

Your guide to understanding chronic hives

This guide can help you find answers and navigate life with chronic hives. Chronic hives can happen because of a specific trigger or without one.

Living with chronic hives can be a challenge. Over 400,000 people struggle with some form of chronic hives in the US and are still looking for relief.

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What is chronic hives?

Chronic hives can happen because of a specific trigger or without one. They can persist over time, though the patterns may vary. Even when symptoms improve, chronic hives can return.

What are the types of chronic hives?

1. **Chronic spontaneous urticaria** (also called chronic hives with no known external trigger) isn't caused by an allergy or external trigger, hives appear suddenly, and come and go without warning. Chronic hives symptoms last for more than 6 weeks.

2. **Chronic inducible urticaria** (also called chronic hives with triggers) includes multiple types of chronic hives that differ based on what trigger causes them to appear. Triggers can include heat, cold, pressure on the skin, exercise, sunlight, water, or vibration. Hives will typically appear shortly after exposure.

   - **Symptomatic dermographism:** The most common form of chronic hives with triggers is **symptomatic dermographism**. It's also called "chronic hives from scratching or rubbing" and it affects more than 70% of people with chronic hives with triggers. Scratching or rubbing on the skin may cause raised, red, itchy lines to appear within minutes. For some people, even everyday things like tight clothing that rubs against the skin can trigger hives or itching.

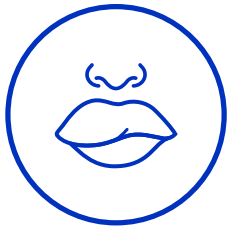


What are the physical symptoms of chronic hives?



Itchy hives

Red or skin-colored, raised, itchy bumps on the outer layer of skin that usually resolve within 30 minutes to 24 hours. They can appear and disappear daily or almost daily, with or without warning.



Swelling

Severe swelling, also called angioedema, occurs in deeper layers of skin on the lips, eyelids, hands, feet, and other areas. It can last up to 72 hours. Approximately 40% to 50% of people with chronic spontaneous urticaria experience swelling.



Who is impacted by chronic hives?

Chronic hives affects some people more than others



Over 400,000 people struggle with some form of chronic hives in the US and are still looking for relief.



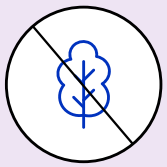
Women are nearly 2x more likely to experience chronic hives than men.

What makes chronic spontaneous urticaria (CSU) different?

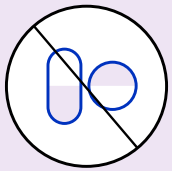
Unlike other forms of chronic hives, CSU is not triggered by external factors

It's natural to look for what causes your chronic hives. But with CSU, what you ate, wore, or touched does not start or trigger flares.

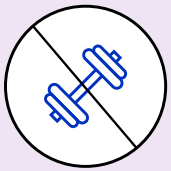
The factors below do not trigger flares, but some of them may worsen symptoms for certain people:

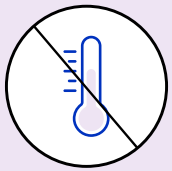

Allergies


Friction


Certain drugs


Stress


Exercise


Temperature



What makes chronic inducible urticaria different?

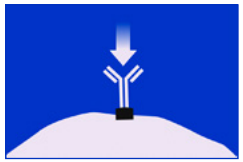
Unlike CSU, chronic inducible urticaria is triggered by external factors. Triggers can include:

- Heat
- Cold
- Pressure on the skin
- Exercise
- Sunlight
- Water
- Vibration



If you've been diagnosed with chronic hives with triggers, avoiding those triggers may not always be possible.

An overactive immune system can be a cause of your chronic hives



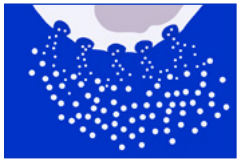
1. An overactive immune system

While the exact cause of your chronic hives is unknown, it's believed to start with the immune system becoming overactive by unknown internal causes or external triggers.



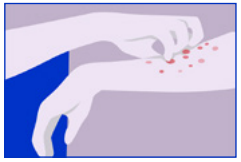
2. Dysregulated immune responses

Like a chain reaction, the mistaken signal is passed through the immune cells.



3. Histamine release

The signal causes the cells to release a large amount of histamine.



4. Symptoms

The result is the symptoms of chronic hives, including hives, itch, and severe swelling under the skin (angioedema).



