



Friday-Saturday, November 11-12, 2022

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## Honored to serve our members

As president, I've had the privilege of launching our biggest outreach campaign in a decade and working with the best and brightest.

As my presidential year comes to a close at the Annual Scientific Meeting, I am honored to have served in this role, and I'm gratified to look back on what the College has accomplished so far in 2022.

Membership continues to grow. This year we surveyed our members to find out how the College is meeting their needs. It's gratifying to hear what members value most about the College: Staying up to date with the latest developments for the specialty; interacting with colleagues and peers; benefiting from advocacy efforts related to the specialty; having access to free MOC, CME and clinical and practice management resources; and contributing our knowledge and voice to advance the specialty.

This summer, we achieved a goal that I've been working toward since

early 2021. In response to member concerns, we launched our biggest outreach campaign in more than 10 years. Our goal is to tell primary care physicians about the unique qualifications of board-certified and fellowship-trained allergists and what sets us apart from other providers of allergy services.

The "Time for an Allergist" campaign has already garnered tens of thousands of views from our target audience of PCPs as well as the public, and I hope that many of you - our members - have engaged with this effort on the local level. This digital advertising campaign will run until February. Check out the campaign at [TimeForAnAllergist.com](http://TimeForAnAllergist.com) and look for our member toolkit to help you market your practice. The toolkit is found on the College homepage and on the Practice



Mark Corbett, MD, FAAAAI, ACAAI president

Management Center page of [college.acaai.org](http://college.acaai.org)

In line with the continued strategic priorities that came out of Vision Forward, this year we expanded our practice management and educational resources. Just a few highlights: Our Telehealth and Coding toolkits were revamped; our Risk & Compliance toolkit was

see **PRESIDENT**, page 6

## The Annual Meeting at your fingertips

Use the meeting app to stay up to date during the meeting

Keep track of symposia, abstracts, social events and more during the Annual Meeting with our mobile app. Download the app to access the full educational program, navigate the meeting with helpful maps, get local information and more. With the app, you'll be able to:



- Browse sessions to find locations, descriptions, speakers and handouts.
- View maps of the exhibit hall, convention center and headquarters hotel.
- Claim credit.
- Follow along with #ACAAI22 on Twitter.
- And more!

Download the app by searching for "ACAAI" in the App Store or on Google Play, or visit [annualmeeting.acaai.org](http://annualmeeting.acaai.org).

The mobile app is supported by Amgen and AstraZeneca.



## YOU'RE INVITED PRODUCT THEATER (non-CME)

Join us live at ACAAI 2022 for our program "Challenges Associated with Respiratory Viral Infections in Patients with Primary Immunodeficiency: An Expert Discussion & Real-World Experience"

Sunday, November 13, 2022 • 9:35 AM to 10:00 AM ET  
ACAAI • Kentucky International Convention Center  
Product Theater #1, Exhibit Hall, Upper Concourse



Presenter  
Bob Geng, MD  
Rady Children's Hospital  
University of California, San Diego



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The Product Theater content and views expressed therein do not necessarily reflect the views, policies or position of the American College of Allergy, Asthma & Immunology.



Non-CME Corporate Dinner Forum

# MODERATE-TO-SEVERE ASTHMA: Solutions for Gaining Control Using PHENOTYPIC PRESENTATIONS

Attend in-person or Virtually!

**SATURDAY, NOVEMBER 12**

Omni Louisville Hotel


Olmsted Ballroom Salons 1-3 (Level 2)

**7:45 – 8:00 PM ET** Registration & Dinner

**8:00 – 9:45 PM ET** Non-CME Corporate Forum

## Key Topics

- Moderate-to-Severe Asthma: Classification and Its Effect on Patients
- Advances in Diagnostic and Prognostic Biomarkers
- Recent Advances in Moderate-to-Severe Asthma Treatment
- Case Discussions

-  GameOn! Challenge



Can't attend in-person? You can still join us virtually!

**[Asthma11222.eventbrite.com](https://Asthma11222.eventbrite.com)**



ACTIVITY CHAIR



**Michael E. Wechsler, MD**

FACULTY



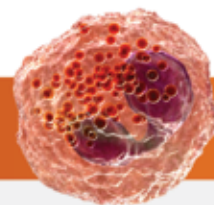
**Leonard B. Bacharier, MD**



**Bradley E. Chipps, MD**



**Sandhya Khurana, MD**



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This live activity is not approved for *AMA PRA Category 1 Credit(s)*<sup>™</sup>.

This activity is supported by an independent medical grant from

**Regeneron Pharmaceuticals, Inc. and Sanofi.**

## Shining a spotlight on our named lectures

Make time to attend this year's Annual Meeting named lectures. Presenters of the Luisa Businco, Edward J. O'Connell and Bela Schick lectures embody the high standards and achievements of the physicians for whom the lectures are named.



