

Real-World Differences and Unmet Needs in Chronic Spontaneous Urticaria (CSU)

Management Between Dermatologists and Allergists in the United States



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Objective

To evaluate **differences in CSU management patterns**

- biologic utilization, referral behavior, unmet needs, and interest in emerging therapies among U.S. dermatologists and allergists

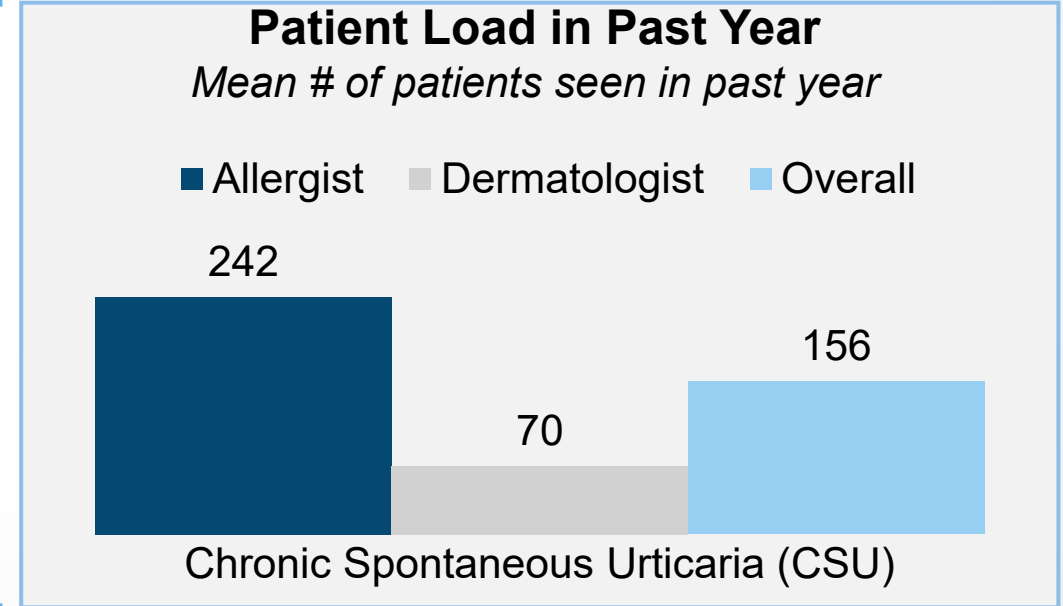
Background

- CSU is spontaneous wheals (hives) and/or angioedema persisting ≥ 6 weeks due to known or unknown causes, without a specific external trigger
 - Substantial impact on patient quality of life
 - Stepwise treatment approach:
 - Second-generation H1-antihistamines (first-line)
 - Omalizumab as established biologic standard
 - Recent expansion of biologic options (e.g., dupilumab: Apr. '25, remibrutinib: Sept. '25)
 - Many patients require escalation beyond antihistamines
 - Care is frequently shared between dermatologists and allergists

Methods

- July 2025 cross-sectional survey
- Dermatologists* (n=57), Allergists* (n=57)
- Captured CSU treatment patterns and unmet needs

- **Allergists reported higher CSU caseload than dermatologists**
(mean 242 vs. 70 patients / year)