Knowing that your chronic hives is linked to an overactive immune system can help you have a more productive discussion with your health care provider.

If you think you might have a type of chronic hives, you should see an allergist or dermatologist, specialists who are experienced in treating this condition.

Your struggles with chronic hives are real



The impact of chronic hives goes beyond symptoms like itch and swelling. It can affect pretty much every aspect of life.



Are you feeling depressed or anxious?

The symptoms of chronic hives come and go, but the emotional and mental toll may never go away. According to one survey, 70% of people living with chronic spontaneous urticaria reported having anxiety and/or depression.

> **“Not wanting to live in your own skin is truly one of the worst feelings.”**



Is itch keeping you up at night?

Sleep deprivation from intense itch is very common in chronic hives. This can lead to lack of energy, which impacts your daily activities.

> **“I would stay up until 4 or 5 in the morning some nights scratching my feet with a hairbrush.”**

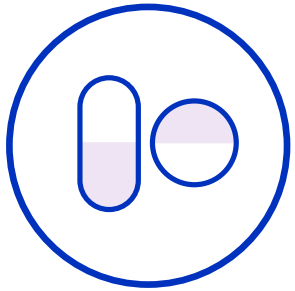
Your struggles with chronic hives are real (cont)



Did you miss work this week?

One out of 5 people have missed at least 1 hour of work this week due to their chronic spontaneous urticaria, according to a patient-reported survey.

> **"I would often call out sick or tell my manager I had to be offline for hours."**

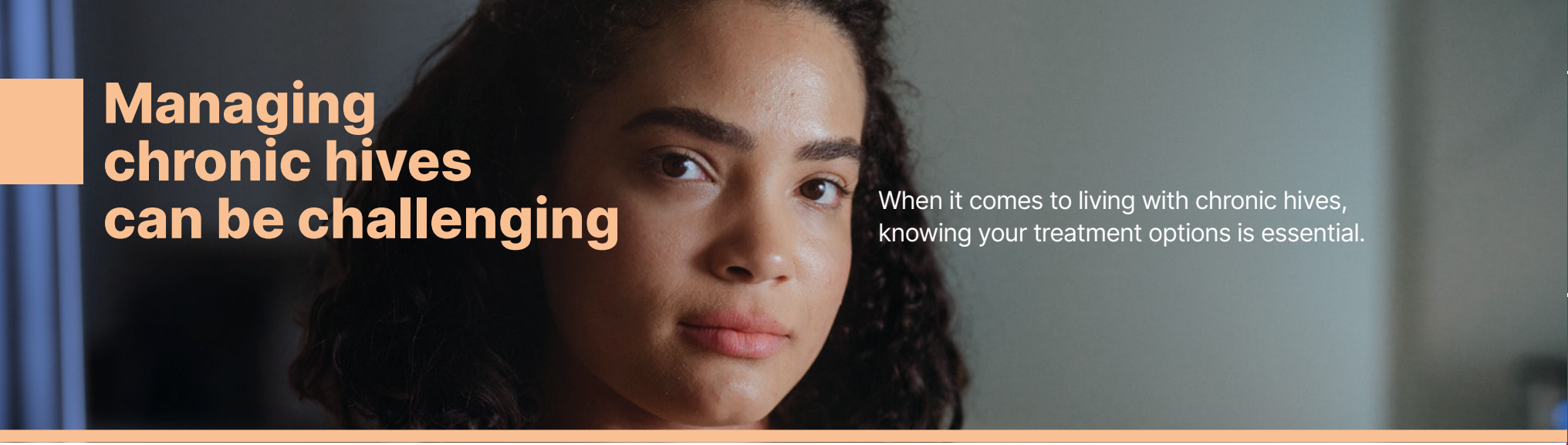


Are you tired of trying different antihistamines?

Many people with chronic hives still struggle with symptoms even while taking antihistamines.

> **"Antihistamines just make me feel like a zombie; I'm always in a daze."**





Managing chronic hives can be challenging

When it comes to living with chronic hives, knowing your treatment options is essential.

Management approaches today

Get informed on your options to have better discussions with your health care provider.

Antihistamines

Antihistamines work in the body to interrupt the effects of histamine, a chemical released by your immune system that can cause reactions like hives or swelling.

Typically, a health care provider will choose antihistamines as the first treatment for chronic hives. But if you're still having symptoms after being on antihistamines for a while, it's important to let your health care provider know.

