

ALL CHRONIC URTICARIA about & ANGIOEDEMA



WHAT IS CHRONIC URTICARIA?

The term chronic urticaria (CU) is another term for “chronic hives.” Hives are an inflammation of the skin that results from cells in your body releasing histamine and other allergic chemicals into the bloodstream. They appear as clusters of raised, red or white welts that tend to be very itchy. Chronic hives are defined as hives that last more than six weeks, or may briefly go away, but often recur frequently. About 40% of people with chronic urticaria often have another condition known as angioedema. There are several subtypes of CU, including cold urticaria, pressure urticaria, and cholinergic urticaria. CU occurs in about 1% of the US population.

WHAT ARE THE SYMPTOMS OF CU?

CU presents as hives - small or large patches that may be round, irregular shaped, rings, or may change shape throughout the day. The hives are generally itchy and may be surrounded by redness. Hives can present in clusters and may involve the face, trunk, and extremities. Symptoms can last 30 minutes to several days, and may come and go.

WHAT IS ANGIOEDEMA?

Angioedema is defined as swelling of the skin which results from the leakage of fluid that is usually in the body’s vessels into the tissue space. The swelling can affect the skin of the face, ears, extremities or genitalia, and can also affect the mucosal tissue of the lips, mouth, throat and larynx. Angioedema can also occur internally and affect the bowel or other body organs.

HOW CAN YOU TELL IF IT’S ANGIOEDEMA AND NOT OTHER TYPES OF SWELLING?

Angioedema can present in as quickly as minutes and usually resolves within a day or two. It has a very irregular distribution, and does not result from positioning, such as with dependent swelling. It also can affect the lips, larynx and bowel, which other types of swelling do not.

WHAT CAUSES CU/ANGIOEDEMA?

The cause of CU/angioedema cannot always be identified, which can be very frustrating to patients. In many cases, this condition

may be a result of an immune system disorder. In very rare cases, CU/angioedema can be identified as a reaction to a medication, food, insect or infection. Even when the cause cannot be identified, there are common stimuli that may worsen or exacerbate the condition such as:

- allergies (food, environmental)
- medications
- temperatures (hot and cold)
- illnesses
- pressure
- sun exposure

HOW IS CU/ANGIOEDEMA DIAGNOSED?

The diagnosis of CU is based mostly on history of symptoms and physical exam that is done by either your pediatrician or an allergist. Although there are not specific laboratory tests that can be done to diagnose this condition, there are blood tests and allergy tests that can be done to identify triggers or rule out other conditions.

HOW IS CU/ANGIOEDEMA MANAGED?

The management of this condition depends on the symptoms. Your doctor will help to create a care plan that will work best for you. Some of the treatment measures include:

- *Oral Antihistamines:* Itching associated with the urticaria can be relieved by the use of antihistamines, such as Benadryl®, hydroxyzine, Claritin®, or Zyrtec®.
- *Oral Corticosteroids:* Medications such as prednisolone or methylprednisolone, which are types of steroid medications, may be used to treat the swelling from angioedema.
- *Epinephrine:* In severe cases of angioedema that affect the airway, anaphylaxis may occur. For these instances, the use of injectable epinephrine may be necessary to relieve symptoms.

WHAT CAN I DO TO MANAGE MY CONDITION?

Keep a symptom diary: CU/angioedema is a condition where it is very difficult to identify the cause. However, by keeping a symptom diary, you may be able to identify certain triggers that may cause an exacerbation, or flare up, of your condition. How to keep a symptom diary:

- Write down the date of the beginning of symptoms, then track how long the symptoms last.
- Write down what type of symptoms you are having and where they are located.
- What makes the symptoms better?
 - Keep track of the medication you are taking and whether they are being effective for symptoms.
- At the first sign of symptoms, write down what happened around that time.
 - New food? Medication? Allergy season? Sun exposure? Illness?

Try to avoid triggers:

- **Sun exposure-** Sunlight and heat may cause an increase in symptoms of some people. Try to reduce the amount of direct sunlight by keeping the skin covered. Also, spend more time in the shade.
- **Pressure-** Avoid wearing tight clothing and tight shoes, as this may irritate the skin and cause swelling and hives.
- **Exercise and sweating-** If you notice that exertion and sweating aggravates your symptoms, try to reduce the amount of strenuous activity.
- **Temperatures (hot/cold)-** Keep your environment cool, but not too cold! Avoid using hot water in the shower, and instead use lukewarm water.
- **Irritants-** Avoid the use of harsh soaps or detergents, as this may cause irritation of the skin.
- **NSAIDs-** Medication known as non-steroidal anti-inflammatory drugs such as ibuprofen have been known to cause angioedema or worsen it. Try using acetaminophen or other pain/anti-fever medications instead.

MY URTICARIA/ ANGIOEDEMA CARE PLAN

Symptom Relief of Urticaria (Hives):

Oral Antihistamine:

- Daytime: Take _____ every _____ hours as needed for itching
- Nighttime: Take _____ every _____ hours as needed for itching
- Breakthrough: Take _____ every _____ hours as needed between daytime and nighttime antihistamines

Management of Angioedema:

Oral corticosteroids:

- Take _____ every _____ hours for _____.

Injectable Epinephrine:

- EpiPen Jr. EpiPen Adrenacllick Jr. Adrenacllick Twinject Jr. Twinject
- Keep EpiPen with you at all times!

Trigger Avoidance:

- Sun exposure Tight clothing Environmental Allergens
- Hot/cold temperatures Irritants (harsh soaps, detergents)
- Foods: _____