

Raising Awareness Of The Most Common Type Of Asthma: Allergic Asthma

(NAPSA)—About 25 million people in the US have asthma and 60 percent of them—a whopping 15 million people—have allergic asthma. You should know, however, that there are steps you can take if you or someone you care about is among them.

Allergic asthma is the most common type of asthma, and people who have it experience many of the same symptoms as nonallergic asthma, such as coughing, difficulty breathing or tightening of the chest. However, allergic asthma is triggered by allergens in the air such as dust mites, pet dander and cockroach debris.

For example, “Jacquie” is a 57-year-old grandmother and retired teacher who was diagnosed with allergic asthma when she was a toddler. She describes the feeling of experiencing an allergic asthma attack as “trying to breathe through a coffee straw, trying to remain calm while not getting enough air.”

Growing up, Jacquie’s symptoms would develop rapidly and she was often rushed to see a doctor. In recent years, her symptoms would “sneak up” on her, leaving her suddenly wheezing and gasping for air. Throughout her life, Jacquie tried many different asthma medications, including inhaled corticosteroids (ICS), but her symptoms were still not controlled. Following a severe allergic asthma attack last year, Jacquie’s doctor recommended she continue to avoid her allergic triggers and to explore Xolair® (omalizumab) as a treatment option. After discussing the associated risks, including anaphylaxis, a life-threatening condition, she decided to give it a try.

“After a life-long experience with moderate-to-severe allergic asthma, I am now seeing improvements in my symptoms,” said Jacquie.

Xolair for subcutaneous use is an injectable prescription medicine used to treat adults and children 12 years of age and older with moderate to severe persistent asthma whose asthma symptoms are not controlled by asthma medicines called inhaled corticosteroids. A skin or blood test is performed to see if you have allergies to year-round allergens. Xolair is not used to treat other allergic conditions, acute bronchospasm or status asthmaticus.

A severe allergic reaction called anaphylaxis can happen when you

Could it be allergic asthma?
25 million Americans have asthma

6 in 10 – or 15 million have allergic asthma

Common allergic asthma triggers

- Dust mites
- Cockroach debris
- Pet dander

Allergic asthma is triggered by allergens in the air, but can be managed.

receive Xolair. The reaction can occur after the first dose, or after many doses. It may also occur right after a Xolair injection or days later. Anaphylaxis is a life-threatening condition and can lead to death.

To raise awareness about allergic asthma, Jacquie is working with Genentech and Novartis Pharmaceuticals Corporation to encourage patients whose symptoms aren’t adequately controlled with ICS to talk to their doctors about whether their asthma may be triggered by allergens and discuss treatment options that may be appropriate for them.

“It’s important for patients like me to share our stories,” Jacquie says. “I hope my personal experience can help others gain a better understanding of the condition and have more meaningful conversations with their doctors on how to manage this specific type of asthma.”

Visit www.Xolair.com for more information about allergic asthma, including a list of questions to take to your doctor and a short health survey to help determine whether your asthma is currently being controlled, and to see additional important safety information about Xolair.

IMPORTANT SAFETY INFORMATION

What is the most important information I should know about XOLAIR?

A severe allergic reaction called anaphylaxis can happen when you receive XOLAIR. The reaction can occur after the first dose, or after many doses. It may also occur right after a XOLAIR injection or days

later. Anaphylaxis is a life-threatening condition and can lead to death. Go to the nearest emergency room right away if you have any of these symptoms of an allergic reaction:

- wheezing, shortness of breath, cough, chest tightness, or trouble breathing
- low blood pressure, dizziness, fainting, rapid or weak heartbeat, anxiety, or feeling of “impending doom”
- flushing, itching, hives, or feeling warm
- swelling of the throat or tongue, throat tightness, hoarse voice, or trouble swallowing

Your healthcare provider will monitor you closely for symptoms of an allergic reaction while you are receiving XOLAIR and for a period of time after your injection. Your healthcare provider should talk to you about getting medical treatment if you have symptoms of an allergic reaction after leaving the healthcare provider’s office or treatment center.

Do not receive XOLAIR if you are allergic to omalizumab or any of the ingredients in XOLAIR.

Before receiving XOLAIR, tell your healthcare provider about all of your medical conditions, including if you:

- have any other allergies (such as food allergy or seasonal allergies)
- have sudden breathing problems (bronchospasm)
- have ever had a severe allergic reaction called anaphylaxis
- have or have had a parasitic infection
- have or have had cancer
- are pregnant or plan to become pregnant. It is not known if XOLAIR may harm your unborn baby.
- if you become pregnant while taking XOLAIR, talk to your healthcare provider about registering with the XOLAIR Pregnancy Registry. You can get more information and register by calling 1-866-4XOLAIR (1-866-496-5247) or visit www.XOLAIRpregnancyregistry.com.
- are breastfeeding or plan to breastfeed. It is not known if XOLAIR passes into your breast milk.

Tell your healthcare provider about all the medicines you take, including prescription and over-the-counter medicines, vitamins, or herbal supplements.

How should I receive XOLAIR?

XOLAIR should be given by your healthcare provider, in a healthcare setting.

XOLAIR is given in 1 or more injections under the skin (subcutaneous), 1 time every 2 or 4 weeks.

In asthma patients, a blood test for a substance called IgE must be performed prior to starting XOLAIR to determine the appropriate dose and dosing frequency. Do not decrease or stop taking any of your other asthma medicine unless your healthcare providers tell you to.

You may not see improvement in your symptoms right away after XOLAIR treatment.

What are the possible side effects of XOLAIR?

XOLAIR may cause serious side effects, including:

- See, “What is the most important information I should know about XOLAIR” regarding the risk of anaphylaxis.
- Cancer. People who receive treatment with XOLAIR may have a higher chance for getting certain types of cancer.
- Fever, muscle aches, and rash.

Some people who take XOLAIR get these symptoms 1 to 5 days after receiving a XOLAIR injection. If you have any of these symptoms, tell your healthcare provider.

Parasitic infection. Some people who are at a high risk for parasite (worm) infections, get a parasite infection after receiving XOLAIR. Your healthcare provider can test your stool to check if you have a parasite infection.

Some people who receive XOLAIR have had chest pain, heart attack, blood clots in the lungs or legs, or temporary symptoms of weakness on one side of the body, slurred speech, or altered vision. It is not known whether this is caused by XOLAIR.

The most common side effects of XOLAIR:

- Pain especially in your arms and legs, dizziness, feeling tired, skin rash, bone fractures, and pain or discomfort of your ears.

These are not all the possible side effects of XOLAIR. Call your doctor for medical advice about side effects.

You may report side effects to the FDA at (800) FDA-1088 or www.fda.gov/medwatch. You may also report side effects to Genentech at (888) 835-2555 or Novartis Pharmaceuticals Corporation at 888-669-6682.

Please see accompanying full Prescribing Information, including Medication Guide, for additional important safety information at Xolair.com.