Steroids

Steroids are a medicine used to relieve inflammation, but can only offer a temporary fix. Their long-term use can lead to serious side effects.

While fast symptom relief may feel most important, don't forget that chronic hives is just that, a chronic condition, and you need a solution that works long term.

Additional treatments

Additional treatments are sometimes prescribed to people who are still experiencing symptoms on antihistamines.

A 2023 analysis showed that <20% of people with chronic spontaneous urticaria who are still experiencing symptoms on antihistamines escalate to a second-line prescription treatment.

Make sure your health care provider knows it's never just hives

Your health care provider only knows what you tell them, so it's important to tell them everything.



Be detailed and specific

It's not always easy to find the right words for a condition with symptoms that can change everyday. Be as specific as possible when talking to your health care provider, because they rely on you to let them know what it's really like to live with chronic hives. Consider things such as the swelling, sleepless nights, anxiety, day-to-day issues, and missed events that may be going unseen.

Record everything

Track your symptoms any way you can. You can do this by taking photos of your hives, using a journal or calendar, or writing notes. Tracking your symptoms in different ways can be helpful. Some health care providers may look at pictures while others may rely more on a journal.

Avoid saying it's "fine"

What you're going through is far from fine, and you should feel free to express how your life has been affected when talking to your health care provider.

Stay focused

The physical symptoms of chronic hives come and go, but don't lose sight of the mental and emotional toll this condition has taken on you.

