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The Personal Touch: Advancing Personalized Treatment in HAE

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. Buttgerreit:

This is CME on ReachMD. I'm Dr. Thomas Buttgerreit, and in this episode, I'll discuss best practice for planning personalized treatment strategies for patients with hereditary angioedema, HAE.

So for planning personalized treatment strategy, it is really necessary to, first, explore the patient's needs and establish treatment goals and, second, also to acknowledge available treatment options. And actually, the most important phase is the discover phase in this particular exercise.

So first of all, you really, generally need to check the patient's status of HAE. How is the current medical history of the patient? What about the frequency of HAE attacks? And what actually are the medications the patient is currently using to treat HAE and also its comorbidities? It's really important in this patient to assess disease control, disease activity, and disease burden. So the main question is, is the patient controlling the disease, or is the other way around, that the disease is controlling the patient? So this really is a key question. And for this, you can use different patient-reported outcome measures. Like to assess control, you can use the angioedema control test; for disease activity, you can use the angioedema activity score or the HAE activity score; and for quality of life impairment, you can use 2 tools, which is HRQoL and the HAEQoL. So these patient-reported outcome tools are really important to assess your patients, and these are really also the basis of discussions with your patients. And it's also very important, when you talk to patients, what is actually their personal experience with their disease, with their current treatment they're using, and how is actually their lifestyle at the moment, and what impact does HAE have on this lifestyle of patients?

But actually, the preferences in life and current life status and the life situation. So this really important to go to Part B of this discover phase, to really assess and understand the patient perception on the treatment goals. So what are your goals as a physician? What are actually the treatment goals of the patients in relation to the current situation?

So the main goal is to achieve the normalization of life, to achieve a normal life for the patient. But what does this actually mean to the patient? There could be differences between the perception of a normal life between a physician and the patient. This is really important to assess this and discuss this with the patient.

And this is really the basis for the patient to understand what is the best treatment strategy for the patient. Is it on-demand treatment? Is it a short-term prophylaxis? Is it a long-term prophylaxis? You want to use and treat this patient appropriately.

So there is really many things you need to discuss with the patient, and what is also important, does the patient maybe face some – yeah, let's say treatment burden with the treatment the patient is using? So this is also something you need to take into account. And when you talk about the current life situation, is it maybe a female patient who is of childbearing potential or wants to have children soon? So many aspects you have to take into account when you discuss with the patient. And this takes some time, and you need to take this time to discover and explore the patient.

So in summary, it's really useful to use different strategies in discovering the patient's needs, and this is really made on an individual basis. And you should consider the current disease status of the patient, as well as the patient's phenotype and the individual needs of the patients. And this may guide you through this phase. And there are also some helpful tools, like the patient-reported outcome measures I talked about, that may help you to assess the current disease status of the patient to improve, in the end, patient's disease activity to get these patients controlled and to normalize the patient's life in a way, also, the patient understands.

And now, the time is already up, so thank you very much for listening.

Announcer:

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