

Chapter 4:

Urticarias



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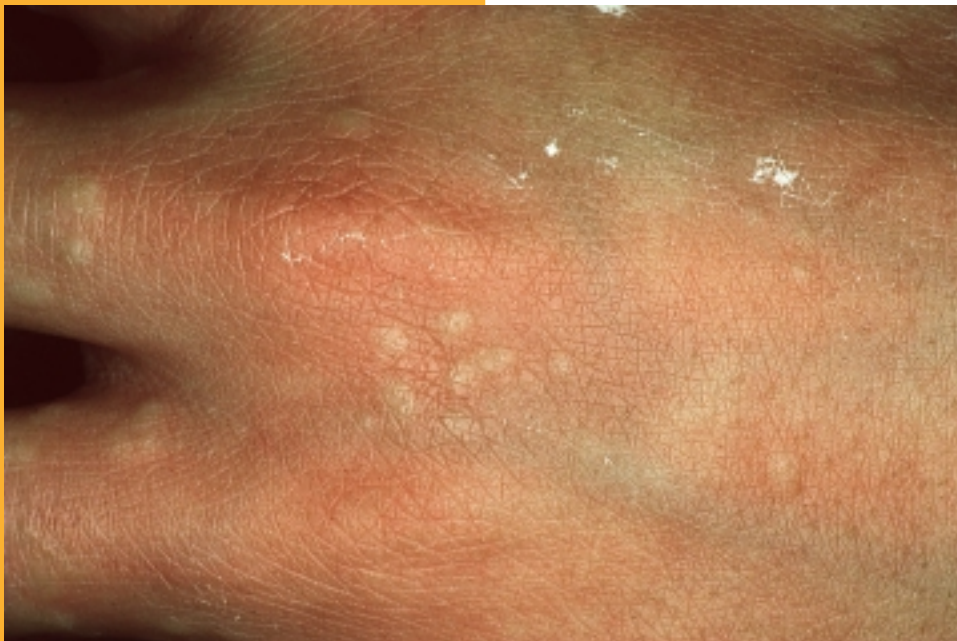
basic lesion

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4.1 Contact urticarias



Latex contact urticaria

Urticarial weals occurring within minutes of putting on surgical latex gloves. These weals can spread beyond the actual site of contact because this is an immunoallergic urticaria (specific IgE are sometimes present). Generalized urticaria with systemic symptoms can therefore occur: allergic rhinitis, conjunctivitis, asthma-like attacks, anaphylactic shock, etc.

Basic Lesions: Dermal Papules

Causes: Chemical Agents



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Prick test with latex

Diagnosis of latex contact urticaria: the prick test is performed with a lancet, using incubation liquid from the suspected latex gloves.

Basic Lesions: Dermal Papules

Causes: Chemical Agents



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Provocative use test with latex gloves

In cases of doubt (prick test difficult to interpret), a provocation test can be performed, if necessary with the suspected glove. This will always be done initially with a finger-stall, which is slipped onto a moistened finger for 10 min. The provocation test must always be done in a hospital environment.

Basic Lesions: Erythematous Macule; Dermal Papules

Causes: Chemical Agents



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4.2 Physical urticarias



Dermographism

Drawing on the skin with a blunt tip produces a linear erythema with an oedematous component. The dermographism appears 5 to 10 min after the rubbing. It can be isolated or associated with chronic idiopathic urticaria.

Basic Lesions: Erythematous Macule; Dermal Papules

Causes: Mechanical Factors



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Pressure urticaria

Very itchy deep oedema occurring several hours (6 to 12 hours) after strong pressure on a precise area, e.g. on palmar side. Feet can be affected after walking, as can buttocks after prolonged sitting.

Basic Lesions: Dermal Papules

Causes: Mechanical Factors



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Cold urticaria

Eruption triggered by cold: the application of an ice-cube for 3 to 10 min systematically reproduces an urticarial wheal. Nevertheless, in the present case it would be appropriate to perform a second test to eliminate aquagenic urticaria (with immersion of one hand in water at ambient temperature).

Basic Lesions: Erythematous Macule; Dermal Papules

Causes: Cold



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Solar urticaria

This very rare variant of urticaria occurs within minutes on exposure to sunlight. The eruption can persist for three to four hours. Photobiological investigation very easily confirms the diagnosis (photosensitivity test positive with UVA and/or UVB).

Basic Lesions: Dermal Papules

Causes: Sunlight, Ultraviolet Radiation



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4.3 Common urticarias (medicines, food, idiopathic)



Urticated weals

Eruption of oedematous urticated weals which can coalesce into broad patches. Itching is constant and can prevent sleep. This urticaria can be the first sign of anaphylactic shock.

Basic Lesions: Dermal Papules

Causes: Chemical Agents



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Papular urticaria

Urticarial weals spread symmetrically over the body, most often blamed on medicines.

Specific foods can sometimes trigger this type of urticaria (acute urticaria). Strawberries, shellfish, fish, certain cereals, milk, eggs, and some particular food additives are most frequently the cause.

The diagnosis is based mainly on provocation tests (withdrawal and reintroduction of the suspected medicine or food).

Basic Lesions: Erythematous Macule; Dermal Papules

Causes: Chemical Agents



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Figured urticaria

The urticarial papules describe curlicues or geographical shapes. In this case, the cause would most often be a drug (aspirin, codeine, penicillin, etc.). Again, a withdrawal test with re-introduction, if appropriate, makes it possible to reach an exact diagnosis.

Basic Lesions: Erythematous Macule; Dermal Papules

Causes: Chemical Agents



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Hereditary angio-oedema

Not particularly itchy, deep urticaria mainly affecting the face (particularly eyelids and lips), the glottis, and even the larynx. This is an emergency which requires rapid therapeutic intervention (adrenaline and corticosteroids in particular). Iatrogenic causes are not uncommon.

Basic Lesions: Dermal Papules

Causes: None specific



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Urticarial vasculitis

Combination of urticaria with lesions of leucocytoclastic vasculitis. The urticarial lesions are more fixed than in classical urticaria. They last for 2 to 3 days and are frequently accompanied by joint pains and by fever. Reduced complement levels in blood are observed.

Basic Lesions: Erythematous Macule; Dermal Papules

Causes: None specific



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