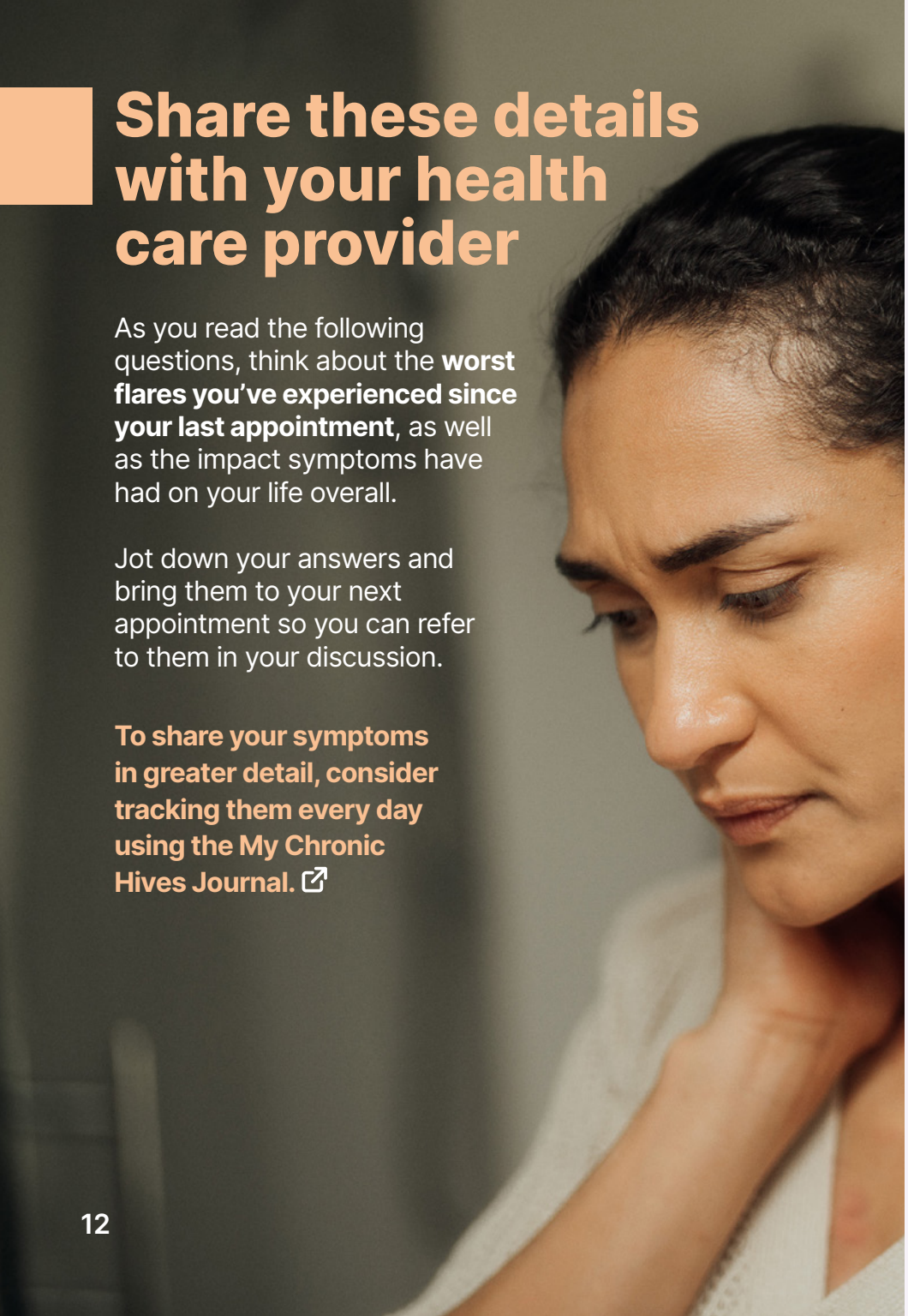
Get another perspective

Ask your partner or family member about your chronic hives symptoms and the impact it's had on their life as well as yours. Their perspective could provide insights that you or your health care provider haven't thought of.

Come to your appointment prepared

If you're having a hard time explaining the issue to your health care provider, there are resources available that can help you have more productive discussions.

Share these details with your health care provider



As you read the following questions, think about the **worst flares you've experienced since your last appointment**, as well as the impact symptoms have had on your life overall.

Jot down your answers and bring them to your next appointment so you can refer to them in your discussion.

To share your symptoms in greater detail, consider tracking them every day using the My Chronic Hives Journal.

Physical symptoms

1. What physical sensations did your hives cause? Itching? Something else?
2. Are your hives triggered by tight clothing? Light pressure? Scratching? Rubbing on the skin?
3. How much did your hives bother you? Not at all? A little? A lot?
4. If you had swelling (angioedema), where did it appear? On your lips? Eyelids? Hands? Feet? Elsewhere?
5. What physical sensations did your angioedema cause? Tingling? Burning? Tightness? Pain?

Impact on your life

1. How do symptoms interfere with your daily activities?
2. Do you avoid wearing certain types of clothing to prevent flares?
3. Do flares prevent you from falling asleep, disturb your sleep, or cause you to feel fatigued?
4. Have you felt embarrassed about your symptoms? Which ones? Can you describe your feelings?
5. How many hours or days of work have you missed due to your symptoms?
6. Has living with symptoms left you feeling anxious or depressed? Can you describe your feelings?
7. How has living with your symptoms affected your relationships with others?



Glossary

Click or tap any underlined word to go back to the page where it first appears.

Learn the terminology

Understanding the right words to use can help guide your conversation about chronic hives with your health care provider.

Angioedema: Severe swelling that occurs in deeper layers of skin, commonly in the eyes and lips. This happens in 40% to 50% of people living with chronic spontaneous urticaria.

Antihistamines: A medication that works in the body to interrupt the effects of histamine, a chemical released by the immune system that can cause reactions like hives or swelling. For ~50% of people with chronic spontaneous urticaria, antihistamines alone are not enough.

Chronic: A type of condition that occurs for a long period of time or comes back frequently.

Chronic Inducible Urticaria (CIndU): There are multiple types of CIndU based on what triggers causes them to appear. Triggers can include things like cold, heat, pressure on the skin, sunlight, or friction.

Chronic Spontaneous Urticaria (CSU): Also called chronic hives with no known external trigger, is a recurring condition that leads to discomfort, pain, and swelling for more than 6 weeks. CSU isn't caused by an allergy.

External Trigger: Identifiable triggers that come from outside of the body (such as pressure on the skin, heat, cold, certain foods, or drugs) that can lead to a reaction in the immune system. Some may worsen chronic hives symptoms in certain individuals, but they do not start the flares.

Histamine: A chemical released by the immune system that can cause reactions like hives or swelling, typically associated with allergic reactions.

Hives: Red or skin-colored raised, itchy bumps that appear on the outer layer of skin and can vary in size, shape, and color.

Immune System: The body's defense system. It is a complex network of organs, cells, proteins, and chemicals that work together to defend the body against infection and other diseases while protecting the body's own cells.