### Luisa Businco Lecture

Aikaterini Anagnostou, MD, FAAAAI, PhD delivered the 2022 Luisa Businco lecture "Common Oral Immunotherapy Challenges in Your Allergy Clinic" during the International Food Allergy Symposium on Thursday. Dr. Anagnostou is director of the Food Allergy Program at Texas Children's Hospital.

The Businco Lecture is named in honor of Professor Luisa Businco of Rome, Italy. Her hard work in providing excellent patient care, effective teaching and quality research led to significant advances in understanding several aspects of pediatric food allergy.



### Edward J. O'Connell Memorial Lecture

Thomas B. Casale, MD, FAAAAI will present the 2022 Edward J. O'Connell Memorial lecture at Sunday's Plenary - Practicing Allergy/Immunology Into the Future on **Sunday, Nov. 13 at 8:00 am**. His lecture is titled "What Does the Landscape of Therapeutics Look Like in Allergy Practice?" Dr. Casale is professor of medicine and pediatrics and chief of Clinical and Translational Research at the University of South Florida Division of Allergy and Immunology in Tampa and former ABAI chair.

The annual Edward J. O'Connell Memorial Lecture Award honors the legacy of Dr. O'Connell, a past president of the College (1990-1991), who was a caring, compassionate physician with a life-long passion for serving children. He was an adept educator and authored nearly 100 original articles, along with many book chapters related to allergy and immunology.



### Bela Schick Lecture

Cherie Zachary, MD, FAAAAI will present the 2022 Bela Schick lecture at Monday's Plenary - Implementing New Guidelines Into Practice on **Monday, Nov. 14 at 8:00 am**. Dr. Zachary's lecture is titled "Implicit Bias: It Is Not Always What You See." Dr. Zachary is in private practice in Eagan, MN.

The annual Bela Schick lecture is named in honor of one of medicine's most respected scientists. Bela Schick was born in Hungary emigrated to the U.S. in 1923. He is best known for his work with Clemens von Pirquet on anaphylaxis and for the test he developed to assess immunity to diphtheria. ●



## Ready for something presidential?

Start your Saturday with the Opening Ceremony from 7:20 - 8:00 am in the convention center's Ballroom ABC. College President Mark Corbett, MD, FAAAAI, will discuss the current state of the College. Annual Meeting Program Committee Chair Brian T. Kelly, MD, FAAAAI, and Alliance Co-President Leila Sublett will welcome you to the meeting.

Dr. Corbett will also present the Gold Headed Cane Award to James L. Sublett, MD, FAAAAI. Dr. Sublett has been a College Fellow for more than 30 years, was JCAAI president in 2010 - 2012, ACAAI president in 2014 - 2015 and is currently executive director of advocacy and government relations for the Advocacy Council.



Following the meeting's Opening Ceremony, stay for the Presidential Plenary "Food Allergy - Where Are We in 2022?" Three allergy experts explore advances in diagnosis and management of food allergies:

- **Food Allergy Testing - What is the Best Choice** Hugh Sampson, MD, FAAAAI
- **Food OIT - Are We Desensitizing or Curing?** Robert A. Wood, MD
- **EoE - What To Do and What Not To Do** Jonathan M. Spergel, MD, PhD, FAAAAI ●

## Advocacy Council helps you stay updated

Plan to attend Annual Meeting sessions on billing/coding and government relations.

The Advocacy Council of ACAAI has programming to address your billing and coding questions during the College's 2022 Annual Scientific Meeting.

Stay current with coding changes! Plan to attend the "2022 Allergy Coding Update" on Friday, Nov. 11. Gary N. Gross, MD, FAAAAI will provide updates to effectively manage your revenue cycle.

Later that day at the House of Delegates Town Hall Meeting, James Tracy, DO, FAAAAI, will present "An Alternative Payment Model for Patient-Centered Asthma Care." Gary Gross, MD, FAAAAI, will present the "Cost Effectiveness of Venom

and Allergen Immunotherapy," and Matt Reiter, our Washington consultant, will provide an update on **legislation related to the cost effectiveness of allergy treatment.**

Plan to attend "Coding and Government Relations" on Sunday, Nov. 13. Advocacy Council leaders and ACAAI consultants will present an update on coding that's relevant to your allergy practice. Washington consultant Matt Reiter will discuss the importance of physician advocates and provide an update on government/legislative issues relating to allergy.

Advocacy Council leaders look forward to seeing you in Louisville.



While you're at the meeting, don't forget to stop by the College booth in the Exhibit Hall - booth 901. See how the College and the Advocacy Council are working for you! ●





## Sessions just for FITs will prepare you for the next steps in your career

The College's Fellows-in-Training (FIT) program offers sessions on various aspects to prepare for the transition to practicing allergists.

FITS, plan to attend:

**FIT Integrated Educational Program & Business Meeting** (Friday, 4:30 – 6:00 pm, convention center rooms M104-107) – Speakers will cover topics of contract negotiations, exploring different practice models, and how the College can help support FITs throughout the transition to a practicing allergist. FITs will vote for nominees seeking to serve on the ACAAI Board of Regents as the junior FIT representative.

