

## Chronic Urticaria & Angioedema Treatment Pathway

PRIMARY CARE ASSESSMENT – see <http://cks.nice.org.uk/urticaria#!topicsummary>

Non-sedating oral antihistamine (cetirizine or loratadine - at licensed dose)

Non-sedating oral antihistamine (cetirizine or loratadine - at higher dose)  
(see “High dose antihistamines in chronic idiopathic urticaria/angiodema” guideline)

REFERRAL TO UCLH ALLERGY / DERMATOLOGY SERVICE

Treatment choice determined by co-morbidities,  
tolerability, existing renal or hepatic impairment,  
concomitant medication and patient preference

Consider ciclosporin  
(po 1 - 4.5 mg/kg daily) for up to 3 months at  
maximal optimal dose  
(see “Ciclosporin in dermatology” guideline)  
*blood monitoring required before/during treatment*

*Consider trying  
other treatment  
if first treatment fails*

Consider omalizumab  
(s/c 300mg monthly) for 4-6 months  
(see UCLH Omalizumab protocol 2015)

Consider repeat course of omalizumab  
(s/c 300g monthly) for 4-6 months  
(if patient responds but relapses after treatment  
stopped)

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