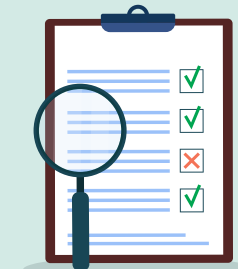
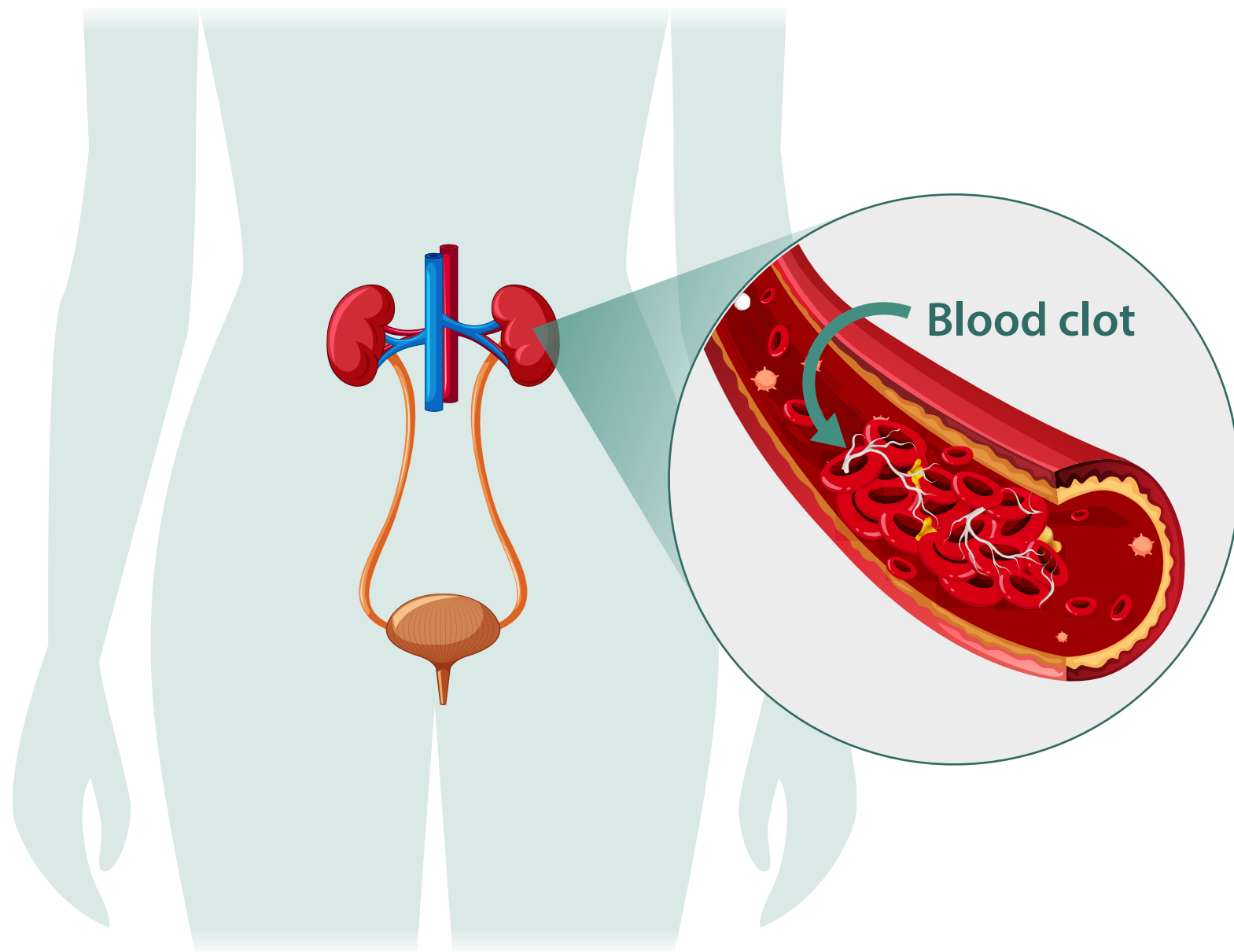


Treatment Preferences of Patients with Atypical Hemolytic Uremic Syndrome

Monoclonal antibodies like ravulizumab and eculizumab are used for treating atypical hemolytic uremic syndrome (aHUS), a rare genetic disease



However, real-world studies on their treatment impact and patient preference are lacking

Quantitative assessment through online surveys

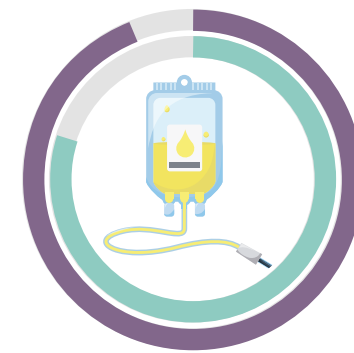


Adult patients with aHUS (n = 50)
 Caregivers of pediatric patients with aHUS (n = 16)

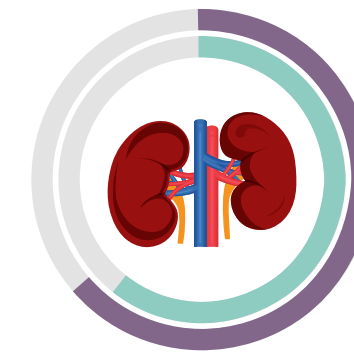
Percentage of patients who prefer ravulizumab over eculizumab



Main reasons for preference



Reduced frequency of infusions
 80% (Ravulizumab)
 94% (Eculizumab)



Ability to control aHUS
 60% (Ravulizumab)
 63% (Eculizumab)



Benefit to quality of life
 56% (Ravulizumab)
 88% (Eculizumab)



Ability to go to school/work
 28% (Ravulizumab)
 38% (Eculizumab)



Ability to travel
 54% (Ravulizumab)
 38% (Eculizumab)



Reduced infusion duration
 44% (Ravulizumab)
 38% (Eculizumab)



Side effect/safety perception
 24% (Ravulizumab)
 31% (Eculizumab)

Adult patients with aHUS and caregivers of pediatric patients with aHUS show an overall preference for ravulizumab, primarily due to its lower infusion frequency and positive impact on quality of life