

# Urticaria (Hives)

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Urticaria is the medical name for hives or welts. The rash is typically red, slightly raised, and may itch intensely. Each individual hive usually lasts for a few hours before fading away, leaving no trace. New hives appear as old ones fade. The rash may be tiny or cover broad areas of the body. Hives are very common, and approximately 20% of people have at least one episode during their lifetime. Hives may be associated with swelling, particularly of the mouth, hands, feet, eyes, and genital areas. The swellings are disconcerting but are typically not dangerous. The swelling is referred to as angioedema and usually resolves in less than 24 hours.

In most cases, a single attack of hives usually resolves in a few days to a few weeks. Sometimes there is an obvious explanation for the hives such as medication allergy, food allergy, or viral infection, but in many cases there is no obvious explanation. If hives are present for six weeks or longer, they are referred to as chronic urticaria. With chronic urticaria more than 95% of the cases are of unknown cause. The medical term for this situation is chronic idiopathic urticaria. In the vast majority of patients with chronic urticaria, there is no exposure (drug, food, insect, chemical) to blame for the urticaria. The evaluation for chronic urticaria usually consists of a good medical history, a physical examination, and occasionally a few laboratory tests. A skin biopsy may be necessary with certain situations. Allergy testing is virtually never necessary or helpful in evaluating chronic hives.

Although the exact cause for hives is rarely identified, the good news is that the problem will usually respond to proper medical treatment. Antihistamines represent the mainstay of treatment for urticaria. Antihistamines are oftentimes required at much larger than normal doses to control the problem. Additional allergy medicines are sometimes used in conjunction with antihistamines. Short courses of oral steroids are also sometimes necessary. Steroids can be associated with significant side effects if used chronically. Recently, an injectable medicine, Xolair (omalizumab) has been approved for chronic urticaria and can be very useful in difficult-to-control cases. Rarely, other powerful anti-inflammatory or immunosuppressive medicines may be necessary, but these can be associated with significant side effects and must be monitored carefully. Once an effective therapy is identified, it should be taken daily, even if the hives are not present. Treatment is usually continued for weeks or months after chronic hives have disappeared.

When hives are present, there are a number of physical stimuli that can worsen the rash. These include heat, exercise, cold, vibrations, tight fitting clothing, and even sunshine. These stimuli do not typically cause the hives but merely worsen the situation.