8. Which is the best antihistaminic to treat Urticaria and for how long?

- There are two types of antihistamines. They differ in terms of side effects, cost, dosage and duration of medication, and need for a prescription.
- Older antihistamines start to work quickly and work well to relieve symptoms. These include diphenhydramine, chlorpheniramine, hydroxyzine and cyproheptadine.
- The problem with older antihistamines is that doses 3-4 times per day are needed. Bothseome side effects such as drowsiness, dry mouth, double or blurred vision, or difficulty in urinating can occur. It can interfere with driving and tasks requiring quick reactions, similar to the effects of drinking alcohol. These medicines are therefore not recommended for people who plan to drive, pilot airplanes or boats, or operate heavy machinery, or for people whose job performance may be otherwise affected. The side effects usually get better if you take the medicine regularly over a period of days to weeks.
- Newer antihistamines have fewer side effects than older antihistamines and need to be taken less often, usually once or twice per day. They include loratadine, cetirizine, fexofenadine, desloratadine, and levocetirizine. A high dose of antihistamines is usually recommended before trying other treatments.
- It is always advised that Urticarial patients should keep an antihistamine with them always so that they can take it the first signs of Urticarial lesion or itching.
- In unresponsive cases, oral steroids or other treatments like montelukast, cyclosporine or omalizumab may be recommended by the dermatologist.

9. What is the course of Urticaria? Can it recur?

- Hives usually respond well to treatment, which includes medicines and avoiding whatever triggered the hives.
- Most simple cases of Urticaria fade quickly, and the affected skin returns to normal within hours.
- Even when you have episodes that recur over several weeks, without a known cause, they often stop coming back after a few months.
- Consult your doctor if hives persist for several days or if itching interferes with your ability to sleep or perform normal daily activities.
- Chronic Urticaria in a significant percent of patients are non-allergic in origin. Hence unnecessary elimination of diet should not be done.
- Second generation of antihistamines like fexofenadine, loratadine, cetirizine and levocetirizine are very safe on long term use for several months to several years at a stretch with proper monitoring.

10. What are the important aspects to know about Urticaria?

- Urticaria is not contagious
- They are rarely permanent; almost 50 percent of people are free of lesions within one year.
- Chronic Urticaria is rarely caused by allergies and is not life threatening. It is treatable in most people and may need few months to a few years of long term antihistamine therapy. This is very safe but regular monitoring is needed.

Illustrative representation:

**Urticaria**

- Histamine and other chemicals
- Allergic reaction
- Skin changes
- Food allergens
- Environmental allergens
- Drugs
- Infections

**Disclaimer:**

This leaflet is only for general patient information and is not intended for self-medication. There is no legal liability of IADVL arising out of any adverse consequences to the patient subsequent to its use for self-treatment of the disease. Images are just for the depiction of the condition and are not to be used for any other purpose.

Web site: Patient Information Leaflet

www.iadvl.org/patient-information-leaflet
1. What is Urticaria?

- Urticaria* or “hives” are raised areas of the skin that itch intensely and are red in colour.
- It is a very common condition and about 20 percent of people have hives at some time during their lives.

2. How can one get Urticaria?

- Urticaria is caused by release of a chemical called histamine which causes itching, redness, and swelling of the skin. In most cases, the lesions appear suddenly and disappear within several hours.
- If the disease lasts less than 6 weeks, causes like infections, food allergy and drug allergy may be responsible. If it lasts for more than 6 weeks, other chronic causes need to be ruled out.

3. What are the types of Urticaria?

- Urticaria can be acute, chronic or physical. But when you first get Urticaria, you cannot tell how long they will last, and so you cannot tell if you have acute or chronic lesions.
- Although all types of Urticarial lesions look similar, they often have different triggers. Learning what triggers your Urticaria can help you to avoid the trigger.

4. How does Urticaria look? Can Urticaria spread to other parts of the body?

- Urticaria are raised red areas that itch intensely. These raised areas may enlarge and merge together.
- Itching is the most bothersome symptom. Rarely severe pain, purple spots, raised lesions along with fever and joint pains can occur.
- Urticaria can affect any areas of the body, especially the trunk, thighs, upper arms and face.
- Most individual lesions fade quickly, but new crops may appear every 24 to 72 hours if the person continues to be exposed to the environment or substance that triggered the hives.

5. What should one do if one develops hives?

- Recognizing and avoiding the trigger is most important.
- In mild cases, consult a physician: an antihistaminic tablet and application of a soothing calamine lotion will provide relief.
- In recurrent episodes, or chronic cases, consult a dermatologist.
- Consult a physician or go to a hospital immediately if one experiences angioedema or breathlessness, tightness in the throat, nausea, vomiting, cramping abdominal pain and giddiness.

6. Are there any tests to confirm Urticaria?

- Most people with Urticaria do not need any testing. The diagnosis is usually based on the history and appearance of skin lesions.
- However, tests may be recommended if lesions do not resolve within six weeks.
- Skin testing for food and drug sensitivities may be done for people with acute Urticaria, but may not yield satisfactory results.
- Blood tests are done if Urticaria continues for more than 6 weeks, to check for underlying diseases, such as liver or thyroid problems or an autoimmune disease.
- A skin biopsy may help identify uncommon causes of Urticaria (in case of persistent fever, painful hives, individual hives that last for days at a time, hives associated with bruising of the skin or abnormal blood tests).

7. How can Urticaria be treated?

- Urticaria is treated with a combination of avoiding things that cause or worsen the hives and certain medications.
- The first treatment for acute Urticaria is to figure out what is triggering it and then avoid that trigger. Even if you cannot figure out the trigger, Urticaria usually disappears over days or weeks.
- Antihistamines are the mainstay medicines for Urticaria that can relieve itching and most people respond to antihistamines. A relatively high dose or more than one type of antihistamine may be needed to control symptoms.