**FIT/Training Director Breakfast** (Saturday, 6:15 – 7:15 am, convention center Ballroom DE) – Fuel up for the day with a free breakfast and great networking.

**Doctors' Job Fair** (Saturday,

11:30 am – 3:00 pm, convention center Hall B) – Participants must have preregistered for this event (or registered on site at the registration desk). Chat with employers who are looking to fill positions.

And don't miss these fun events:

**President's Welcome Reception** (Friday, 6:00 – 7:30 pm, Churchill Downs) – Join your colleagues for a one-of-a-kind experience at the home of the Kentucky Derby. Enjoy an evening of hors d'oeuvres, drinks, and camaraderie.

**FIT Bowl** (Saturday, 5:30 – 7:30 pm, Omni Hotel, Commonwealth 2 Ballroom) – Who will be this year's champions? FIT teams endure serious (and not so serious) questions from an expert panel. It's an exciting evening full of competition. Enjoy hors d'oeuvres and an open bar at this fast-paced, dynamic event. ●

## Research made easy

### Explore the latest A/I research with ePosters

Looking for research? Both research and medically challenging case abstracts are available as ePosters in the exhibit hall. They are interactive, easy to read and searchable by topic, author and title during exhibit hall hours.

If you want to learn more about the abstract's topic or author, plan to attend ePosters: Meet the Authors. Catch the presentations in the exhibit hall:

- **Friday** 3:00 – 6:00 pm
- **Saturday** 11:35 am – 1:00 pm
- **Sunday** 11:35 am – 1:00 pm.

Plan to attend our oral abstracts sessions on Saturday from

4:30 – 5:30 pm in rooms M108 – M111, M101- M102, M112 in the convention center. Distinguished Industry Oral Abstracts will also take place on Saturday from 4:30 – 5:30 pm in rooms M100 -M103, M104-M107.

You can also explore all ePosters 24/7 on the Annual Meeting app and online at [college.accai.org/eposters](http://college.accai.org/eposters) – now and for several months after the meeting.

All abstracts selected for presentation are published in the special *Annals of Asthma, Allergy and Immunology* supplement you received at registration. ●



## What does the College do for you?

### Explore the benefits of your College membership

While you're roaming the exhibit hall, make sure to visit the College Resource Center to hear more about your member benefits, the latest College programs and more! Not a member yet? The College Resource Center is a great place to learn about College membership.

- Stop by to learn more about tools and resources for practicing allergists.
- We'll have a video/social media station where we'll help you make a video about an allergy topic of your choice, or about the meeting!

- See what's new in the College Learning Connection – your online home for professional development and in the Practice Management Center – your online source for your practice needs.
- Learn about the important work of the Advocacy Council and the Allergists' Foundation.

Find us in the exhibit hall! The College Resource Center is booth 901. ●

#### Hours:

2:00 – 6:00 pm, Friday  
9:00 am – 4:30 pm, Saturday  
9:00 am – 1:30 pm, Sunday





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# The Practice Management Program – for physicians too!



There are a variety of sessions devoted to managing an allergy practice, and they're geared toward physicians as well as office practice administrators and nurse managers. Start with the Practice Management Program on Friday. All physicians can attend, and no registration is required! Allergists will find plenty of sessions covering issues you and your staff deal with on a day-to-day basis – and all sessions are eligible for CME credit.

All sessions are in the convention center, room M112:

- **Coding Update** (8:00 – 9:30 am) – Get updated on ICD-10 and CPT coding changes for allergists.
- **Tips to Survive and Thrive in Solo/ Small Group Practice/Marketing Tactics in the Post-COVID Era** (10:00 – 11:30 am) – Get practical ideas for success in an increasingly competitive environment and marketing tips to promote your practice.

affect allergists/immunologists and our patients.

One of my priorities for this year was to continue the emphasis on racial disparities and health equity that my predecessor, Dr. Fonacier, set into motion. In February, the College hosted an important Roundtable on Racial Disparities in AD and Food Allergy, with a variety of interested organizations attending and contributing. Their discussion and recommendations will be published soon. The College created and translated more patient education materials than ever into Spanish, which we are committed to doing into the future. We also are looking at how best to provide patient materials that speak to people of different cultural and ethnic backgrounds, and we continue our programs meant to encourage more people of color to join the medical profession and the allergy profession. In addition, the Allergists' Foundation is supporting several community grants in this area. I encourage you to learn about the work of the foundation and to support it if you can.