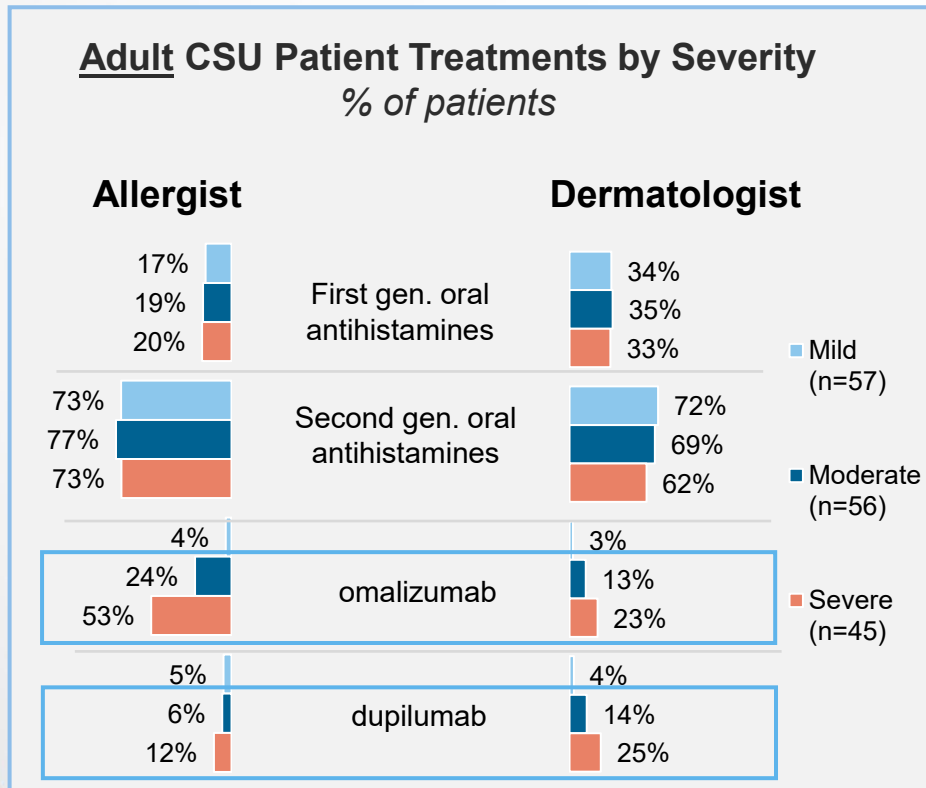
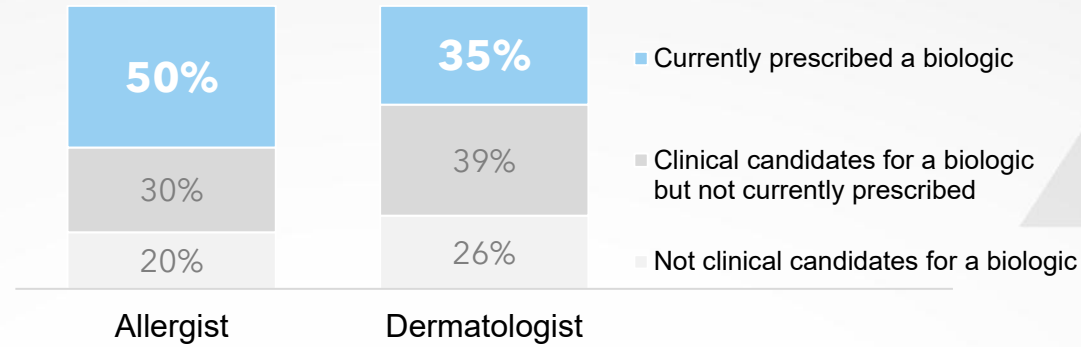
*** Physician Screening Criteria:**

- In practice 2 - 45 years, $\geq 50\%$ of professional time in clinical practice
- Dermatologists must spend 70% of their time in medical dermatology vs. cosmetic
- Must have ≥ 25 CSU patients (allergist) and 10 (dermatologist) in past year, and 1 CSU patient in past 3 months

Reference: Spherix Global Insights. Market Dynamix™: Chronic Spontaneous Urticaria (US), July 2025.

Results

- **Half of allergists' patients received biologics** versus 35% among dermatologists