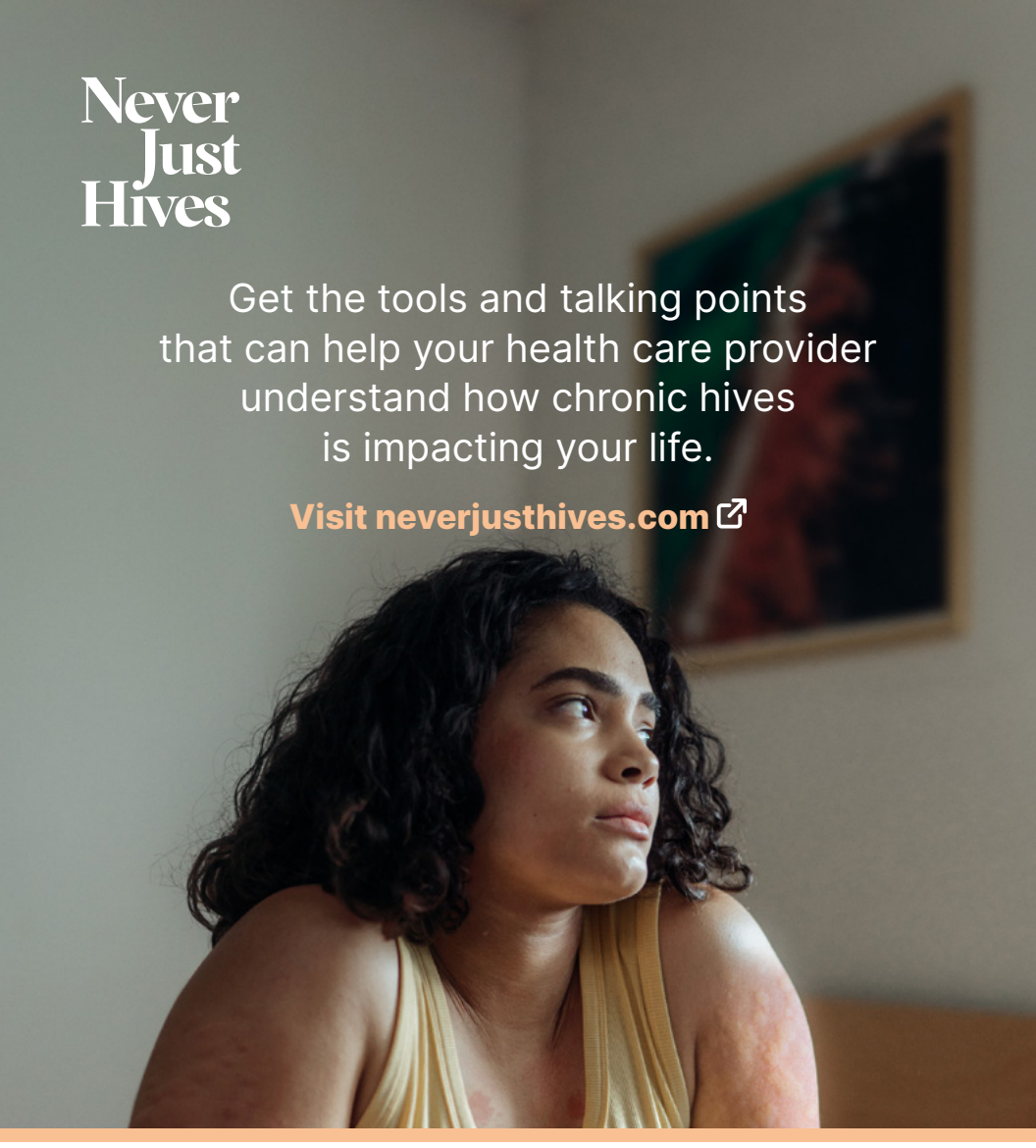
Inflammation: The body's defense against injury and infection. It is the process by which the immune system recognizes and removes harmful and foreign substances and begins the healing process.

Second-line prescription treatment: Treatment that is given when initial treatment (first-line prescription treatment) doesn't work or stops working.

Steroids: A medicine used to relieve inflammation.

Symptomatic dermographism: This is the most common form of trigger-induced hives. It's a common skin reaction where raised, itchy welts and redness appear quickly after the skin is scratched, rubbed, or pressed.

Urticaria: A skin condition that causes itchy, raised welts and bumps (hives). It is also known to cause swelling, which can be painful.



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