



CAPITAL ALLERGY & RESPIRATORY DISEASE CENTER
A MEDICAL CORPORATION

URTICARIA

The round, raised, red, itchy rash of hives (urticaria) may occur in up to 20% of the population during their lifetime. Usually the condition occurs only for a short time period. When urticaria lasts for more than six weeks, it is considered chronic. The diagnosis of chronic urticaria may be difficult. Although, cooperative effort between physician and patient may not reveal the cause in up to 30% of the patients with chronic urticaria. It is important to remember that hives may occur up to 6-8 hours after the exposure to the allergen. Angioedema may or may not accompany urticaria. Angioedema is characterized by swelling of mucous membranes such as eyelids and/or lips and is not often accompanied by itching. Angioedema may lead to more serious consequences such as swelling of the throat.

I. CAUSES. The causes of urticaria include:

- A. Infection, usually viral, but occasionally strep pharyngitis.
- B. Food allergy, especially foods such as nuts, seafood, egg, berries, milk and melons.
- C. Preservatives or colorings in foods (yellow and red), especially sulfite, tartrazine, benzoates, orange dyes and nitrates.
- D. Aspirin and aspirin containing medicines (Alka Seltzer, Dristan, etc.). Some foods which contain aspirin include blueberries, bananas, green peas and licorice. Without specific challenge tests, it is difficult to determine if a patient is allergic to aspirin or aspirin related compounds. Studies have noted that avoidance of these foods and compounds may lead to a decrease in the amount of urticaria.
- E. Drugs: Consider any drug, either prescription or over-the-counter. Any new chemical in the environment may also cause urticaria and must be eliminated, if possible, during the workup for a patient with chronic urticaria.
- F. Fabric softeners should be avoided.
- G. A new residence, place of employment or a recent change in physical surroundings may be implicated in urticaria and should be critically investigated.
- H. Physical factors such as exposure to light, heat, cold, pressure, or vibratory sensation. Dermatographism is the occurrence of hives after stroking the skin. This may occur in up to 15% of the population and may cause generalized hives in a small number of patients.
- I. Systemic diseases: rarely encountered diseases such as, thyroid, malignancy, and hepatitis B.
- J. Unknown cause (idiopathic). Unfortunately, this is the most common cause of chronic urticaria. After a thorough workup the cause of urticaria is labeled idiopathic if none of the above diagnostic features can be discerned.
- K. Autoimmune disease may account for up to 40% of chronic cases.

II. INVESTIGATION: The diagnostic tests are determined by history and physical examination.



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III. TREATMENT: The most effective treatment for urticaria is to remove the cause. If food allergies are suggested, a diet without the following foods or additives should be tried - milk, nuts, eggs, seafood, berries, melons. If there is still no change in urticaria, a complete diet log should be kept where all substances ingested are listed prior to the next appointment.

If there is no response after two weeks of the above, then a strict elimination diet should be done for 5-6 days. The diet should include only water, salt, pepper, chicken, lamb, rice and broccoli. If the hives continue on days 4-6 on this diet, it is assumed the diet is not a factor. If the hives cease then further instructions will be given.

Other forms of treatment using medication may be necessary for some patients.

- A. Antihistamine: Two types of antihistamines are available, both H₁ and H₂ blockers. These may be used alone or in combination to control hives.
- B. Corticosteroids: Steroid drugs are used as a short term intervention to bring control of the flare or urticaria. If corticosteroids are needed on a chronic basis, the lowest possible dose should be used for the shortest period of time to control the problem. Every other day therapy may lessen side effects on a chronic basis.
- C. Miscellaneous: Other drugs such as Anti-leukotrienes, Colochine, Dapsone, Sulfasalazine, Cyclosporine and Doxepin may be used to control urticaria.

IV. OUTLOOK

Most patients stop having hives before six weeks. If hives last more than six weeks, there is no way to determine the exact length of involvement. The course is usually measured in months rather than years.