

Omalizumab for asthma

Information for young people,
parents and carers

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Introduction

This booklet has been given to you to help answer some of the questions you or your parents/carer may have about omalizumab treatment.

You pronounce omalizumab like this: oh-ma-liz-u-mab.

This booklet explains the benefits, risks and alternatives of omalizumab as well as what to expect when you come to hospital.

Throughout this leaflet we refer to 'you' as the young person who is thinking about having omalizumab. Your parents/carer should also read this leaflet too. However in some cases this leaflet may be given to parents/carers, especially those patients who are very young.

If you have any questions or concerns, please ask one of the doctors or nurses.

What is omalizumab?

Omalizumab can help to reduce symptoms and attacks in some people with asthma.

Omalizumab is available for people who:

- have severe, persistent allergic asthma that is not well controlled on their usual medicine

and

- are aged six years and above.

It is used along with usual asthma medicines.

Omalizumab is different to other asthma treatments as it has to be given as an injection under the skin of the upper arm or thigh every two to four weeks. The doctor or nurse will explain how often injections are needed and how many there will be.

We hope that this treatment will help your asthma but you need to be aware that, as with all medicines, it does not work for everyone. Your doctor will review your asthma after 16 weeks of treatment to decide whether it is working.

What is allergic asthma?

Asthma is a disease that affects the airways, causing the muscles around the walls of the airways to tighten and narrow. The lining of the airway also becomes inflamed and starts to swell. Some people have severe asthma, some have allergic asthma and some have both.

Severe asthma is when a person's breathing continues to get worse despite regular inhalers and medicines.

Allergic asthma is made worse by an allergy to one or more substances (allergens) in the environment such as house dust mite or pollen.

As a result of the allergy, the body produces a substance called immunoglobulin E (IgE) which causes the swelling in the airways.

What are the benefits?

Omalizumab may help to improve your asthma symptoms such as cough, wheeze and shortness of breath. It may take several weeks before you notice any difference.

How does omalizumab work?

A person with an allergy produces too much IgE. The IgE attaches to the cells in the body and causes an allergic reaction. Omalizumab attaches itself to the IgE. This stops IgE from attaching to the cells in the body and causing an allergic reaction.

How can I prepare myself?

We need your co-operation to decide if omalizumab will benefit you. We will ask you to complete a diary card and bring it to every appointment. The diary card will show:

- your peak flow
- whether you have had difficulty in sleeping due to your asthma
- any days of school or college you have missed
- whether asthma has interfered with your daily life at all
- whether you have needed steroid tablets
- whether you have needed to visit your GP or hospital because your asthma hasn't been good.

It is very important that you complete your diary card every day as the information will help us to decide whether you will benefit from omalizumab in the long term.

How is omalizumab given?

Omalizumab is given as an injection under your skin every two to four weeks. Before the injection is given we can offer some skin numbing cream and/or cold spray. These will help reduce the sting of the injection. We will give the injections on our day unit or clinic.

What are the risks?

As with any medicine, there is a risk of side effects with omalizumab. The most common are headaches, aches and pains.

There is also a risk of an allergic reaction which is why we ask you to remain on the unit for a while after the injection. If you notice any itch, rash, hives, swelling, dizziness, shortness of breath, wheezing or coughing, tell the nurses or doctor immediately.

What happens after the treatment?

You remain on the unit for two hours after the first three injections and half an hour after each following injection. This is for your safety and to monitor and treat any allergic reactions.

Can I stop my asthma medicine?

No. Omalizumab is designed to work alongside your usual asthma medicines and it can be dangerous to suddenly stop your medicines. If your asthma symptoms improve over time then your doctor may decide to gradually reduce some medicines.

Will I have a follow up?

Yes. As well as being seen every 2-4 weeks for the injections you will be reviewed by the asthma/allergy doctors 16 weeks after starting omalizumab. The doctor will decide whether you would benefit from staying on the treatment. This decision will be made partly by looking at your diary cards and partly on breathing tests carried out in clinic.

Once we start the omalizumab treatment, it is really important that you make every effort to attend all of your appointments and fill in the diary cards at home.

If you have a clear improvement in your asthma then you may be invited to receive it long term. If there is no improvement then omalizumab will be stopped and you will carry on with your usual asthma medicine.

Further information

The National Institute for Health and Care Excellence (NICE) has published information that patients might find useful.

w: www.nice.org.uk/guidance/ta278/resources/omalizumab-for-severe-persistent-allergic-asthma-pdf-425322541

Contact us

To speak with an allergy nurse specialist, please book a call using our online booking calendar.

web: my.drdoctor.co.uk/clinic/childrensallergynursehelpline

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit

web: www.evelinalondon.nhs.uk/leaflets

Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline.

t: 020 7188 3003, Monday to Friday, 10am-5pm

e: letstalkmedicines@gstt.nhs.uk

Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

t: 020 7188 8801 (PALS) **e:** pals@gstt.nhs.uk

t: 020 7188 3514 (complaints)

e: complaints2@gstt.nhs.uk

Language and Accessible Support Services

If you need an interpreter or information about your care in a different language or format, please get in touch.

t: 020 7188 8815 **e:** languagesupport@gstt.nhs.uk

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