

What is hereditary angioedema (HAE)?

HAE IS A RARE GENETIC CONDITION THAT CAUSES SWELLING

It is estimated to affect 1 in 50,000–150,000 people worldwide. An estimated 9,000 patients are diagnosed in the United States with HAE.



Attacks can vary significantly between each person living with HAE



Swelling can occur in different parts of the body, including hands, feet, genitals, stomach, throat, and face



In serious cases, swelling in the throat may require emergency intervention



Attacks can be triggered by emotional stress or physical trauma but also often occur without a known trigger



Even if someone is taking prophylaxis (preventative) treatment, they may still experience attacks

When a person living with HAE recognizes they are having an attack, it is important to treat **as soon as possible** with on-demand treatment (also called acute treatment).

EARLY SYMPTOMS OF AN HAE ATTACK

Although attacks vary and are highly individualized, people living with HAE can recognize the onset of an attack by a variety of early symptoms that may include*:



Tightness



Pressure



Swelling



Pain or ache



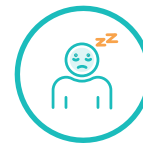
Itchiness



Tingling



Unwell feeling



Fatigue

*Exact locations not specified.

THERE ARE 3 TYPES OF HAE:

HAE TYPE I	HAE TYPE II	HAE TYPE III
People living with HAE type I have low levels of a protein called C1 inhibitor	People living with HAE type II have normal levels of the C1 inhibitor protein, but it does not function properly	People living with HAE type III experience swelling attacks even with normal levels and normal function of the C1 inhibitor protein

DIAGNOSIS CAN BE A CHALLENGE, AS HAE MAY MIMIC OTHER CONDITIONS

- Swelling from HAE is not due to allergies and cannot be treated in the same way as an allergic reaction
- Unexplained abdominal pain from HAE can sometimes be misdiagnosed as appendicitis, indigestion, or irritable bowel syndrome

People who experience these kinds of symptoms should talk to their healthcare provider about whether HAE might be the cause. Understanding what it's **not** is the first step toward the right diagnosis.

HAE diagnosis involves blood tests that measure C4 and C1 inhibitor proteins. These tests can determine HAE type, while genetic testing can further confirm the diagnosis

MANAGEMENT FOR HAE INCLUDES:



Prophylactic or preventative medication that can be taken on a regular schedule to reduce the frequency and/or severity of attacks

- Even though prophylactic treatment may reduce attack frequency, **patients should still have immediate access to on-demand treatments**



On-demand medication that is taken early at the onset of an attack to quickly stop and control swelling

The guidelines recommend:

- That every person living with HAE **should have constant, reliable access to 2 doses of on-demand medication**
- That patients **treat attacks early** to stop them from getting worse
- That all HAE attacks are eligible for treatment, **regardless of location or severity**

MIND THE HAE ATTACK IS A PLATFORM FOR EVERYONE IN THE HAE COMMUNITY

Get updates from the community at MindtheHAEattack.com/register.