

HIVES

(Urticaria; Giant Urticaria)



BASIC INFORMATION

DESCRIPTION

An allergic disorder characterized by a skin rash with raised areas, redness and itching. It can involve the skin anywhere, including the scalp, lips, palms and soles. Frequently, a specific cause cannot be identified.

FREQUENT SIGNS AND SYMPTOMS

Itchy skin papules (small, raised bumps) with the following characteristics:

- They swell and produce pink or red lesions called wheals. Wheals have clearly defined edges and flat tops. They measure 1 cm to 5 cm in diameter.
- Wheals join together quickly and form large, flat plaques (larger areas of raised, skin-colored lesions).
- Wheals and plaques change shape, resolve and reappear in minutes or hours. This rapid change is unique to hives.

CAUSES

Release of histamines, sometimes for unknown reason. Following are the most common causes:

- Medications. Nearly every drug causes hives in some persons, including aspirin.
- Insect bites; viral infections; autoimmune disease; dysproteinemias.
- Exposure to cold, heat, water or sunlight.
- Cancer, especially leukemia.
- Exposure to animals, especially cats.
- Eating eggs, fruits, nuts and shellfish. Other foods sometimes cause hives in infants, but not in adults.
- Food dyes and preservatives (possibly).
- Infection (bacterial, viral, fungal).

RISK INCREASES WITH

- Stress.
- Other allergies or a family history of allergies.

PREVENTIVE MEASURES

- If you have had hives and identified the cause, avoid the source.
- Keep an anaphylaxis kit if you experience severe reactions.

EXPECTED OUTCOMES

Unpredictable, depending on the cause. If a medication or acute viral infection is responsible, hives usually disappear within hours or days. Some cases become chronic and last for months or years. Most eventually go into spontaneous remission even if the cause is not identified.

POSSIBLE COMPLICATIONS

- Swelling of the larynx and inability to breathe.
- Hives may be the first sign of life-threatening anaphylaxis. If so, it will be followed by agitation, wheezing due to the blockage of the airway, numbness, palpitations, cold sweats and/or low blood pressure. Without prompt treatment, coma and cardiac arrest can occur.



TREATMENT

GENERAL MEASURES

- Emergency-room care for life-threatening reactions.
- Diagnostic tests may include laboratory blood studies, urinalysis, erythrocyte sedimentation rate and chest X-ray to rule out inflammatory infection.
- Treatment aims are to prevent contact with the triggering factors.
- Allergy skin tests and desensitization injections.
- Don't take drugs (including aspirin, laxatives, sedatives, vitamins, antacids, pain killers or cough syrups) not prescribed for you.
- Don't wear tight underwear or foundation garments. Any skin irritation may trigger new outbreaks.
- Don't take hot baths or showers.
- Apply cold-water compresses or soaks to relieve itching.

MEDICATIONS

- Antihistamines, ephedrine, terbutaline or cortisone drugs to relieve itching and rash.
- Sedatives or tranquilizers for anxiety.
- Epinephrine by injection for severe symptoms.

ACTIVITY

Decrease activities until several days after hives disappear. Avoid getting hot, sweaty or excited.

DIET

- If foods are suspected as a cause, keep a food diary to help identify the offending food.
- Avoid alcohol and coffee or other caffeine-containing beverages if they appear to trigger outbreaks.



NOTIFY OUR OFFICE IF

- The following occur during an episode of hives:
 - Swollen lips.
 - Shortness of breath or wheezing.
 - A tight or constricted feeling in the throat.
- Any of the symptoms of anaphylaxis (see Possible Complications). This is an emergency!
- New, unexplained symptoms develop. Drugs used in treatment may produce side effects.