Our Advocacy Council

- **Determining the Cost of Care Using Relative Value Unit Modeling/Assessing Your Practice for Operational and Clinical Effectiveness** (1:00 – 2:30 pm) – Learn to calculate the cost of providing care and how to assess your practice's administrative and clinical workflow.
  - **Developing and Implementing an Effective Performance Review Program/Ask the PM Experts** (3:00 – 4:30 pm) – Learn the importance of an effective performance evaluation program and participate in a Q&A session with experienced allergy administrators.
- Another valuable session is **Coding and Government Relations** on Sunday (1:00 – 2:30 pm, convention center rooms M101– M103). This session will address relevant changes, modification and implementation of CPT and ICD-10 coding.

Plan to attend these sessions and leave with sound advice on running your practice. ●

continued to build on its work with our Asthma Alternative Payment Model, and to monitor regulations and advise changes that will promote allergists and the allergy specialty while reducing administrative burdens. We were fortunate to be able to carry out our Strike Force meetings on Capitol Hill in May, with a focus on preventing payment reductions to health care providers, permanently extending Medicare telehealth coverage policies, and eliminating administrative burdens.

There is much more that has been accomplished so far this year, and I have no doubt that even more will be accomplished before we ring in 2023. None of this work would happen without the tireless efforts of our volunteers, who give of their time and expertise on task forces, committees, the Board of Regents, editorial boards and other leadership roles. I hope that each and every member of the College has found ways to engage with YOUR professional organization, and to contribute to the work of advancing our profession in 2022. ●

## Celebrating the College's 80<sup>th</sup> anniversary

The College celebrates its 80<sup>th</sup> anniversary this year. Did you know:

- The College began as the American College of Allergists in November 1942.
- The first annual meeting of the College was held in 1944 in Chicago.
- Dr. Jonas Salk, the famed virologist who developed the first effective polio vaccine, gave a presentation titled "Is There a Need for Immunologic Adjuvants?" at the College's annual meeting in 1971.

For a trip down memory lane, stop by the College Resource Center's display of historical documents and allergy books. You'll see antique remedies such as Dr. R. Schiffmann's Asthmador Cigarettes, Hunt's Salve (for itch in all its various forms), a Physician's Lipstick Testing Kit, and more! The exhibit hall closes on Sunday at 1:30 pm.

Want more history? Plan to attend the ACAAI Opening Ceremony at 7:20 am in the convention center's Ballroom ABC. Joseph A. Bellanti, MD, FAAAAI (Emeritus) will provide an interesting look at the College's 80 years of serving our members and the patients we care for. ●

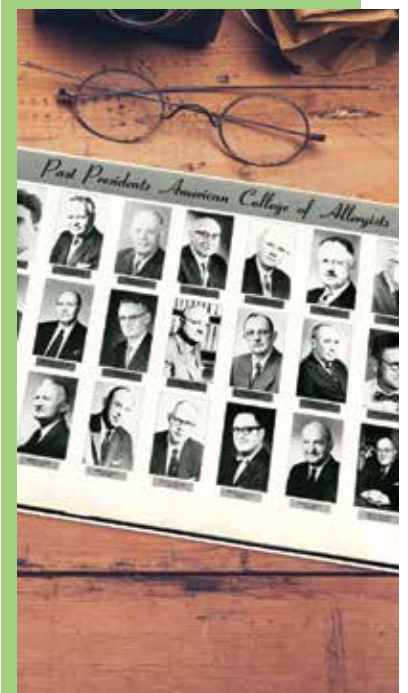
## PRESIDENT

Continued from page 1

updated to reflect new regulations, including the No Surprises Act and Information Blocking Rule. Our Biologics toolkit has been updated as new treatments have become available; our new Chronic Rhinosinusitis yardstick was published, and a new FIT Toolkit was developed with a bundle of practice management resources for new allergists starting their careers.

In addition to another stellar Annual Scientific Meeting this year we added to our popular MicroCME bite-sized learning product with topics including sleep, urticaria, pediatric food allergy and more.

In 2022 we (fortunately) saw less need to provide new and original resources related to COVID-19; however, we made substantive and frequent updates to our COVID-19 guidance on vaccines and our COVID-19 Resource Center. We continued our popular COVID-19 NewsBrief. As long as there is a need, we will stay on top of this and other public health priority issues as they





# EXHIBITOR LISTING

AbbVie ..... 729	Blueprint Medicines..... 405	Horizon Therapeutics ..... 704	OptiNose, Inc. .... 435
AbbVie Commercial ..... 843	BPL ..... 614	Immune Deficiency Foundation ..... 624	Option Care Health..... 709
ADMA Biologics ..... 954	Brevium ..... 628	Incyte Corp. .... 445	Optum Infusion Pharmacy ..... 757
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Aimmune Therapeutics ..... 1223	Cogent Biosciences ..... 856	Klara ..... 629	Pfizer Derm ..... 1016
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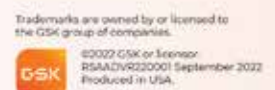
Map brought to you by GlaxoSmithKline, Booth 835

## RSV IN OLDER ADULTS—WHAT'S THE RISK?

Find out at [RSVinAdults.com](https://www.rsvinadults.com)

