

MIND THE **HAE** ATTACK

MANAGING HAE ATTACKS: **A SHARED DECISION-MAKING GUIDE**

Partnering with your healthcare team to treat attacks earlier and prevent attack progression

What is shared decision-making?

While doctors are experts in HAE management and the studies that go along with it, you are the only expert in what matters to you, your family, and your lifestyle. Together with your doctor, you have all the information needed to make informed treatment decisions. Shared decision-making (SDM) involves working together with your doctor to find the right HAE attack management plan for you.

WHEN PEOPLE LIVING WITH HAE ENGAGE IN SHARED DECISION-MAKING THEY:



Learn more about HAE attack management



Understand the pros and cons of on-demand treatment decisions



Are empowered with information and tools to support optimal treatment



Are better prepared to talk with and collaborate with their doctor



Are more likely to follow through on treatment plans

THE 3D MODEL EXPLAINS HOW TO ENGAGE IN SDM FOR ON-DEMAND TREATMENT OF ATTACKS



SDM is an ongoing process. A good time to revisit your on-demand treatment plan is when your situation changes or new treatments become available.

Adapted from Banerji, et al.

On-demand treatment is an important part of HAE management and will be a focus of your shared decision conversation

FAMILIARIZE YOURSELF WITH HAE GUIDELINES TO HELP GUIDE YOUR TREATMENT PLAN

International guidelines advise 4 key pillars of treatment, which includes strong recommendation that on-demand medication is considered for every attack.

- 1** **KEEP ON-DEMAND TREATMENT AVAILABLE AT ALL TIMES**
Every person living with HAE should consistently have sufficient on-demand treatment for at least 2 attacks and carry on-demand medication at all times, even if they're taking prophylaxis.
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- 2** **TREAT EARLY TO STOP ATTACKS FROM GETTING WORSE**
On-demand medication should be considered for every attack and taken at attack onset.
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- 3** **TREAT REGARDLESS OF LOCATION AND INTENSITY**
ALL HAE attacks are eligible for treatment, regardless of where the swelling occurs or how minor the attacks may seem at onset.
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- 4** **HAVE A PERSONALIZED ACTION PLAN IN PLACE**
A treatment plan should be carefully developed based on your needs and through a shared decision-making process with your doctor.

Read through the questions below and write your answers to have the most productive conversation with your doctor

Write your responses in the boxes below:



MY LIFESTYLE AND PRIORITIES:

What matters most to me in living with HAE and managing attacks?

How successful am I in fulfilling these priorities today? Where am I having challenges?

Do I feel my current treatment action plan (on-demand, with or without prophylaxis) is meeting these priorities?



MY ATTACK BURDEN:

How frequent have my attacks been over the last few months?

Can I recognize the onset of my attacks?

Are my attacks taking a long time to resolve with or without treatment?

How much do I modify my lifestyle to avoid attack triggers?

What is the impact of attacks on life, work, or school?

Do I feel worried or anxious about attacks or when the next attack will occur?

Read through the questions below and write your answers to have the most productive conversation with your doctor (cont'd)

Write your responses in the boxes below:



MY ON-DEMAND TREATMENT BEHAVIORS:

How likely am I to carry on-demand treatment with me at all times?

How likely am I to consider using on-demand treatment for every attack?

How soon do I use on-demand treatment after attack onset?

What are some reasons I might delay on-demand treatment, if any?



MY THOUGHTS ABOUT ON-DEMAND TREATMENT:

How well do I believe my current on-demand treatment works?

Are there any challenges I face with my current on-demand treatment?

What are my wants and needs from an on-demand treatment?

Is there another on-demand option that fits these wants and needs?

Schedule an appointment to discuss on-demand treatment

You're now prepared to have a shared-decision conversation with your doctor and start addressing your attack burden.

References: 1. Shared decision-making. National Learning Consortium. Accessed August 14, 2023. https://www.healthit.gov/sites/default/files/nlc_shared_decision_making_fact_sheet.pdf 2. Banerji A, Anderson J, Johnston DT. Optimal management of hereditary angioedema: shared decision-making. *J Asthma Allergy*. 2021;14:119-125. doi:10.2147/JAA.S284029 3. Maurer M, Magerl M, Betschel S, et al. The international WAO/EAACI guideline for the management of hereditary angioedema—the 2021 revision and update. *Allergy*. 2022;77(7):1961-1990. doi:10.1111/all.15214 4. Busse PJ, Christiansen SC, Riedl MA, et al. US HAEA Medical Advisory Board 2020 guidelines for the management of hereditary angioedema. *J Allergy Clin Immunol Pract*. 2021;9(1):132-150. e3. doi:10.1016/j.jaip.2020.08.046