



## DOES URTICARIA RULE YOUR LIFE?

Helpline  
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[www.allergyuk.org](http://www.allergyuk.org)

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# What is Urticaria



Do you suffer from raised rashes or patches?

- Urticaria is a raised rash or patches (called wheals), surrounded by red, inflamed skin.
- There may be tiny bumps, known as “hives” or “nettlerash”, or large raised patches of variable sizes.
- It can affect any part of the body.
- Urticaria is usually itchy or can be painful or have a burning sensation. Each wheal generally lasts a few hours and new ones can appear as older ones are fading, but all usually disappear quite quickly, causing only short-term discomfort.
- Urticaria is very common, affecting at least 1 in 5 people at some time.
- A few people have urticaria for very long periods, causing great distress.



Baby with hives



Angioedema

- Sometimes it is accompanied by deep tissue swelling, typically of the face, neck, hands or feet, called angioedema.

# Types and Causes of Urticaria

Although urticaria is often thought to be due to allergy, in fact urticaria is **RARELY** caused by allergy. **Around 20% of urticaria is caused by true allergy and usually in people who have asthma, eczema or rhinitis and there may be a worsening of their other allergy symptoms or even anaphylaxis:**

**Foods:** milk, eggs, nuts, fish, fruit, seeds, wheat.

**Food Dependent Exercise Induced Urticaria:** only happens when a food, e.g., wheat or nuts, have been consumed within two hours of exercise – it can also lead to anaphylaxis.

**Drugs:** antibiotics, radio-contrast medium (injected for exploratory x-rays), iodine.

**Animals:** horses, cats or any animal or insect; house dust mite exposure.

**Plants:** tomatoes, melon, lettuce, nettles, chrysanthemums, geraniums, etc.

**Other:** latex, elastoplast. Often, health care workers may experience rashes and swelling that is caused by wearing latex gloves or from inhaling the latex allergen.

Some people with birch pollen allergy may have rashes and angioedema around their face lips and neck in the pollen season when they eat fresh fruit or nuts. This is called Food Pollen Syndrome and is caused by a relationship between the proteins in the birch tree and the fresh fruit and nuts.

The symptoms will disappear soon after the trigger has been removed.

## Non-allergic urticaria:

- Some people have mild transient urticaria when they have an infection, which will disappear within a couple of weeks. It can be triggered by an antibiotic or aspirin-type drug but is usually triggered by the bacterial or viral infection.
- It is common after excessive exposure to sunlight or UV light.
- Due to drugs, e.g., aspirin, codeine, other painkillers, ibuprofen or other anti-inflammatory, blood-pressure drugs, statins.
- In a few people, high levels of natural salicylate or histamine-like substances in foods, e.g., strawberries, beer, ripe cheeses and fish or shell-fish that is not fresh.
- Rarely, some colourings in foods.
- Urticarial vasculitis, erythema multiforme or other illness, see: [www.bad.org.uk/site/816/Default.aspx](http://www.bad.org.uk/site/816/Default.aspx)
- When accompanied by red rings and blisters, may be Stevens-Johnson Syndrome, see: [www.sjsawareness.org.uk](http://www.sjsawareness.org.uk)

# Physical Urticaria

- Dermagraphism is raised welts or wheals caused by direct pressure on the skin. It can be demonstrated by 'writing' on the skin with a pointed object. The raised "writing" will disappear within an hour.
- Delayed pressure on the body or limbs can also cause temporary urticaria.
- Tight clothing can cause large wheals that may take several days to clear, occasionally also accompanied by lip and eyelid swelling.
- Exercise can cause urticaria although it is sometimes related to food allergy.
- Cholinergic urticaria is caused by sudden change of temperature in the body e.g. hot shower – the wheals can "move" around the body or face.
- Cold urticaria causes rashes and can also cause swelling in the throat when icy drinks or food are consumed.
- Solar urticaria is caused by exposure to the sun.
- Aquagenic urticaria is very rare and caused by contact with water.

Approximately 80% of urticaria is idiopathic, meaning that there is no known cause:

**Acute urticaria** can come and go unpredictably, eventually resolving after about six weeks.

**Acute intermittent urticaria** will appear unpredictably for hours or days then resolve spontaneously, with repeated similar episodes over a period of a few years.

**Chronic urticaria (CU):**

- Occurs daily, or almost daily, for a least six weeks.
- Accompanied by angioedema in about 40% of sufferers.
- May recur for several years.
- Up to 1% of the population suffers from CU at any one time.



# Investigations/Treatment/Management

## Investigations

Urticaria caused by allergy can be tested by serum specific IgE blood tests, although these do not always show the allergens.

Tests for thyroid function and auto-immune disorders may be performed for **Chronic Urticaria**. For most urticaria, tests are unhelpful.

## Treatment

Antihistamines control most rashes but often doctors prescribe non-sedating antihistamines in higher than licensed doses for better effectiveness.

The older (first generation) antihistamines are not advisable as they work for a short time and are sedating. The newer (second generation) antihistamines are safe when prescribed in higher doses.

When symptoms are still uncontrolled your GP will refer you for specialist treatment.

## Management:

Keep a diary for two weeks of:

Activities / location / state of health / any infection / stress / prescribed drugs / supplements / take photos of your rashes with dates and times and reference them in your diary, and all food and drink. You can download a template from Allergy UK's website: (<http://www.allergyuk.org/downloads/diary-examples/food-symptoms-diary.pdf>)

## Avoid Triggers:

If you can identify what triggers your rashes, then try to avoid those triggers or the situations that will make the symptoms worse.

## Tips:

Heat usually makes rashes worse and more itchy.

Wear cotton nightwear and use lighter bedding.

Drink plenty of water.

Take antihistamines prescribed for you regularly until well after the rash has gone.

Wear a wide-brimmed hat and long, cool clothes in the sun.

Take cooler showers.

Avoid aspirin-type drugs (speak to your pharmacist or GP).



# Urticaria Questionnaire



When visiting your GP show all medications that you take including supplements

Please use this questionnaire as a guide when talking to your doctor:

- How long have you had urticaria?
- Does it itch?
- How often do episodes happen?
- How long do the rashes / wheals last?
- How big are they? (take a photo)
- Does the rash move?
- When the rash goes, does it leave purple or brown spots?
- Do you ever get angioedema (deep tissue swelling)?
- Is there also pain or burning?
- When is the worst time of day?
- Does it only occur at a particular time of the year?
- Does it only occur in certain places / situations?
- Is it better on holiday?

Did it start after:

An infection / another illness / new medication (including supplements) / a vaccination / new drug / an x-ray requiring an injected dye / scratching or rubbing skin / wearing tight garments / prolonged external pressure i.e. from hard chair, shoes, tools / cold water / hot shower / iced food or drink / certain food / spicy meal / snow or ice / sun / heat / exercise / sweating / stress / sexual intercourse.

Is it after contact with (including at work):

Plants / animals / hair dye or tattoo / specific chemical or cleaning product / paint or glue.

Do you have known allergies, previous reactions or family history?

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