

# Hereditary Angioedema (HAE)

HAE



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## THE IMMUNE CONNECTION

HAE is a complement immune system disorder — not an allergic reaction. Understanding this immune mechanism is what separates effective HAE treatment from dangerous mismanagement.

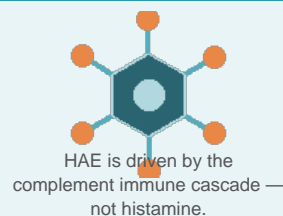
## WHAT IS THIS CONDITION?

HAE is caused by low or dysfunctional C1-inhibitor, a protein in the complement immune cascade. Without it, bradykinin accumulates and triggers sudden severe swelling. Critically, HAE is NOT driven by histamine — antihistamines and epinephrine do not stop attacks. Correct diagnosis and immune-targeted therapy are life-saving.

## COMMON SYMPTOMS

- Sudden swelling of hands, feet, face, or lips
- Severe abdominal cramping, nausea, vomiting
- Throat tightness or difficulty swallowing
- Skin tingling or erythema before an attack (prodrome)
- No hives or itching — unlike allergic reactions
- Triggers: stress, injury, surgery, hormonal changes

## COMPLEMENT SYSTEM



## HOW WE TREAT IT AT VEROS

HAE management has two components. On-demand therapy stops active attacks: icatibant (Firazyr) or C1-INH concentrate (Berinert, Ruconest). Long-term biologic prophylaxis dramatically reduces attack frequency — lanadelumab (Takhzyro), a monoclonal antibody, is highly effective for eligible patients. Berotralstat (Orladeyo) is an oral option. Every patient receives a written emergency protocol and self-injection training.

## WHY VEROS HEALTH?

- ✓ HAE requires immune-specific expertise — we understand the complement cascade driving it
- ✓ Access to the full range of HAE biologics including lanadelumab (Takhzyro)
- ✓ Personalized attack protocol and self-injection training for every HAE patient