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Prophylaxis Reimagined: Overcoming Challenges in Long-Term HAE Management

Announcer:

Welcome to CME on ReachMD. This episode is part of our MinuteCE curriculum. Prior to beginning the activity, please be sure to review the faculty and commercial support disclosure statements as well as the learning objectives."

Dr. Buttgereit:

Hi, this is CME on ReachMD. I'm Dr. Thomas Buttgereit, and as you can see, I'm not alone. Here with me today is Dr. Danny Cohn. Our discussion today will focus on overcoming challenges in the long-term management of hereditary angioedema.

So, Danny, what are some of these challenges and what are current strategies to address them?

Dr. Cohn:

Hello, Thomas. Yes, indeed. We still face challenges with treatment of hereditary angioedema. Even though the novel therapies seem to be very effective, patients may still have breakthrough angioedema attacks and the disease may not be fully controlled in all of them, which requires personalized approach of their treatments, which also is true for the dosing interval. Some patients may need to administer more frequently than others, and also, the route of administration can be challenging. Some patients really dislike the parenteral administrations or have issues with the route of administration, like experiencing the injections as painful.

And lastly, but also very importantly, when patients take longer treatments, that may be considered a burden too. Especially when you travel, you need to store the treatments below the temperature of 25 degrees or taking them on board of a plane is always a challenge.

Dr. Buttgereit:

Yeah, right. So, Danny, you mentioned we are actually really in a very lucky situation to have different and very diverse treatment options available for our patients when providing long-term prophylaxis. So diverse means these treatments are not only diverse in their target, but also in the way to administer and the route of administration. So we have subcutaneous, we have venous, and we maybe will sooner or later also have oral treatment options and more oral treatment options available. And we have already one. So that makes, really, this treatment very fit for each patient and very individualized.

So for at least some patients we learned, as you said, that some of these patients may face breakthrough attacks and may face challenges in the way to administer and maybe face some treatment burden. And for this, it's really nice to have these different options

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available in these special situations in case of breakthrough attacks, in case of burden of treatment, to switch and to adjust on an individual basis, the treatment for the patient's needs.

So thank you, Danny, for this excellent discussion and thank you, people, for tuning in.

But last but not least, I want to give the last word to Danny.

Dr. Cohn:

Thank you, Thomas. I must say this is the part that I really enjoyed the most in the patient care, where we discuss the individualized treatments and where we really tailor the long-term prophylactic treatment, but also the acute treatment, based on their personalized requirements and their wishes.

And thank you very much.

Dr. Buttgereit:

Bye-bye.

Announcer:

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