

Co-Payment for ALK Sublingual Immunotherapy Tablets Paid by Patients Enrolled in a Patient Support Program in British Columbia

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Introduction

Allergy immunotherapy is the only disease-modifying treatment for allergic rhinitis.¹ Sublingual immunotherapy (SLIT) tablets are an efficacious and well tolerated treatment for moderate-to-severe allergic rhinitis induced by house dust mite (HDM), grass pollen, ragweed pollen, and tree pollen.^{2,3} In contrast to subcutaneous immunotherapy, SLIT-tablets are taken daily at home either year-round, or before and during the pollen season, depending on the specific SLIT-tablet. In Canada, patients prescribed SLIT-tablets manufactured by ALK are offered participation in EASE, a patient support program. EASE delivers pharmacist counseling and dispensing services, as well as financial assistance, when eligible.

Objective

The objective of this analysis was to evaluate the co-payment for SLIT-tablets paid by patients enrolled in the EASE program in the province of British Columbia, Canada.

Methods

This observational cohort study analyzed prospective pseudomized individual patient data from pharmacy dispensing records collected in British Columbia from October 12th, 2022-April 30th, 2025. Cost data from patients with allergic rhinitis with or without private insurance who were prescribed daily HDM, grass pollen, and/or tree pollen SLIT-tablets and enrolled in the EASE program were analyzed. Prescriptions dispensed at an external pharmacy were excluded due to data inaccessibility. The primary outcome was the average monthly co-payment in Canadian dollars per dispensation.

Figure 1. Average monthly co-payment per dispensation.

