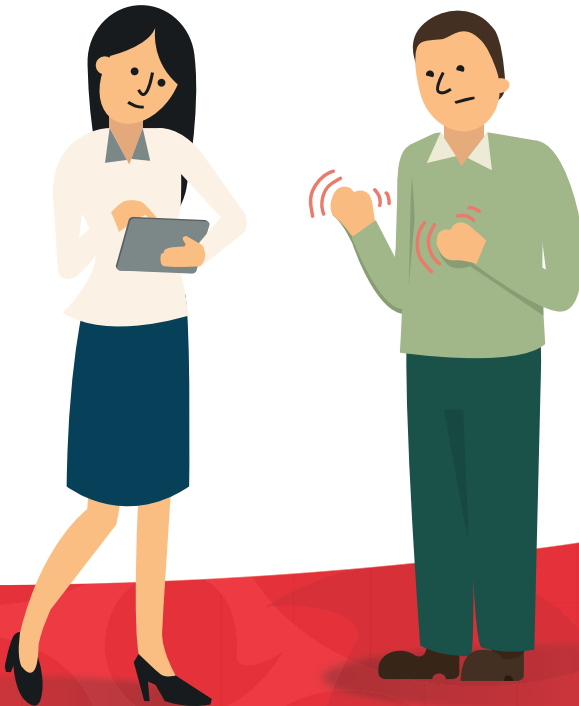


Peripheral attacks

& me



**YOUR GUIDE TO UNDERSTANDING
PERIPHERAL ATTACKS OF HAE**

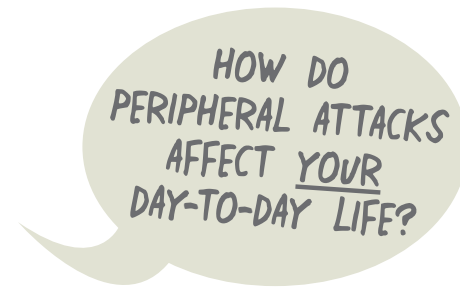
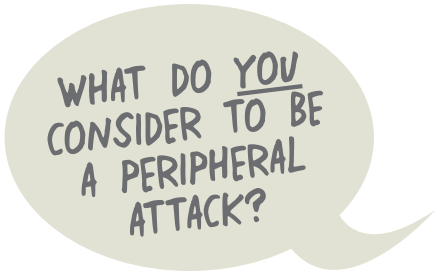


For many patients peripheral attacks can disrupt everyday tasks, such as using a computer or tablet

What is a peripheral attack?

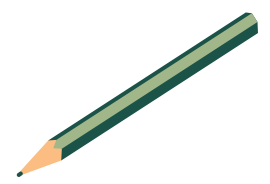
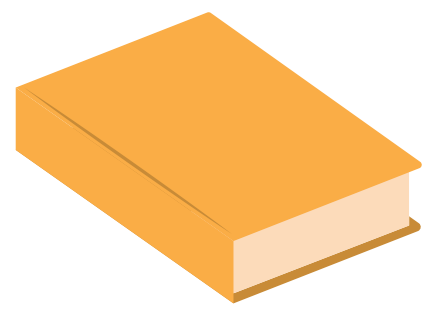
Hereditary angioedema (HAE) can cause swelling in various parts of the body. These swellings, sometimes called 'attacks', can be painful and some may need immediate medical attention.

Sometimes these attacks can affect the hands, legs, arms, feet or genitals, usually in the tissue just below the skin (subcutaneous). These are called 'peripheral attacks' and they make up more than half of all HAE attacks.



What impact can peripheral attacks have?

The effect of peripheral attacks of HAE will differ from person to person. For some, symptoms can be minor, but for others the swelling and pain can affect use of the hands, arms and legs. This can make everyday tasks such as driving the car, using a computer, getting dressed, making a phone call or holding a pen difficult. This might stop some people with HAE from attending school or work, spending time with friends or enjoying hobbies.





Should I tell my immunology team about my peripheral attacks?

