Spreading of maintenance interval in subcutaneous allergen immunotherapy with high-dose hypoallergenic pollen preparations is safe and effective in daily life

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Background
Subcutaneous allergen immunotherapy (SCIT) with high-dose hypoallergenic pollen preparations has been demonstrated to be safe and effective in clinical studies.1,2,3 We conducted a post marketing surveillance study with focus on efficacy, tolerability and adherence on high-dose hypoallergenic pollen preparations in the daily routine of office-based physicians. We were interested whether extending of the maintenance interval from 4-5 weeks (SmPC) up to 8 weeks was safe and effective.

Methods
The study was conducted at 283 centres in Germany. Study data of 753 patients treated with registered high-dose hypoallergenic pollen preparations was analysed. 23.5 % of the patients were treated preseasonally, and 75.3 % perennially. 321 patients receiving a perennial SCIT were treated in 4-week intervals (4W), 90 patients in 8-week intervals (8W). Demographic data of patients included in this subgroup analysis is shown in Table 1. Study data was collected before SCIT (baseline), at the end of the 1st and 2nd pollen season after start of SCIT (herein after referred to as pollen season 1 and 2) via structured questionnaires. Efficacy was evaluated based on allergic symptoms and intake of antiallergic medication. Quality of life data was obtained by a self-administered questionnaire (EQ-5D).

Tab. 1: Demographic data of patients

Results
Patients’ data is presented from baseline and pollen season 2 after starting the SCIT. Tree pollen preparations were prescribed most frequently, followed by grass pollen. The proportions of patients with moderate and severe nasal symptoms decreased from 92.9 % to 23.8 % (4W) and in 5 patients of the 8W-group (5.6 %). No ADR related to SCIT was classified as serious (visual analogue scale) score (4W: from 65 to 90; 8W: from 70 to 85, Figure 2). Patients’ state of health improved, measured by the median EQ-5D VAS (0 – 100) ranging from worst (0) to best (100).

Fig. 2: Patients’ state of health on the EQ-5D VAS (median EQ-5D VAS score [min/max]) ranging from worst (0) to best (100).

Tab. 2: Patients’ overall compliance and satisfaction

Tab. 3: Patients [%] with SCIT-related adverse drug reactions (ADRs)

Conclusion
Clinical improvement and tolerability of SCIT with high-dose hypoallergenic pollen preparations proved to be good in both treatment regimens. This offers doctors the opportunity to find the most convenient and flexible maintenance interval for every single patient.

Reference List

Conflict of interest: A. D. and E. T. – O. are employees of Allergopharma GmbH & Co. KG, T. H. and T. F. have nothing to declare.