



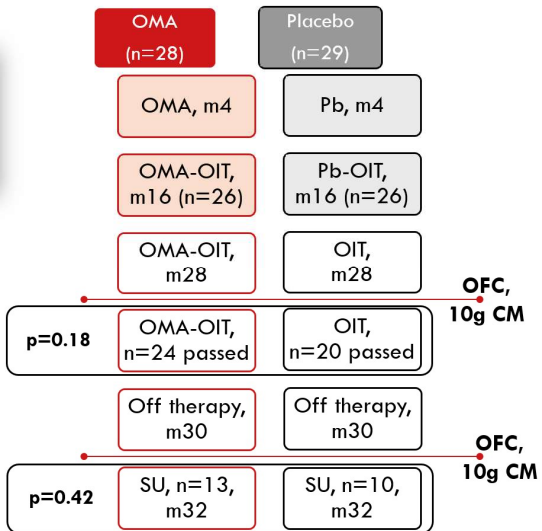
THE PROMISE OF BIOLOGICS IN FOOD ALLERGY MANAGEMENT

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A randomized, double-blind, placebo-controlled study of omalizumab combined with oral immunotherapy for the treatment of cow's milk allergy
(J Allergy Clin Immunol 2016;137:1103-10)

Robert A. Wood, MD,^a Jennifer S. Kim, MD,^b Robert Lindblad, MD,^c Kari Nadeau, MD, PhD,^d Alice K.

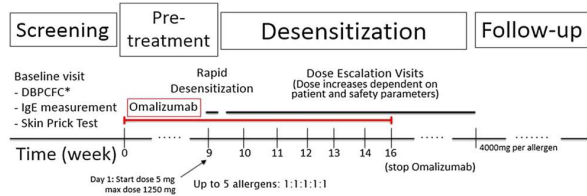
57 Cow's milk allergic children
6.5-11.7 years [7-32yo]
CM sIgE: 38.4-42.1 kUL
Maintenance dose: 3.3g CM protein



Phase 1 results of safety and tolerability in a rush oral immunotherapy protocol to multiple foods using Omalizumab

Allergy, Asthma & Clinical Immunology 2014, 10:7

Philippe Bégin¹, Tina Dominguez¹, Shruti P Wilson¹, Liane Bacal¹, Anjali Mehrotra¹, Bethany Kausch¹, Anthony Trela¹,

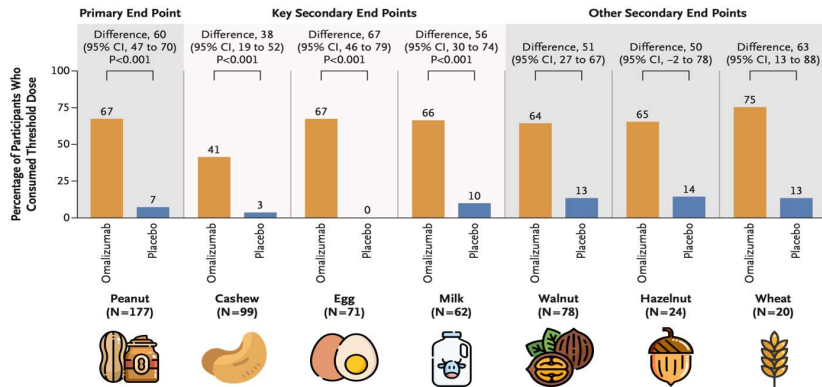


25 Multiallergic children (median 7yo)
+DBPCFC ≤100mg protein

8 weeks Pre-OIT OMA
Rush OIT + OMA 8 weeks
MD: 4000mg protein (1-5 foods)

OMA discontinuation

RESULTS: 600MG SINGLE DOSE DBPCFC



Wood RA, et al. *N Engl J Med.* 2024; 390:889-99

LIGELIZUMAB

NCT04984876 **Terminated** WITH RESULTS

Efficacy and Safety of QGE031 (Ligelizumab) in Patients With Peanut Allergy

DBPCRCT

Peanut allergic subjects, receiving:

- 240mg Ligelizumab/month x 52w (n=47)
- 120mg Ligelizumab/month x 52 w (n=51)
- Placebo x 16w + 240mg Ligelizumab/month x36 w (n=11)
- Placebo x 16w + 120mg Ligelizumab/month x36 w (n=12)
- Placebo x 8w + 240mg Ligelizumab/month x44 w (n=46)
- Placebo x 8w + 120mg Ligelizumab/month x44 w (n=44)

Primary outcome:

Week 12 DBPCFC: tolerate \geq 600 mg single dose (1044 mg cumulative) of peanut protein

Dupilumab as an Adjunct to Oral Immunotherapy in Pediatric Patients With Peanut Allergy

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