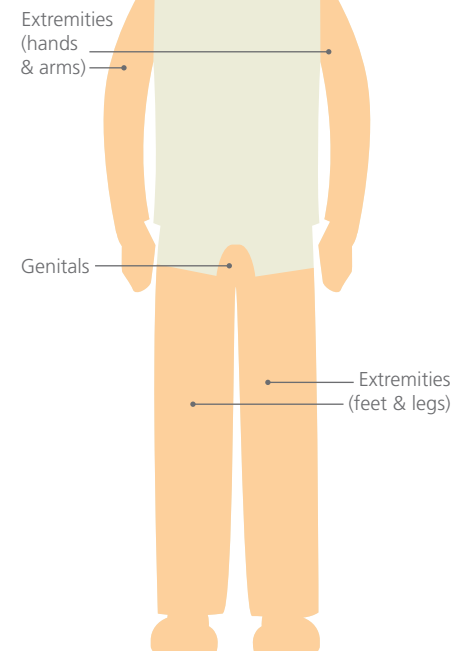
Peripheral attacks can be underestimated and so the symptoms are not always treated or even discussed. Sometimes this is because a peripheral attack is mistakenly seen to be not 'worth' treating compared to attacks in other areas of the body. If peripheral attacks are making your everyday life difficult, then you should mention it at your next consultation.

WHEN DID YOU LAST SPEAK TO YOUR DOCTOR OR NURSE ABOUT PERIPHERAL ATTACKS?

How should I manage peripheral attacks?

If a peripheral attack is painful or prevents you from doing everyday things, then you should consider treating it with your usual medication. It's important not to 'wait and see' to the point that an attack has become painful or already started to prevent you from carrying out day-to-day activities. So spotting the early signs of a peripheral attack is important and your doctor or nurse will be able to help you with this. You shouldn't change how you treat peripheral attacks without discussing it with them first.

WHAT ARE YOUR EARLY SIGNS OF AN HAE ATTACK?



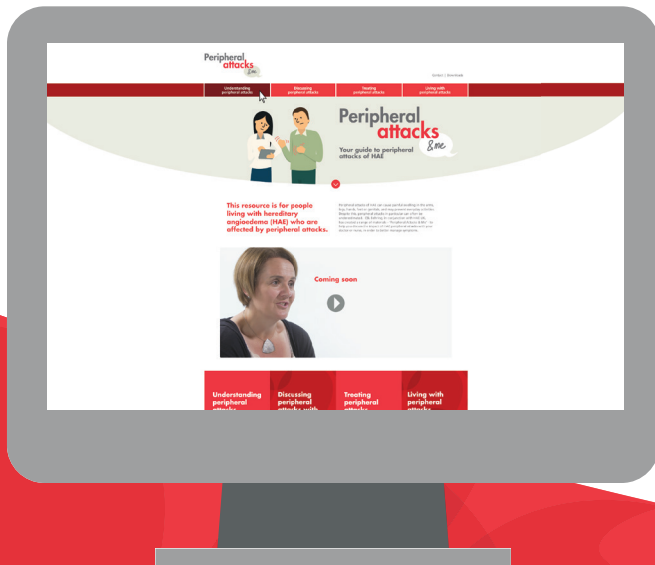
What should I do next?

Speak to your doctor or nurse about how peripheral attacks affect you and the best way to manage those that are painful or disruptive. Use the 'Notes' section at the back of this leaflet or your usual patient diary to record specific examples or questions.



Where can I find out more?

For more information, speak to your doctor or nurse, or visit www.peripheralattacks.co.uk where you can find other materials to help you better understand peripheral attacks.



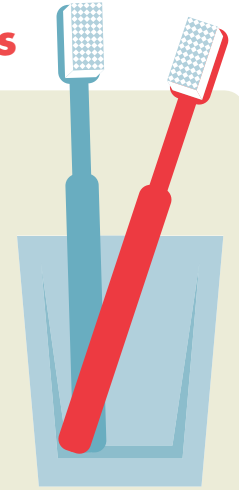
Living with peripheral attacks



"I treat pretty much all of my peripheral attacks these days, but my early management of the disease was not as good as it is now and at times I felt like they were beginning to control my life. I couldn't brush my teeth, wash my hair or shower. They can make some aspects of life very difficult.

My advice to anyone else who has peripheral attacks that affect their day-to-day life would be: get access to treatment and regularly discuss how you can better manage your peripheral attacks with your doctor or nurse."

June, Kent.



"I haven't always treated every peripheral attack that I have. I always thought: 'It's only my foot', and would feel bad for using treatment. This all changed because of a friend of mine, who asked me why I wasn't treating it if it meant the attacks would spread. So the next time I went back to my consultant I talked to him about it and he made me realise that they are affecting my day-to-day life and so I should be treating them. Now, they no longer affect me!"

Nicky, Birmingham.



"I have a 3-year-old and peripheral attacks can make being a mum a challenge. When she was a baby I would worry that an attack might mean I couldn't hold her. I don't let the attacks control me anymore though and other people shouldn't either. There are options and you should discuss them with your doctor."

Rachel, Somerset.



