Date:	RE: Patient	

To Whom It May Concern:

[INSERT PATIENT NAME] is a patient under my care for the management of Hereditary Angioedema (HAE), a rare, potentially life-threatening genetic disease. HAE is a genetic condition characterized by unpredictable, recurrent attacks of localized edema. Swelling can occur in the hands, feet, face, genital area or throat. Airway (throat) swelling is particularly dangerous and can lead to death by suffocation.

In addition, patients often suffer bouts of excruciating abdominal pain, nausea and vomiting that is caused by swelling in the intestinal wall. Untreated HAE swelling attacks can last 24-72 hours.

Expert physicians cite two approaches to HAE therapy;

1. On-Demand treatment should be considered when a patient is having an acute attack. Current on-demand therapies, particularly when taken as soon as the patient feels symptoms, are highly effective in reducing the severity and duration of symptoms.

2. Prophylaxis

- Ongoing prophylactic treatment should be considered for patients whose HAE is not sufficiently controlled to maintain suitable quality of life with on demand therapy.
- It is important to prevent HAE attacks when a patient is most susceptible due to trauma from surgery or dental procedures.

FDA Approved Therapies for HAE treatment:

Prophylaxis Treatments for HAE

Cinryze™ is an FDA-approved C1-Inhibitor concentrate for preventing HAE attacks in teenagers and adults. Cinryze™ is delivered intravenously and is approved for home infusion.

HAEGARDA® - is a plasma-derived C1-Esterase inhibitor concentrate for preventing HAE attacks in adolescents and adults. Haegarda® is delivered by subcutaneous injection and is approved for self-administration.

TAKHZYRO™ - is a monoclonal antibody for preventing HAE attacks in people 12 years of age and older. Takhzyro™ is administered by subcutaneous injection and is approved for self-administration.

On-Demand Treatments for HAE

Berinert® is an FDA-approved C-Inhibitor concentrate for treating acute HAE attacks in adults and pediatric patients. Berinert® is delivered intravenously and is approved for on-demand treatment through self-administration.

Firazyr® is an FDA-approved B2 bradykinin receptor antagonist for treating acute HAE attacks in patients 18 years and older. Firazyr® is delivered by subcutaneous injection and is approved for self-administration.

Kalbitor® is an FDA-approved kallikrein inhibitor for treating acute HAE attacks in patients 12 years of age and older. Kalbitor® is delivered by subcutaneous injection and must be administered by a healthcare professional.

Ruconest® is an FDA-approved plasma free recombinant C1-inhibitor concentrate for treating acute HAE attacks in adults and adolescents. Ruconest® is delivered intravenously and is approved for self-administration.

Effective treatment of HAE requires one of the following medications be administered to my patient as quickly as possible to abort the swelling attack:

[PHYSICIAN TO FILL IN INDIVIDUALIZED TREATMENT PLAN FROM BELOW]

It is medically necessary that the patient carry the listed HAE medications and related treatment supplies while traveling.

A second dose of prescribed HAE medications may be necessary in the event of a partial response or recurring angioedema symptoms.

In addition to this treatment, management of acute HAE attacks may include supportive care with airway monitoring, analgesic and antiemetic medication and intravenous fluids as appropriate.

*HAE swelling does NOT respond to drugs used to treat swelling caused by allergic reactions-- antihistamines, epinephrine, and corticosteroids.

*Airway compromise requires immediate dosing of the effective medications listed above and careful monitoring.

I may be reached with any questions regarding HAE at [INSERT PHYSICIAN CONTACT INFO].

Sincerely,

[Physician signature]

Physician name and title