

Urticaria

Impact on Quality of Life and Economic Cost

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KEYWORDS

- Urticaria • Angioedema • Health-related quality of life • Patient-reported outcomes
- Psychiatric comorbidity • Cost

KEY POINTS

- The QoL impairment of patients with chronic urticaria attending a tertiary referral center is comparable with that experienced by a group of older patients with severe, ischemic heart disease.
- The severe impairment of QoL in chronic urticaria is often underestimated, and in several dimensions is comparable with the impairment suffered by patients with atopic dermatitis (AD) and psoriasis (PSO).
- A systematic search of medical databases (PubMed and OVID/Medline) revealed a high prevalence (46.09%) of psychosocial factors in patients with chronic spontaneous urticaria.

URTICARIA

Urticaria describes short-lived erythematous swellings caused by local, transient dermal edema and vasodilatation. Individual lesions are usually intensely itchy and vary from red weals and papules to larger plaques (**Fig. 1**). Despite the itch, excoriation is exceptional, because patients tend to rub rather than scratch.¹ Crops of weals appear suddenly and resolve completely in 12 to 24 hours. However, fresh lesions may continue to appear almost indefinitely, and more patients have symptoms that are worst in the evening² or at night.³

ANGIOEDEMA

Angioedema, caused by edema of the subcutaneous tissue and mucous membranes causing deeper swellings, may occur alone or in association with urticaria. Some 30% to 50% of patients with urticaria develop recurrent angioedema.⁴ These swellings are sudden in onset and disappear completely in 24 to 72 hours. Angioedema is

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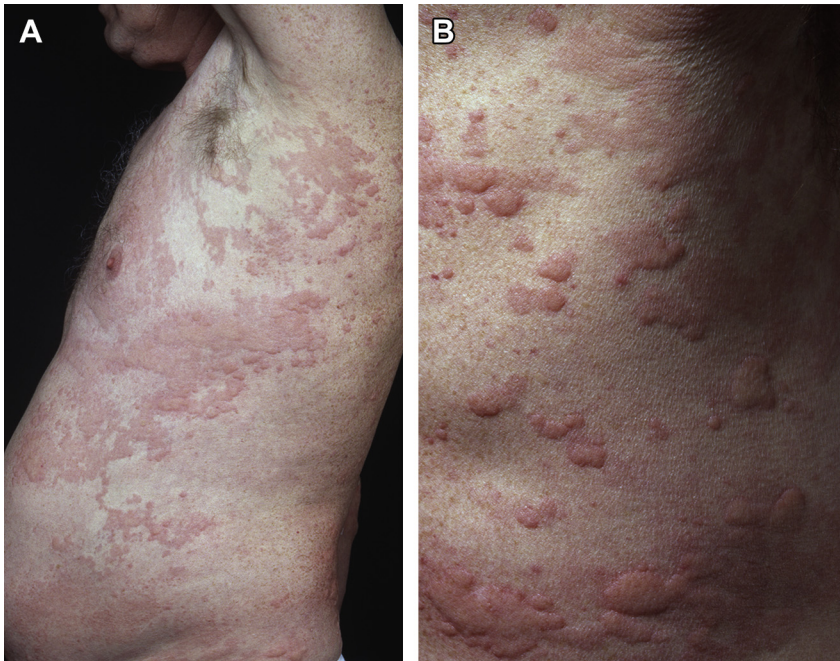


Fig. 1. (A) Urticarial weals on the lateral aspect of the trunk. (B) Close-up view emphasizes the edematous nature of individual weals. (Courtesy of the Illustrations Department, St John's Institute of Dermatology, London.)

cosmetically distressing because of the swelling of the eyelids, lips, and face. Swelling of the hands and feet may make movement more difficult, and swelling of the lips, tongue, and throat cause fear and problems with speech, swallowing, and breathing.

CLASSIFICATION OF URTICARIA

Urticaria, a heterogeneous group of diseases, has been classified into 3 groups: spontaneous urticaria (acute <6 weeks, chronic >6 weeks), physical urticaria, and other urticaria types (Table 1).⁵ However, the authors point out some inconsistencies

Table 1 Urticaria classification	
Spontaneous urticaria	Acute spontaneous urticaria Chronic spontaneous urticaria
Physical urticaria	Cold contact urticaria Delayed pressure urticaria Heat contact urticaria Solar urticaria Urticaria factitia/dermographic urticaria Vibratory urticaria/angioedema
Other urticaria types	Aquagenic urticaria Cholinergic urticaria Contact urticaria Exercise-induced anaphylaxis/urticaria

Adapted from Zuberbier T, Asero R, Bindslev-Jensen C, et al. EAACI/GA(2)LEN/EDF/WAO guideline: definition, classification and diagnosis of urticaria. *Allergy* 2009;64(10):1419; with permission.

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