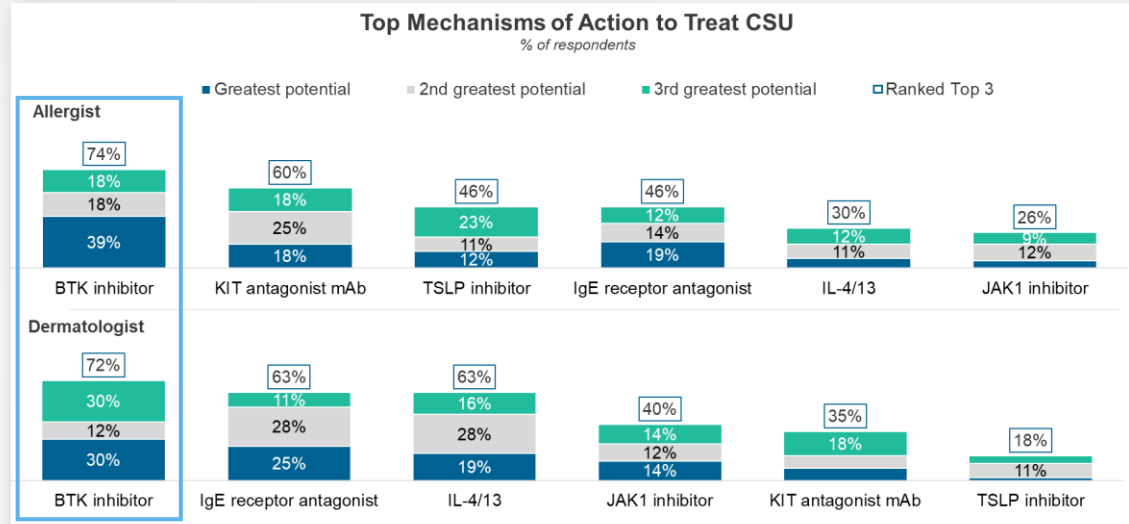


- **Treatment approaches diverged** beyond 1st line 2nd gen antihistamines in refractory patients
 - Allergists prescribed omalizumab nearly twice as often
 - Dermatologists favored dupilumab and anticipated its use surpassing omalizumab.*
- **Dermatologists cite they are referring out less**
 - Half of dermatologists are referring less to allergists; and nearly all (97%) cite due to recent agent approval

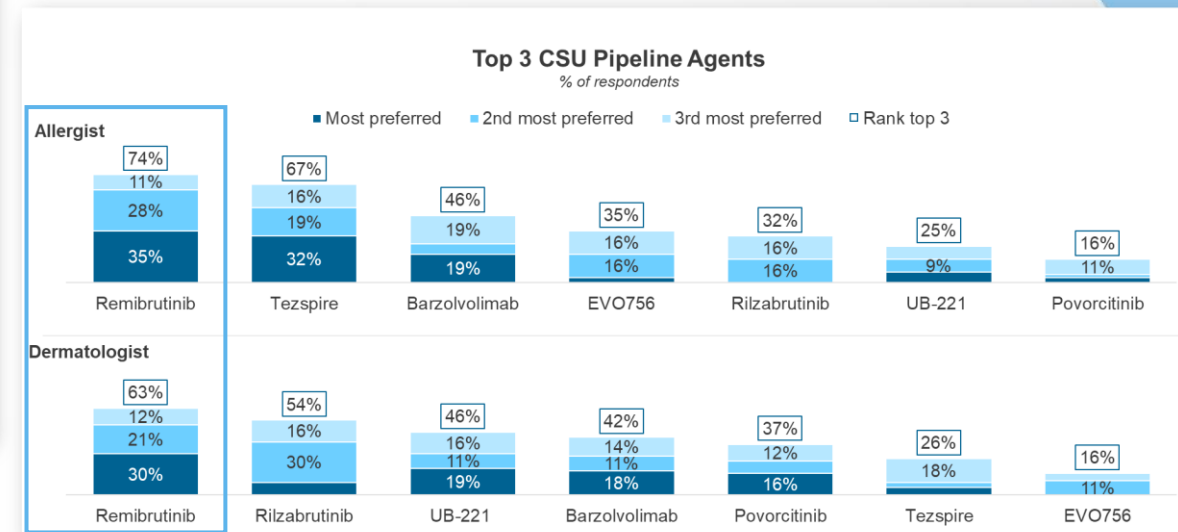
* Special note: remibrutinib launched post this research, and since dupilumab has surpassed omalizumab

Results (cont.)

- Greatest unmet need with mod-to-severe patients on a second-line biologic
- Strong demand for oral therapies; 67% citing patients prefer once-daily pill
- Future **greatest interest in BTK inhibitors, then KIT inhibitors, and IL-4/13**



• Strongest enthusiasm with Remibrutinib



Conclusions

- Dermatologists and allergists differ in biologic utilization for CSU patients
- Shifts with dupilumab approval and demand for orals highlight the need for new systemic CSU therapies
- Latest Update: Remibrutinib is now making strong inroads and CSU practice patterns continue to shift*

*Spherix Global Insights. Launch Dynamix™: Remibrutinib Chronic Spontaneous Urticaria (US), January 2026.

Reference: Spherix Global Insights. Market Dynamix™: Chronic Spontaneous Urticaria (US), July 2025.