**References:** 1. Mesa-Frias M, Rossi C, Ermond B, et al. Incidence and economic burden of respiratory syncytial virus among adults in the United States: a retrospective analysis using 2 insurance claims databases. *J Manag Care Spec Pharm.* 2022;28(7):753-765. doi:10.18553/jmcp.2022.21459 2. Older adults are at high risk for severe RSV infection. Centers for Disease Control and Prevention. Accessed June 23, 2022. <https://www.cdc.gov/rsv/high-risk/older-adults.html>

Respiratory syncytial virus (RSV) is a common and contagious virus that typically produces mild, cold-like symptoms but can put older adults at risk for severe outcomes.<sup>1,2</sup>





# RSV MAY RAISE THE STAKES FOR OLDER ADULTS



**Respiratory syncytial virus (RSV) is a common and contagious virus that typically produces mild, cold-like symptoms but can put older adults at risk for severe outcomes.<sup>1,2,\*</sup>**

**Each year in the US, approximately 177,000 older adults are hospitalized and an estimated 14,000 of them die due to RSV infection.<sup>2</sup>**

\*The CDC states that adults at highest risk for severe RSV infection include older adults, especially those 65 years and older, adults with chronic heart or lung disease, and adults with weakened immune systems. Data are limited in assessing the risk of severe outcomes due to RSV infection in adults 60-64 years of age.<sup>3,4</sup>

CDC=Centers for Disease Control and Prevention;  
CHF=congestive heart failure; COPD=chronic obstructive pulmonary disease.

#### References:

1. Mesa-Frias M, Rossi C, Emond B, et al. Incidence and economic burden of respiratory syncytial virus among adults in the United States: a retrospective analysis using 2 insurance claims databases. *J Manag Care Spec Pharm*. 2022;28(7):753-765. doi:10.18553/jmcp.2022.21459 2. Older adults are at high risk for severe RSV infection. Centers for Disease Control and Prevention. Accessed June 23, 2022. <https://www.cdc.gov/rsv/high-risk/older-adults.html> 3. Tseng HF, Sy LS, Ackerson B, et al. Severe morbidity and short- and mid- to long-term mortality in older adults hospitalized with respiratory syncytial virus infection. *J Infect Dis*. 2020;222(8):1298-1310. doi:10.1093/infdis/jiaa361 4. Belongia EA, King JP, Kieke BA, et al. Clinical features, severity, and incidence of RSV illness during 12 consecutive seasons in a community cohort of adults ≥60 years old. *Open Forum Infect Dis*. 2018;5(12):ofy316. doi:10.1093/ofid/ofy316



**Learn about the risks of RSV at [RSVinAdults.com](https://www.rsvinadults.com)**

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**Product Theater**  
**3**  
Entry / Exit

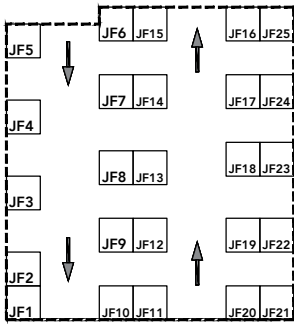
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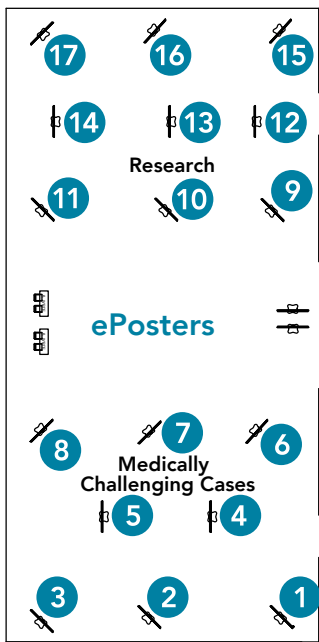
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**Doctors' Job Fair**



**ePosters Meet the Authors**



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**ENTRANCE**

# Something for Everyone

Enjoy Louisville's history, attractions and dining variety

Looking for things to do and great places to eat during the meeting? Enjoy Louisville's many options. Want more than the list below? Visit [annualmeeting.acaai.org/something\\_for\\_everyone](http://annualmeeting.acaai.org/something_for_everyone)

## Things to Do, Places to See

### Churchill Downs

[www.churchilldowns.com](http://www.churchilldowns.com)

Site of this year's President's Welcome reception, if you want to visit it again, you can stroll through its historic grounds.

### Kentucky Science Center

[www.kysciencecenter.org](http://www.kysciencecenter.org)

With daily programming activities for children, families, and adults, the Kentucky Science Center is now the largest hands-on science center in the state.

### Old Louisville

[www.gotolouisville.com/directory/historic-old-louisville-neighborhood-and-visitors-center](http://www.gotolouisville.com/directory/historic-old-louisville-neighborhood-and-visitors-center)

Louisville is the site of the nation's largest collection of Victorian mansions in a rich array of styles. Visit the Historic Old Louisville Neighborhood and Visitors Center for information on self-guided and guided walking tours.

