The Royal College of Paediatrics and Child Health (RCPCH) have written a series of leaflets to help children, young people and their families cope with allergic conditions. This leaflet describes the care that children and young people with urticaria +/- angio-oedema should receive.

If you find there are lots of terms on this leaflet that you don’t understand, you can download a copy of ‘Understanding the Language of Allergy’ from the RCPCH website www.rcpch.ac.uk/allergy.

| What is urticaria? | Urticaria is common; it is an itchy rash also known as hives or nettle rash. The short-lived swellings of urticaria are known as weals, which usually disappear within a day. The weals of can be different sizes and may be flesh-coloured, pink or red. They usually look like nettle stings. Once they disappear new weals may appear in other areas. The most common cause in children is a response to a viral infection.

If the swellings occur without a rash, and last longer, they may be angio-oedema. There is also leaflet for angio-oedema on the RCPCH website: www.rcpch.ac.uk/allergy. |
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| What you should do for urticaria? | • Give the child an antihistamine  
• Repeat the dose as often as is necessary  

Seek advice from a health professional if the symptoms  
• May be due to a food allergy (e.g. symptoms occur within an hour of eating). There is also a leaflet on food allergy.  
• Continue to appear for more than 6 weeks (chronic urticaria) |
| What a health professional should do initially? | • Give the child an antihistamine in an adequate dose  
• Monitor the response to the antihistamine  
• Refer on for further assessment if necessary |
| What the health professional should do? | The specialist should:  
• Make an assessment of the child by taking a detailed clinical history  

You may be asked questions about any symptoms that  
• include the stomach  
• result from drugs, sunlight, the cold, foods  
• get worse in hotter climates, in times of stress or with infections  

The specialist may:  
• Perform some tests that might include a skin prick test and a blood test  
• Refer you to another specialist for further assessment |
What the specialist should do:
- Perform some additional blood tests or challenge tests
- Provide additional treatment, depending on the diagnosis
- Advise about the need for immunomodulatory therapy
- Provide you with details on patient support groups to help you manage the condition

Where can you get further information?
Take a look at the RCPCH website: www.rcpch.ac.uk/allergy there are some resources here.

These websites might also help:
- Primary Immunodeficiency Association (PiA): www.pia.org.uk
- British Association of Dermatologists: www.bad.org.uk/site/740/default.aspx