

# Acute Urticaria

Ruth A. Sabroe, FRCP, MD

## KEYWORDS

• Acute urticaria • Anaphylaxis • Antihistamines

## KEY POINTS

- Acute urticaria is common in adults and children.
- Acute urticaria is most often idiopathic, but it may follow infection, exposure to drugs, or less commonly food ingestion.
- Acute urticaria may be a presenting symptom of anaphylaxis.
- Acute urticaria by definition resolves within 6 weeks, but it often settles within 2 to 3 weeks. It may recur in a small proportion of patients.
- Acute urticaria may be treated with antihistamines or oral steroids if needed.

## INTRODUCTION

Urticaria consists of transient red itchy swellings, or weals. Swellings are variable in size and usually last for less than 24 hours. Acute urticaria is defined as the occurrence of weals for less than 6 weeks, after which the disease instead becomes chronic urticaria.<sup>1</sup>

Acute urticaria is common, and presents in all age groups.<sup>2–4</sup> Its transient and usually benign nature means that it may not come to the attention of doctors. Thus, the incidence may be underestimated, typical disease severity may be overestimated, the proportion with causative factors is difficult to ascertain, and the response to treatment is difficult to quantify. Such problems are compounded because patients also present to various different specialties, including generalists, emergency departments, pediatricians, immunologists or allergists, and dermatologists. This situation may explain why there are few publications including large cohorts of patients specifically with acute urticaria. However, the following article summarizes current knowledge on the condition.

## EPIDEMIOLOGY

Acute urticaria is common in both adults and children. Indeed, it is one of the most common dermatologic conditions presenting to many emergency departments.<sup>3,5,6</sup>

---

Disclosures/Conflict of Interest: None.

Department of Dermatology, Royal Hallamshire Hospital, Sheffield Teaching Hospitals NHS Foundation Trust, Glossop Road, Sheffield S10 2JF, UK

*E-mail address:* [rsabroe@doctors.org.uk](mailto:rsabroe@doctors.org.uk)

Immunol Allergy Clin N Am 34 (2014) 11–21

<http://dx.doi.org/10.1016/j.iac.2013.07.010>

[immunology.theclinics.com](http://immunology.theclinics.com)

0889-8561/14/\$ – see front matter © 2014 Elsevier Inc. All rights reserved.

Overall, 12% to 22% of the general population will suffer from at least one subtype of urticaria at some time in their lives,<sup>7-9</sup> with a prevalence of 0.11% to 0.6%.<sup>10,11</sup> Of all patients with urticaria, only a low proportion of 7.6% to 16% have acute urticaria,<sup>12-14</sup> although in one study the percentage was much higher at 56%.<sup>15</sup> The variation may be related to the population studied and the interests of the department or doctor to whom patients are referred.

The age group studied may be particularly important, because acute urticaria seems to be more common than chronic disease in very young children. Indeed, in one report, all children presenting at less than age 6 months had acute urticaria, and 85% of children less than age 2 years had this subtype.<sup>16</sup> In older children, the ratio of chronic to acute urticaria seems to be similar to that in adults.<sup>17-19</sup>

The overall age range for presentation with acute urticaria is wide, in one study 3 months to 88 years,<sup>2</sup> with an average in the early twenties.<sup>2-4</sup>

Most,<sup>2-4</sup> but not all,<sup>15</sup> reports find a female preponderance of about 60%. However, in young children the male to female ratio may be roughly equal.<sup>20-22</sup>

## ETIOLOGY

Attacks of acute urticaria are thought to be idiopathic in 30% to 50% of cases.<sup>2,15,23,24</sup> Otherwise attacks may be triggered by infections, drugs, or foodstuffs (**Table 1**). The relative proportion of patients with each precipitant varies from study to study.

In children, many studies find respiratory tract and other infections to be the most common trigger for urticaria.<sup>22,24,25</sup> The association with respiratory tract infections may be related to a seasonal variation in incidence.<sup>25</sup> Infections, of many types

Cause		Reference
Idiopathic		2,15,23,24
Infection		
Viral	Adenovirus	26,56
	"Common cold"	4
	Cytomegalovirus	57
	Enterovirus	26,56,57
	Epstein-Barr	26,57
	Hepatitis A, B, C	56,58
	Herpes simplex	57,59
	Influenza A	57
	Parvovirus B19	57
	Respiratory syncytial virus	26
	Rotavirus	26
Varicella/Zoster	26	
Bacterial	Group A beta-hemolytic streptococcus	60,61
	<i>Haemophilus influenzae</i>	62
	<i>Staphylococcus aureus</i>	62
Other	<i>Anisakis simplex</i>	33
	<i>Blastocystis hominis</i>	63,64
	Malaria	65
	Mycoplasma	57,66
	Scabies	15

*(continued on next page)*

Download English Version:

<https://daneshyari.com/en/article/3354658>

Download Persian Version:

<https://daneshyari.com/article/3354658>

[Daneshyari.com](https://daneshyari.com)