### Urban Bourbon Trail

[www.kentuckytourism.com/louisville/attractions/guided-tours/urban-bourbon-trail](http://www.kentuckytourism.com/louisville/attractions/guided-tours/urban-bourbon-trail)

The Urban Bourbon Trail® (UBT) is a



cocktail and culinary experience highlighting Louisville's most celebrated Bourbon bars and restaurants

### Dining

#### 610 Magnolia

[610magnolia.com/](http://610magnolia.com/)

Reservations required. The Tasting Menu focuses on seasonality and a commitment to locally sourced produce.

#### Hot Brown, The Brown Hotel

[www.brownhotel.com/dining/hot-brown](http://www.brownhotel.com/dining/hot-brown)

This world-famous, historical favorite features the Hot Brown, an open-faced turkey sandwich with bacon and a delicate Mornay sauce.

#### Jack Fry's

[www.jackfrys.com](http://www.jackfrys.com)

Reservations recommended. American bistro fare with Southern influence: appetizers, salads, steak,

seafood, pork chops, ribs, lamb, burgers, desserts. Closed on Sundays.

### Mayan Café

[themayancafe.com](http://themayancafe.com)

Enjoy traditional Mayan flavors, ingredients & cooking techniques with local, sustainably-farmed ingredients.

### Museums

#### Louisville Slugger

#### Museum & Factory

[www.sluggermuseum.com/](http://www.sluggermuseum.com/)

This museum is all about celebrating the extraordinary role of the Louisville Slugger baseball bat in baseball's past, present and future.

#### Muhammad Ali Center

[alicenter.org](http://alicenter.org)

The Muhammad Ali Center features an interactive museum, educational programming, and special events to inspire people to pursue greatness in their own lives, communities and countries. ●

## Add fun to your schedule

Enjoy the rich history of Churchill Downs and the excitement of the FIT Bowl

After a day of the Annual Meeting's immersive sessions, take a break and enjoy our social events. All meeting registrants are invited to attend.

### President's Welcome Reception

A trip to Louisville wouldn't be complete without a visit to historic Churchill Downs, and you'll get the opportunity at the President's Welcome Reception, on Friday, Nov. 11 from 6:00 – 7:30 pm. We've got a one-of-a-kind experience planned at the home of the Kentucky Derby. Enjoy an evening of hors d'oeuvres, drinks and camaraderie. Buses will transport meeting attendees from their hotels to Churchill Downs.

### FIT Bowl

Who will be this year's FIT Bowl champions? Fellows-in-Training teams compete for the trophy at Saturday evening's FIT Bowl competition. Teams of allergists are asked serious (and not so serious) questions from an expert panel. Who will answer correctly to win? It's an exciting evening full of competition. Enjoy hors d'oeuvres and an open bar at this fast-paced, dynamic event at 5:30 pm on Saturday, Nov. 12 at the Omni Louisville Hotel. ●

## Our sticker shows your support



We are proud to recognize attendees who are supporting the work of The Allergists' Foundation during the meeting with an "I Gave in Louisville" sticker.

These gifts allow us to fund projects under the Community Grant Program that aim to remove barriers to allergy care, improve patient health outcomes and ensure the

well-being of our communities.

Projects funded through the program explore collaborative, community-based approaches to penicillin allergy delabeling, preventing adverse outcomes related to atopic diseases in children at preschools and daycare centers, addressing barriers to asthma care via telehealth, increasing allergists' understanding of cannabis allergy, and many more important areas of need.

We invite you to join us in this critical investment in our specialty by making a donation. Your support

can make all the difference toward empowering practicing allergists and ensuring richer, fuller lives for our patients!

Scan this code to make a donation and stop by the College Resource Center (Booth #901) to pick up your sticker to show your support. ●





ASCENIV™ is the only IVIG produced from blending RSV plasma and normal source plasma<sup>1</sup>



FOR PATIENTS WITH PRIMARY  
HUMORAL IMMUNODEFICIENCY (PI)

# IT'S WHAT'S INSIDE THAT COUNTS

1. Data on File, ADMA Biologics.

**ASCENIV™**  
IMMUNE GLOBULIN INTRAVENOUS  
(HUMAN) — sIra 10% LIQUID

VISIT **BOOTH #954**  
TO LEARN MORE

[www.asceniv.com](http://www.asceniv.com)

**Focused on what matters most: safety, quality, and efficacy**

#### Indication

ASCENIV (immune globulin intravenous, human – sIra) is a 10% immune globulin liquid for intravenous injection, indicated for the treatment of primary humoral immunodeficiency (PI) in adults and adolescents (12 to 17 years of age). PI includes, but is not limited to, the humoral immune defect in congenital agammaglobulinemia, common variable immunodeficiency (CVID), X linked agammaglobulinemia, Wiskott-Aldrich syndrome, and severe combined immunodeficiencies (SCID).

