling related to HAE.

• The frequency and severity of HAE attacks is highly variable within and among patients with HAE1,4.

• HAE is associated with a substantial societal burden, including lost productivity and increased costs, particularly when acute HAE attacks require a visit to the emergency department (ED) or hospitalization (Figure 1)1,3.

• Data from a study published in 2010 reported HAE ED visit costs of $2603 per patient annually5.

AIM
• To evaluate the efficacy and cost savings of prophylactic investigational, off-label treatment with rhC1-INH in an adult with HAE.

CASE STUDY
A 52-year-old Caucasian female patient with type I HAE (Table) received standard care and a trial of off-label treatment with rhC1-INH in an adult with HAE.

Figure 1. Hospitalization Outcomes in Patients With HAE, 2014

CONCLUSION
• rhC1-INH prophylaxis for HAE, although not currently approved for this indication, reduced the occurrence of ED visits and provided a potential cost benefit in terms of both drug costs and medical utilization.

References
3. Puget Sound Asthma, Allergy & Immunology, Tacoma, WA; Pharm ing Healthcare Inc., Bridgewater, NJ.

Figure 2. Patient Timeline*

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