

South Georgia Pediatric and Allergy



HIVES

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WHAT ARE HIVES

Hives are red, very itchy, swollen areas of the skin. Hives arise suddenly and may leave quickly in 1-2 hours, or can last as long as 24 hours. They often appear in clusters, with new clusters appearing as other areas clear. Physicians refer to hives as urticaria. Over one-fifth of the population has suffered an eruption of hives at some point in their lives.

WHAT CAUSES HIVES?

Hives can be caused by allergic or non-allergic mechanisms. In a majority of chronic cases, the exact cause is unknown. Often hives are caused by an adverse reaction to some food or medication. Foods likely to cause hives include nuts, tomatoes, shellfish, and berries. Medications often responsible for producing hives are penicillin, sulfa, anticonvulsants, phenobarbital, as well as aspirin.

WHAT ARE SOME OTHER CAUSES OF HIVES

A common form of hives is dermatographism, which occurs in 5% of the population. It is caused by stroking of the skin or rubbing as occurs with scratching or tight fitting garments.

Cholinergic urticaria is the medical professions's term for hives which can develop after activities which increase the body's temperature after exposure to warmth or heat. Such activities include a warm bath, shower, jacuzzi or hot tub use, exercise, a fever, or emotional stress. It has been estimated that 5% to 7% of patients who have hives experience the phenomenon of cholinergic urticaria.

Cold-induced urticaria occurs after exposure to cold wind or water. Hives may appear on limbs, arms, and generally on any exposed area. Cold water or liquids can provoke symptoms on the lips or in the mouth.

Another type of hives is called solar urticaria. It is caused by exposure to sunlight or to a sunlamp and a reaction can occur within one to three minutes.

According to physicians, the factors (heat, cold, and sunlight) causing the hives in these cases involve no defined allergic substance even though the body mechanisms may resemble allergy.

Exercise is another common cause of hives in which there is no allergic substance involved (in most cases). Those individuals affected can also develop respiratory obstruction and/or lose consciousness. Such a severe reaction is called exercise-induced anaphylaxis

WHAT IS ANGIOEDEMA

While hives develop on the skin's surface, angioedema is a swelling of the deeper layers of the skin. It most often occurs on the hands, feet and face. If the angioedema occurs in the throat, normal breathing or swallowing can be blocked and emergency measures must be taken. This is a rare occurrence and most angioedema causes swelling of the lips or eyes with no long-lasting effects.

Hives and angioedema may appear together or separately on the body. Angioedema usually lasts one or two days, and may reoccur with or without hives over an indefinite period of time.

Hereditary angioedema is a rare inherited disease which can be fatal in some cases and in this respect differs from other types of chronic angioedema. Swelling can occur in the airways, such as the larynx, tongue and throat, as well as on the face and other extremities. Swelling in the stomach area has led to severe pain and surgery for what was thought to be appendicitis. It has been demonstrated that a blood protein deficiency is the cause of the inherited illness.

HOW CAN HIVES BE TREATED?

Avoidance of the foods, drugs, or other provoking factors is recommended whenever possible. Antihistamines such as hydroxyzine (Atarax), diphenhydramine (Benedryl), pyrilamine, terfenadine (Seldane) and cimetidine (Tagamet), are used to treat recurrent episodes.

Hydroxyzine is especially effective for the treatment of cholinergic urticaria. Cyproheptadine (Periactin) is used to treat cold-induced urticaria.

If the hives do not respond to the antihistamines many allergists will utilize corticosteroid medications, such as prednisone, which are given in conjunction with the antihistamines. Most patients will improve with steroid treatment, physicians say, but if possible they should be avoided for chronic use. Nevertheless some patients require them. After a suitable interval, the individual can then discontinue use of the steroid medications, since long-term therapy is not recommended. At that time, continued treatment with antihistamines is suggested until they are no longer necessary.

In severe acute cases, where angioedema is involved, adrenalin injections may be necessary to alleviate the swelling. Hereditary angioedema can be effectively treated with male hormones, researcher have found