

Redefining expectations for life with hereditary angioedema

About hereditary angioedema (HAE):



HAE is very rare, occurring in 1 in 10,000 to 1 in 50,000 people¹



Various parts of the body, including the hands, feet, face and airway¹



HAE can be life-threatening, as attacks that affect the throat can close the airway and lead to

suffocation¹



HAE can be very hard to diagnose, with the average time between the onset of symptoms and diagnosis ranging from

13-21 years¹



Diagnosis is vital, as the risk of death is up to

nine times

higher with undiagnosed HAE compared to those who have a diagnosis¹



HAE can be very painful, with

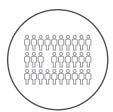
two thirds

of patients rating the pain of their most recent swelling attack as 'moderate' or 'severe'



HAE can be life-limiting, with one in three patients experiencing more than one attack per month and the average attack lasting

2 - 5 days



HAE can have wider socioeconomic impacts on both patients and caregivers, with

82% of patients

with severe HAE reporting work or school absenteeism during their last attack, for an average of 5.1 days¹

Takeda's vision

Takeda believes that all countries should take action to **redefine the expectations of people living with HAE from focusing on the challenges created by the condition to being able to live a life unlimited by the disease**. We look forward to working with a wide range of stakeholders, including clinicians, patients,
patient organisations and policymakers to make this vision a reality.



Takeda's recommendations for improving the quality of HAE care



Speeding up diagnosis

- Increase awareness among clinicians of the signs and symptoms of HAE
- Ensure that established best practice in referral and testing is followed
- Offer cascade testing to the family of all patients who are newly diagnosed



Delivering holistic care for patients

- Provide patients with access to high quality services that facilitate individualised management and treatment
- Establish international consensus on the standards that these services should meet based on expert clinical and patient consensus



Providing access to the right treatments at the right time

- Involve patients in decision-taking about their treatment
- Adhere to international best practice quidelines
- Provide rapid interim access to new treatments from the point of regulatory approval for appropriate patients



Collaborating internationally to share best practice and data

- Identify barriers to the adoption of international consensus guidelines on HAE at national level
- Forge partnerships between national expert groups, governments and healthcare systems to encourage greater collaboration in best practice sharing and data collection mechanisms

^{1.} HEAi. The Current State of HAE management in Europe, 2015, Last accessed: January 2020