

Real-World Experience with Dual Dupilumab and Omalizumab Therapy: An Eight-Patient Case Series

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No conflicts of interest

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Background

- Drugs in focus:
 - Dupilumab anti-IL4/IL-13 mAb
 - Omalizumab anti-IgE mAb
- Combined therapy is increasing due to:
 - Overlapping indications
 - Multi-morbidity of atopic conditions
 - Increased risk of CSU with AD
- However, safety and efficacy data for the combined use of dupilumab and omalizumab is limited to a small number of case reports and series

Dupilumab	Omalizumab
✓ Atopic dermatitis (AD)	✓ Chronic spontaneous urticaria (CSU)
✓ Asthma	✓ Asthma
✓ Allergic rhinitis with nasal polyps	

Methods

- A single centre retrospective case series
- Medical records were searched from Jan 2020 – Jun 2025

Results 1/2

- 8 patients
 - 3 males, 5 females
 - Mean age: 47.25 years
- Indication for therapy:
 - Dupilumab:
 - 4 atopic dermatitis
 - 4 asthma
 - Omalizumab:
 - 6 CSU
 - 2 asthma

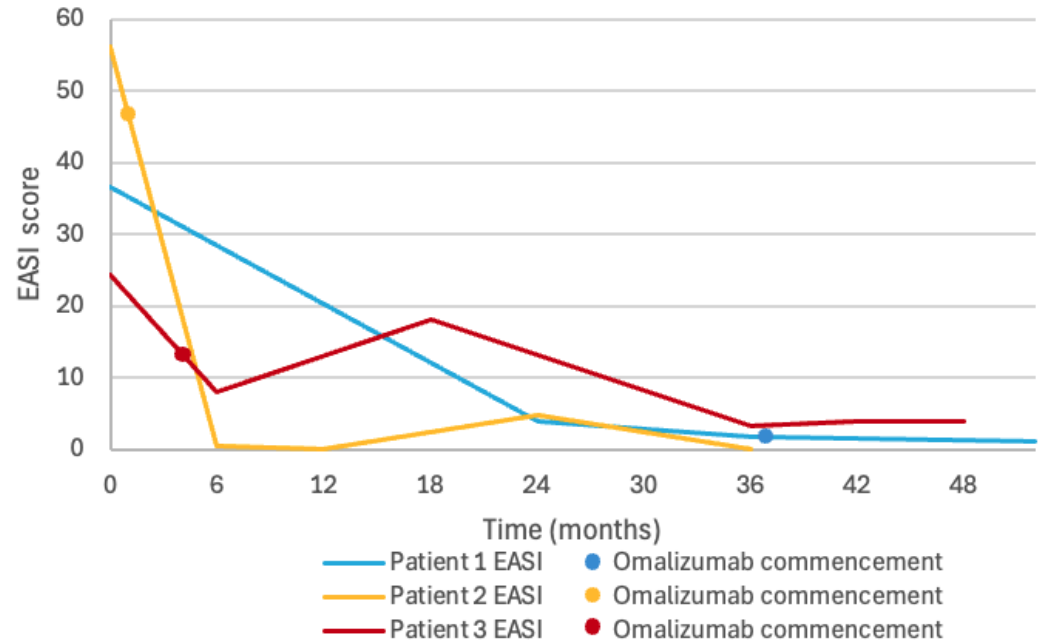
Duration of dual therapy	
Average in months (range)	23.3 (10.9-51.5)
Ongoing dual therapy use, n (%)	6 (75)
Adverse events	
Rate of adverse events, n	2
Mild dry eyes	1
Ocular surface disease	1
Efficacy	
Disease control following addition of 2 nd biologic, n	8
Discontinuation of biologic, n	3
Self ceased	1
Secondary loss of efficacy	2

} Safe

Results 2/2

- 8 patients
 - 3 males, 5 females
 - Mean age: 47.25 years
- 3 patients were treated with dupilumab for AD and later commenced omalizumab

Change in EASI score over time in dupilumab treated patients when omalizumab was added



Discussion

- Safety:
 - Theoretical concerns include:
 - Drug-drug interactions
 - Risk of serious infection
 - Safety signals consistent with known SE profile of dupilumab/omalizumab
- Average dual therapy duration 23.3 months → supports long term safety

Limitations

1. Small number of patients
2. Retrospective design

Future directions

1. Large prospective studies
2. Dual pathway inhibition

Conclusion

- Our experience, along with other observational data, suggests combination therapy to be safe and effective

References

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Thank you!

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