

URTICARIA

Urticaria (commonly known as hives) manifests as sudden emergence of raised, red, itchy welts or wheals on the skin, frequently accompanied by swelling of the lips and eyelids. These welts vary in size and shape and can appear and disappear within hours, often causing discomfort and irritation. Urticaria can be acute, lasting for less than six weeks, or chronic, persisting

for longer durations, and it manifests in various forms triggered by a multitude of factors.

The development of urticaria is typically attributed to the release of histamine and other chemicals from mast cells in the skin, causing blood vessels to leak fluid and resulting in swelling and itching. Triggers for

urticaria encompass a wide range, including allergens like certain foods, medications, insect stings, physical stimuli such as pressure or temperature changes, autoimmune factors, and emotional stressors. The diversity of triggers contributes to the complexity of diagnosing and managing this condition.

What are the types of urticaria?

Acute or Chronic

Acute urticaria arises suddenly but typically resolves upon removal of the trigger. Chronic urticaria persists beyond six weeks, often with an idiopathic or autoimmune connection.

Anaphalaxis

Life-threatening allergic reaction that can present with difficulty breathing, swelling of face, throat, and tongue, and rapid heartbeat. Can be triggered by allergens.

Dermatographism

Characterized by raised, discolored markings that appear after stroking or scratching the skin.

Contact

Arises when the skin comes in contact with an allergen or irritant (often latex, specific chemicals, plants like poison ivy, and insect bites).

Aquagenic

Rare condition triggered by contact with water, regardless of its temperature.

Cholinergic

Triggered by an increase in body temperature, such as during exercise, hot showers, or emotional stress.

