

European Respiratory Society Annual Congress 2012

Abstract Number: 1612

Publication Number: 357

Abstract Group: 6.2. Occupational and Environmental Health

Keyword 1: Occupation **Keyword 2:** Asthma - management **Keyword 3:** Treatments

Title: Anti-IgE treatment: An alternative for severe allergic occupational asthma

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Body: Severe work-related asthma remains a difficult problem and new alternative treatment must be evaluated to obtain asthma control and ideally the sustain of the occupational activity. During 2 years we have enrolled 10 occupational asthmatics (8 men, 2 women, mean age 37, suffering of asthma from 0,5 to 8 years. They were all severe uncontrolled asthma (GINA recommendations). The mean dose of inhaled corticosteroids was 3200 µg/day of beclometasone equivalent. All patients had 2 to 8 severe exacerbations/year. Six patients were allergic to a high molecular weight agent (wheat flour: 2, cat: 1, rabbit: 1, storage mites: 1, Alternaria: 1). In 4 patients the causative agent was a low molecular weight compound (isocyanates in 2 cases, acrylates one case, perchlorethylene one case). Total IgE levels were always above 30 U/mL. The follow-up was performed from 6 to 48 months. Asthma parameters and the occupational status were registered every 6 months. Results showed a reduction of severe exacerbations in 9 patients. Only one patient was “ non responder” after 6 months of treatment. In the 9 “responders” an optimal control could be obtained in 4 patients. Oral daily corticosteroids could be decreased in the 5 (mean initial dose 8,6 mg/day to 1,2 mg/day of equivalent prednisone). Days off-work because of asthma were reduced in the 9 “responders”. 7 could continue to work with amendment of the working place. We suggest that omalizumab could be a potential treatment for severe uncontrolled work-related asthma in 3 conditions, patients who were unable to avoid allergen exposure, persistent asthma after cessation of the offending exposure and work-aggravated asthma symptoms in workers with pre-existing allergic asthma.