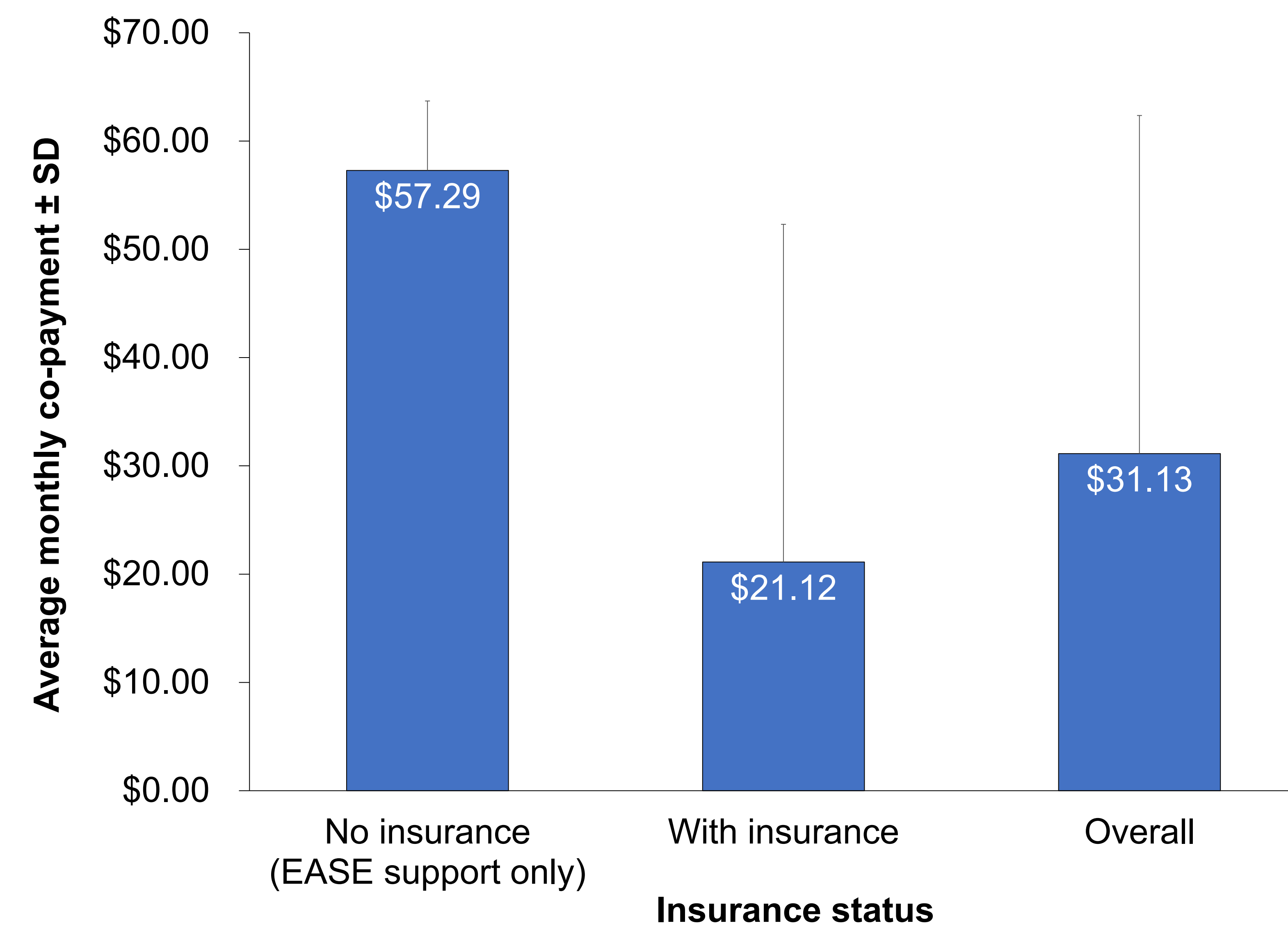


Table 1. Study population characteristics.

	No insurance (EASE support only)	With insurance	Overall
No. of dispensations	592	1,510	2,102*
SLIT-tablet allergen, n (%) [†]			
HDM	190 (32.1)	463 (30.7)	653 (31.1)
Grass	243 (41.0%)	642 (42.5)	885 (42.1)
Tree	159 (26.9)	405 (26.8)	564 (26.8)
Age at first dispensation, n (%), y			
≤19	13 (2.2)	29 (1.9)	42 (2.0)
20-39	78 (13.2)	251 (16.6)	329 (15.7)
40-59	83 (14.0)	187 (12.4)	270 (12.8)
60+	63 (10.6)	160 (10.6)	223 (10.6)
Missing	355 (60.0)	883 (58.5)	1,238 (58.9)
Female, n (%)	284 (48.0)	782 (51.8)	1,066 (50.7)
No. months covered per dispensation			
Mean (SD)	3.0 (1.0)	2.5 (0.9)	2.6 (0.9)
Median (min, max)	3.0 (1.0, 12.0)	3.0 (1.0, 6.0)	3.0 (1.0, 12.0)

*1,517 unique patients with 2,102 claims were analyzed.

[†]The ragweed SLIT-tablet is approved in Canada but had less than 5 dispensations and was therefore excluded from the analysis.

Results

Data from 2,102 product dispensations (n=1,510 with insurance, n=592 without insurance) involving 1,517 unique patients were analyzed (**Table 1**). Among the product dispensations, 31.1% (n=653) were for HDM SLIT-tablets, 42.1% (n=885) for grass pollen SLIT-tablets, and 26.8% (n=564) for tree pollen SLIT-tablets. Most (74.9%) dispensations were for a 90-day supply. The average (SD) monthly co-payment per dispensation was (**Figure 1**):

- \$31.13 (\$31.23) overall
- \$21.12 (\$31.19) for patients with private insurance
- \$57.29 (\$6.41) for patients without private insurance who benefited from EASE's financial assistance

Median co-payments for these groups were \$31.47, \$10.45, and \$56.65, respectively.

References

1. Wise SK, et al. *Int Forum Allergy Rhinol.* 2023;13(4):293-859.
2. Stranzl T, et al. *Allergy Asthma Proc.* 2024;45(4):232-239.
3. Pfaar O, et al. *Allergy.* 2025;80(12):3290-3301.

Abbreviations

HDM, house dust mite; SLIT, sublingual immunotherapy.

Conclusion

Enrollment in the EASE patient support program enables patients with allergic rhinitis, with and without private insurance, to receive affordable and efficacious treatment with SLIT-tablets.