#### Important Safety Information for ASCENIV™

##### **WARNING: THROMBOSIS, RENAL DYSFUNCTION AND ACUTE RENAL FAILURE**

**Thrombosis may occur with immune globulin intravenous (IGIV) products, including ASCENIV. Risk factors may include: advanced age, prolonged immobilization, hypercoagulable conditions, history of venous or arterial thrombosis, use of estrogens, indwelling central vascular catheters, hyperviscosity, and cardiovascular risk factors. Thrombosis may occur in the absence of known risk factors.**

**Renal dysfunction, acute renal failure, osmotic nephrosis, and death may occur with the administration of Immune Globulin Intravenous (Human) (IGIV) products in predisposed patients.**

**Renal dysfunction and acute renal failure occur more commonly in patients receiving IGIV products containing sucrose. ASCENIV does not contain sucrose.**

**For patients at risk of thrombosis, renal dysfunction or renal failure, administer ASCENIV at the minimum dose and infusion rate practicable. Ensure adequate hydration in patients before administration. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity.**

#### Contraindications

ASCENIV is contraindicated in:

- Patients who have had an anaphylactic or severe systemic reaction to the administration of human immune globulin.
- IgA-deficiency patients with antibodies to IgA and a history of hypersensitivity.

#### Warnings and Precautions

Severe hypersensitivity reactions may occur with IGIV products, including ASCENIV. In case of hypersensitivity, discontinue ASCENIV infusion immediately and institute appropriate treatment. Patients with known antibodies to IgA may have a greater risk of developing potentially severe hypersensitivity and anaphylactic reactions.

Thrombosis may occur following treatment with immunoglobulin products and in the absence of known risk factors. Consider baseline assessment of blood viscosity in patients at risk for hyperviscosity and ensure adequate hydration before administration. For patients at risk of thrombosis, administer ASCENIV at the minimum dose and infusion rate practicable. Monitor for signs and symptoms of thrombosis and assess blood viscosity in patients at risk for hyperviscosity.

Acute renal dysfunction/failure, osmotic nephrosis, and death may occur upon use of human IGIV products. Ensure that patients are not volume depleted before administering ASCENIV. Periodic monitoring of renal function and urine output is particularly important in patients judged to be at

increased risk of developing acute renal failure. Assess renal function, including measurement of blood urea nitrogen (BUN) and serum creatinine, before the initial infusion of ASCENIV and at appropriate intervals thereafter. Discontinue ASCENIV if renal function deteriorates. In at risk patients, administer ASCENIV at the minimum infusion rate practicable.

Hyperproteinemia, increased serum viscosity, and hyponatremia or pseudohyponatremia may occur in patients receiving IGIV treatment, including ASCENIV. It is critical to clinically distinguish true hyponatremia from a pseudohyponatremia that is associated with or causally related to hyperproteinemia. Treatment aimed at decreasing serum free water in patients with pseudohyponatremia may lead to volume depletion, a further increase in serum viscosity, and a possible predisposition to thrombotic events.

Aseptic meningitis syndrome (AMS) may occur with IGIV treatments, including ASCENIV. AMS usually begins within several hours to 2 days following IGIV treatment. AMS may occur more frequently in association with high doses (2 g/kg) and/or rapid infusion of IGIV. Conduct a thorough neurological examination on patients exhibiting signs and symptoms of AMS, including cerebrospinal fluid (CSF) studies, to rule out other causes of meningitis.

IGIV products, including ASCENIV, may contain blood group antibodies that can act as hemolysins and induce in vivo coating of red blood cells (RBCs) with immunoglobulin, causing a positive direct antiglobulin reaction and hemolysis. Monitor patients for clinical signs and symptoms of hemolysis, including appropriate confirmatory laboratory testing.

Non-cardiogenic pulmonary edema may occur with IV administered IG. Monitor patients for pulmonary adverse reactions. If suspected, perform appropriate tests for presence of anti-neutrophil in both product and patient serum. May be managed using oxygen therapy with adequate ventilatory support.

Because ASCENIV is made from human blood, it may carry a risk of transmitting infectious agents, e.g., viruses, the variant Creutzfeldt-Jakob disease (vCJD) and theoretically, the Creutzfeldt-Jakob disease (CJD) agent. All infections suspected by a physician to possibly have been transmitted by this product should be reported to ADMA Biologics at **(1-800-458-4244)**.

After infusion of immunoglobulin, the transitory rise of the various passively transferred antibodies in the patient's blood may yield positive serological testing results, with the potential for misleading interpretation. Passive transmission of antibodies to erythrocyte antigens (e.g., A, B, and D) may cause a positive direct or indirect antiglobulin (Coombs') test.

#### Adverse Reactions

The most common adverse reactions to ASCENIV (≥5% of study subjects) were headache, sinusitis, diarrhea, gastroenteritis viral, nasopharyngitis, upper respiratory tract infection, bronchitis, and nausea.

