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HIVES/SWELLING INFORMATION SHEET

GENERAL INFORMATION ABOUT HIVES

At some time in their lives approximately 20% of people in the U.S. will develop hives ("urticaria") and/or swelling ("angioedema") involving various parts of their body. Hives and swelling are related problems and the approach to both of these problems is the same. Both are caused by excess histamine release from skin white blood cells (MAST cells) generally due to a temporary state of fragile MAST (histamine releasing) cells. Histamine causes marked itching as well as fluid swelling in skin.

Hives form because something (usually the spontaneous release of histamine) causes the blood vessels in an area of skin to expand (causing local redness) and become leaky, so fluid escapes into the surrounding skin leading to swelling and hives.

Doctors call hives of unknown cause "idiopathic urticaria." In Greek idiopathic means "unknown cause" and urticaria means "hives" (i.e., idiopathic urticaria=hives of unknown cause). The medical term for swelling is angioedema, "also taken from the Greek "angio" meaning blood vessel and "edemos" meaning swelling. This name is derived from the way hives form as described in the previous note.

In 90% of cases hive and swelling flare ups last 6 weeks or less and then disappear on their own. In the rest of cases the problem lasts over 6 weeks and then the urticaria is called "chronic." At this point various tests are usually ordered, though in about 50% of cases the cause of the chronic hives may be still unknown. Studies have shown that in the majority of cases where the cause of hives is discovered, the cause is suspected by the patient and/or doctor after the history is reviewed. Only occasionally does blind blood testing reveal a cause not suggested by the history. The few routine tests ordered are for the sake of being complete in our search for a cause.

It is common for adults and children to develop hives after a viral infection, such as the "flu." Such **"Post Viral Urticaria" is probably the most common cause of hives.** It is normal for your body to make "IgG" antibodies to fight off viruses. Occasionally such antibodies can also bind (cross react) to histamine (MAST) cells in the skin causing fragile histamine cells. Then heating skin, exercise, minor scratching of skin etc. can trigger histamine release, worsening hives. As the individual antibodies gradually subside in the blood over 1-3 months (or sometimes longer), "Post Viral Hives" usually resolve completely.

Even in those cases where hives and /or swelling last for more than 6 weeks, the problem usually will go away on its own and generally disappears within 12 months. Even though the cause cannot be found in some 50-70% of cases, by using medications the hives and swelling can be prevented or controlled. Studies of hive patients show that if the hives can be controlled for 3 months, then in most cases the medications can be gradually reduced and the hives will not return.

Food is rarely a cause of chronic hives. Food allergies usually cause symptoms soon after the food is eaten and rarely cause problems after 4 hours. Due to quick onset of reactions to foods, any foods which trigger allergic hives reactions are usually readily identified by patients themselves. Chronic hives occurring many hours after eating foods should not be attributed to food allergies. Food additives (flavoring, preservatives, dyes) rarely cause allergic reactions so they do not have to be avoided in most cases.

INFORMATION ON TREATMENT

The initial treatment for hives and swelling is normally a combination of several antihistamines. The usual antihistamines such as Zyrtec, Clarinex, Allegra, Loratadine, Hydroxazine, Benadryl, Chlor-Trimeton, etc. block what are called “type 1" histamine effects. These type of antihistamine gives relief in the majority of cases. Doxepin (Sinequan) is another powerful antihistamine useful in severe hives, but is given at bedtime since it can cause some sleepiness. Singular and Accolate may also be useful for some hives patients. Sometimes the “type 2" histamine effects also have to be blocked and medications such as Tagamet and Zantac are added. If the hives are very difficult to control, then cortisone-type drugs are used for a short period to get the hives under control and then, after tapering off the cortisone-type medication, control can be maintained with antihistamines alone.