Rupatadine fast onset of action. Pruritus and number of wheals improve in patients suffering from Chronic Urticaria, a pooled analysis

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Background

Rupatadine is a non-sedating, selective, and long-acting histamine H1-receptor inverse agonist against H1-antihistamines. Rupatadine has shown to have higher efficacy for the treatment of pruritus and urticaria. Although some antihistamines have shown IMH antagonistic properties, these effects cannot be attributed to specific interactions with IMH receptors. Rupatadine has shown both antihistaminic and anti-IMH effects through its interaction with specific receptors and not due to physiological antagonism. (Fig.1).

Aims

To assess at which time point rupatadine 10 and 20 mg effectively relieves the pruritus and the number of wheals following the first dose when we treated moderate to severe Chronic Idiopathic Urticaria.

Material and methods

The pooled data from two randomized, double-blind and placebo-controlled multicenter studies were used for this analysis. The first study compared the efficacy and safety of placebo or rupatadine 5 mg, 10 mg and 20 mg once daily in 248 CIU patients. The second study compared the efficacy of placebo or rupatadine 5 mg, 10 mg and 20 mg once daily in 249 CIU patients. Treatment and safety profile was evaluated over 6 weeks of treatment.

Results

Patient compliance was good.

The first symptom assessment following the first drug intake was twelve hours after (first PM score) and the second one was 24 hours after (first AM score), before the second drug administration. The first seven days after PM score (V1), NMS and MTSS were also assessed.

The second symptom assessment following the first drug intake was twelve hours after (first PM score) and the second one was 24 hours after (first AM score), before the second drug administration. The first seven days after AM score (V2), NMS and MTSS were also assessed.

The present analysis was performed on the intention-to-treat (ITT) population. The analysis employed a mixed-effects model 3,4 by means of individual data from main efficacy variable and similar numbers of patients. Considering the percentage of MPS, MNW and MTSS reduction at 12 and 24 hours, 10 and 20 mg of rupatadine showed an effective relieving of CIU symptoms after the first dose of treatment. Significant differences between the placebo group and both groups treated with 10 and 20 mg were observed at 12 and 24 hours for MPS, MNW and MTSS. (Figs. 4, 5, 6) This clinical improvement was maintained during the first week until the end of the study (6 weeks).

It is important to emphasize that the pruritus severity and the number of wheals was reported by the patients in a valuable subjective way reproducing the exact patient feeling. This fact is common of the assessment of this symptom in the present study was reliant on a subjective evaluation. This fact is common.

Discussion

This analysis clearly demonstrate that rupatadine 10 and 20 mg are effective in providing fast and long-lasting relief from pruritus which is the most troublesome symptom of CIU, itch or pruritus. We demonstrate also a significant reduction in the number of wheals, which is the most important urticaria’s sign.

Conclusion

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References