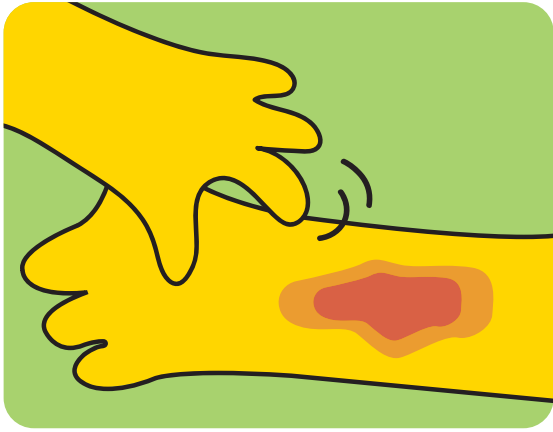




HIVES (URTICARIA)

Hives are raised, red, itchy swollen (mosquito bite-like) rashes that come and go in different areas day on day. They can exist together with swelling around the eyes or lips (angioedema).



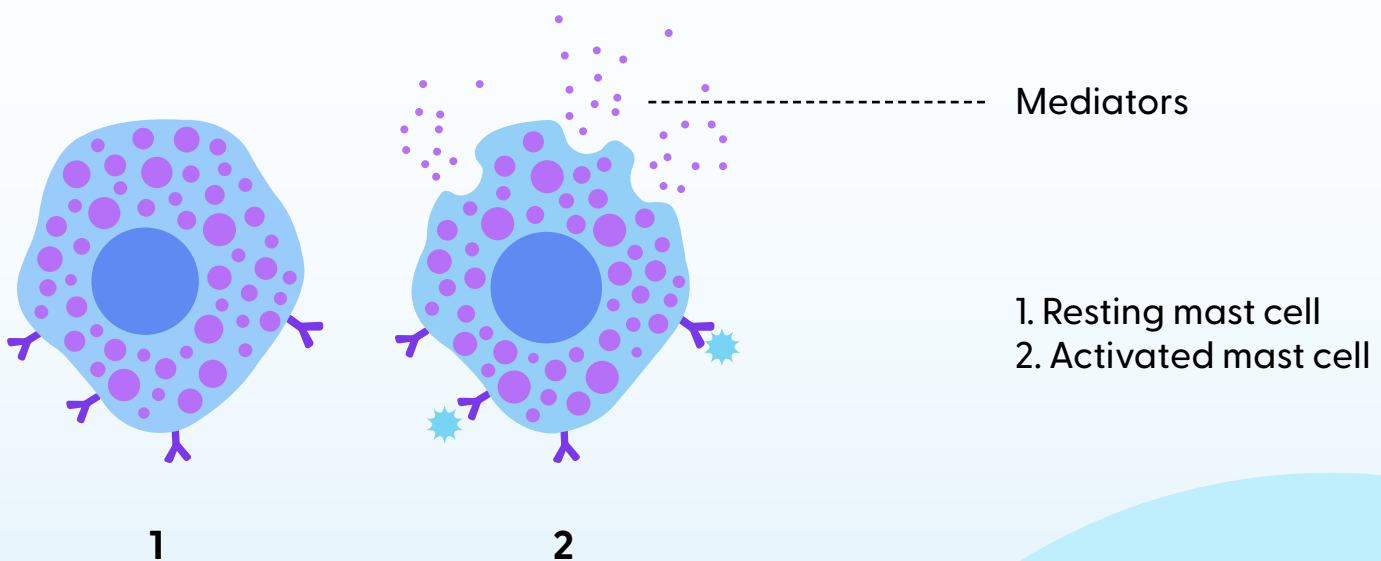
In **acute urticaria** (episodes lasting less than 6 weeks), the most common cause of hives is a recent viral infection which triggers the immune system. It is important to ensure that hives are not due to an acute allergic reaction to any new foods or medications used.

In acute urticaria, a simple antihistamine such as Zyrtec, Telfast or Aerius is used regularly for a few weeks till the hives resolve.

When hives last for more than 6 weeks and occur on most days, this is called **chronic urticaria**. This is often an immune reaction within the skin mast cells which trigger release of histamine and formation of hives.

While this is the same mechanism that causes hives on allergen exposure, in immune hives the body's immune system is triggered to react against itself.

Fortunately, this is limited to the mast cells in the skin only and is often not dangerous. The itch caused by hives however can be distressing and needs to be managed to ensure a good quality of life.





In <5% of children there may be physical factors that contribute to chronic hives

- Heat (eg. after a hot shower)
- Cold
- Exercise or sweat
- Pressure (eg. scratch on skin or carrying a heavy bag)
- Sunlight

Blood tests or allergy investigations are often not needed in majority of cases of chronic hives. Chronic hives usually resolves over time, 6 months – 1 year in most cases.

Treatment of chronic hives:

- Daily non-sedating **antihistamines** (Telfast, Aerius) in combinations prescribed.
- It may be necessary to step up dosages to 2-3 times standard recommended doses.
- **Two antihistamines** may be used concurrently.
- Acid suppressants (H2-antagonists) may be used in some cases to target a different mechanism together with non-sedating **antihistamines**.
- In severe cases Singulair or oral Prednisolone might be used.

How to taper medications:

- Once no new hives have occurred on the prescribed **antihistamine** dose for 2-3 weeks, reduce dosage by half.
- If no further hives occur for 1-2 weeks, stop the **antihistamine** (or cut it further to alternate day for 1-2 weeks before deciding to stop).
- If hives recur, move back up one step in the weaning course.

