

MEETING ABSTRACT

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Asthma diagnosis and treatment – 1013. Six month follow up on pediatric patients with severe persistent allergic asthma after on eyear of omalizumb therapy

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Purpose

Anti-IgE antibody had been used in severe persistent allergic asthma in adults. However, its long-term efficacy in pediatric patients in India has not been reported.

Method

20 pediatric (12 male and 8 female) patients, with mean age of 8.5 having severe persistent allergic asthma, with recurrent exacerbations and on oral/IV steroids, prospectively received Omalizumab 150mg/300mg, depending on IgE & body weight for 6 month to 1 year, at B.R.Singh Hospital, Kolkata. Number of exacerbations, total dose of oral Steroids, use of rescue medications, ICS/LABA dose used were recorded at the baseline, 24 weeks, end of treatment and on 6 month follow up (between February 2011 and August 2012) and statistically analyzed.

Results

All 20 patients after anti-IgE therapy were followed-up for 6 months. Significant reductions observed in total oral steroid use by six months -15.5mg (27.5mg vs. 12mg; 95%CI, $p < 0.001$). Use of rescue medications with β_2 agonists inhaler decreased by -7.90 puffs (12.0 vs 4.10 puffs; 95%CI, p -value < 0.001) at 24 weeks and by -13.67 puffs (13.67 vs 0.00 puffs; 95%CI, p -value < 0.001) at 52 weeks (n=6). There was significant reduction in ICS dose at week 24 by -287.50 mcg (550.0 vs 262.50 mcg; 95%CI, p -value < 0.001). By week 52 (n=6) ICS dose further declined to -458.33 mcg (750.0 vs 291.67 mcg; 95%CI, p -value < 0.001). 15 (75%) patients had severe asthma symptoms at baseline, which came down to 6 (30%)

($p < 0.05$), at week 24. Similarly 15 (75%) patients had unscheduled hospitalization at baseline, this figure came down to zero by week 24.

Conclusion

Use of anti-IgE antibody for 6 months to 1 year is well tolerated and led to overall significant improvement and stabilization of pediatric patients with severe persistent allergic asthma which was maintained at 6 months post treatment follow-up period.

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