

Are there any serious risks?

In asthma patients taking this medication, there have been rare cases of a severe allergic reaction. Although this has not been seen in patients with urticaria, we will monitor you for an hour after the first injection and for 30 mins after subsequent injections in the clinic.

In our clinic we provide you with an adrenaline autoinjector to carry for the first 24 hours so that in the unlikely event that you had a severe reaction you would be able to treat it quickly and effectively

Remember to bring your adrenaline autoinjector to clinic appointments.

What else do I need to know?

You should not have Omalizumab if you are at risk of a worm infection (e.g. travel to some countries), or if you are pregnant or breast feeding.

Please inform someone from the clinic if there are any changes to your other medication, if you develop any new illness, become pregnant or plan to become pregnant.

Further Information

www.bad.org.uk

British Association of Dermatologists

Willan House, 4 Fitzroy Square, London

W1T 5HQ

Tel: 0207 383 026

A website set up by Novartis, who make omalizumab, to provide information:

<http://www.xolair.com/>

University Hospitals
of North Midlands



NHS Trust



Omalizumab for Chronic Urticaria

Patient Information Leaflet

Immunology Service

Haematology and Oncology Directorate

Specialist Nurse tel: 01782 672504

Secretary's tel: 01782 674284

Patient Advice and Liaison Service

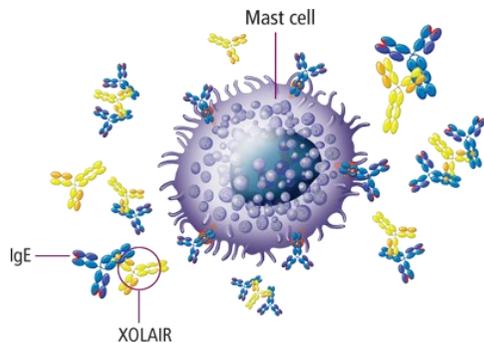
Tel: 01782 676450

Email: patientadvice.uhnm@nhs.net

What is Urticaria?

Urticaria is a red, itchy rash sometimes called hives or nettle rash. It is thought to be caused due to release of excessive histamine from some immune cells, which is why antihistamines are commonly used to treat this condition.

What is Omalizumab and how does it work?



There is probably more than one mechanism or cause for chronic urticaria. Stimulation of some immune cells (called mast cells) causing release of histamine is likely to be one mechanism. Omalizumab is a man-made drug that reduces stimulation of these cells and thus, decreases the release of histamine.

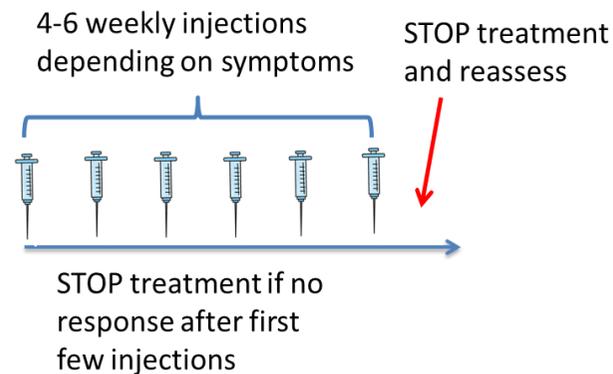
Why am I being offered Omalizumab?

You have been offered this medicine since your urticaria has not improved despite taking high doses of antihistamines and other drugs.

80-90% of people taking Omalizumab get significant benefit and about a third of patients are completely free of symptoms after 12 weeks.

It suppresses symptoms and is not a cure, so the symptoms can return once the treatment is stopped.

What does the course of Omalizumab involve?



There is a national guideline for the use of Omalizumab. We use a questionnaire that helps us understand how much improvement there has been in your symptoms. It is important that you fill this questionnaire at the correct time points, since it

may be difficult for us to justify the use of the drug without this information.

Omalizumab is licensed to be given as a series of injections every month, lasting for 6 months. In clinic we sometimes find that the injections work just as well given every 6 weeks. There is a small risk of reaction so you need to stay in the clinic for 1 hour after the first injection and 30 mins after subsequent injections.

We initially provide 4 doses and reassess your symptoms to see if the medicine is working. After 6 injections we will stop the treatment, but if you have a flare up of symptoms and meet the criteria again for another course of treatment, then we will restart the Omalizumab.

What are the risks of taking Omalizumab?

Some people who have had Omalizumab for urticaria have described reactions at the site of the injection, such as swelling and redness. Some patients have had an increased number of coughs and colds after starting the drug.