**You are encouraged to report side effects of prescription drugs to ADMA Biologics @ 1-800-458-4244 or the FDA. Visit [www.fda.gov/MedWatch](http://www.fda.gov/MedWatch) or call 1-800-FDA-1088.**

**For additional safety information about ASCENIV, please see full Prescribing Information.**



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Visit [admabiologics.com](http://admabiologics.com)



# Preventing HAE Attacks With ORLADEYO® (berotralstat): Clinical Insights and Real-World Experience

Saturday, November 12, 2022 | 11:35 AM ET | Lunch will be offered.

Sponsored by BioCryst Pharmaceuticals, Inc. | For US healthcare professionals only.

*The Product Theater content and views expressed therein do not necessarily reflect the views, policies or position of the American College of Allergy, Asthma & Immunology.*

Join us for an engaging discussion on ORLADEYO,  
the first and only targeted oral prophylactic therapy for HAE.

In just over a year after its approval, more than 1,000 prescriptions have been written for ORLADEYO. In this program, an expert in HAE will explore the efficacy and safety of ORLADEYO in preventing HAE attacks. This presentation will also discuss the importance of setting expectations with patients starting ORLADEYO and cover key factors to consider when switching patients from other prophylactic treatments.

## LOCATION

### Product Theater #3

Kentucky International Convention Center, Hall A-E  
Louisville, KY

## SPEAKER



**Mark Davis-Lorton, MD**  
Allergist/Clinical Immunologist  
ENT and Allergy Associates  
Tarrytown, NY

## OBJECTIVES

- Explore the burden of treatment for patients with hereditary angioedema (HAE) and the demand for an oral prophylactic therapy
- Describe the clinical profile of ORLADEYO® (berotralstat), the first and only targeted oral prophylactic therapy for HAE
- Review how to initiate therapy with ORLADEYO in your patients, including considerations for patients switching from other prophylactic treatments
- Discuss treatment expectations with ORLADEYO to help ensure a strong start for your patients
- Describe the response to ORLADEYO in patients who transitioned from injectable prophylaxis

You can also visit us at exhibit booth #1049 to learn more about ORLADEYO and chat live with a representative.

## INDICATION

ORLADEYO® (berotralstat) is a plasma kallikrein inhibitor indicated for prophylaxis to prevent attacks of hereditary angioedema (HAE) in adults and pediatric patients 12 years and older.

### Limitations of use

The safety and effectiveness of ORLADEYO for the treatment of acute HAE attacks have not been established. ORLADEYO should not be used for the treatment of acute HAE attacks. Additional doses or dosages of ORLADEYO higher than 150 mg once daily are not recommended due to the potential for QT prolongation.

## IMPORTANT SAFETY INFORMATION

An increase in QT prolongation was observed at dosages higher than the recommended 150 mg once-daily dosage and was concentration dependent.

The most common adverse reactions (≥10% and higher than placebo) in patients receiving ORLADEYO were abdominal pain, vomiting, diarrhea, back pain, and gastroesophageal reflux disease.

A reduced dosage of 110 mg taken orally once daily with food is recommended in patients with moderate or severe hepatic impairment (Child-Pugh B or C) and in patients taking chronically administered P-glycoprotein (P-gp) or breast cancer resistance protein (BCRP) inhibitors (eg, cyclosporine).

Berotralstat is a substrate of P-gp and BCRP. P-gp inducers (eg, rifampin, St. John's wort) may decrease berotralstat plasma concentration, leading to reduced efficacy of ORLADEYO. The use of P-gp inducers is not recommended with ORLADEYO.

ORLADEYO at a dose of 150 mg is a moderate inhibitor of CYP2D6 and CYP3A4. For concomitant medications with a narrow therapeutic index that are predominantly metabolized by CYP2D6 or CYP3A4, appropriate monitoring and dose titration is recommended. ORLADEYO at a dose of 300 mg is a P-gp inhibitor. Appropriate monitoring and dose titration is recommended for P-gp substrates (eg, digoxin) when coadministering with ORLADEYO.

The safety and effectiveness of ORLADEYO in pediatric patients <12 years of age have not been established.

There are insufficient data available to inform drug-related risks with ORLADEYO use in pregnancy. There are no data on the presence of berotralstat in human milk, its effects on the breastfed infant, or its effects on milk production.

**To report SUSPECTED ADVERSE REACTIONS, contact BioCryst Pharmaceuticals, Inc. at 1-833-633-2279 or FDA at 1-800-FDA-1088 or [www.fda.gov/medwatch](http://www.fda.gov/medwatch).**

**To see the full Prescribing Information for ORLADEYO visit: [www.ORLADEYO.com](http://www.ORLADEYO.com).**

**For Colorado prescribers: Please scan the QR code to see information about the Wholesale Acquisition Cost.**

**For Vermont prescribers: Please scan the QR code to see information about the Average Wholesale Price.**

