

HIVES / WHEALS / WEALS / NETTLE RASH

Urticaria

CATEGORY:

Reactions / Rashes

LOOKS LIKE:

Raised, puffy areas of skin; red, pale, or skin-coloured; varies in shape and size

FEELS LIKE:

Itchy; swollen

OUTLOOK:

Mostly goes away within 6 weeks; can last months/years in some cases; known triggers should be avoided

LOCATION:

Any body surface



WHAT IT LOOKS LIKE -



Raised urticaria resembling nettle stings



Raised hives on a limb



Urticaria sometimes look like rings



Urticaria triggered by cold exposure (ice cube)



Angioedema (deeper swelling) of the lips



Eyelid swelling from angioedema

What is it?

Urticaria is a common condition characterised by raised, itchy areas of skin (also called **hives**).

It is estimated that up to 1 in 5 people get hives at some point in their lives.

Urticaria does not spread from person-to-person (non-contagious) and is not cancerous.

Urticaria

CAUSES -

Urticaria develops when immune cells in your skin are triggered to release chemicals (eg, histamine) which cause itch and swelling in that area. While they can occur due to an allergic reaction, **not all hives are caused by allergies.**

Common triggers:

- Infections eg, viral or bacterial illness
- Medications eg, antibiotics, painkillers
- Food allergy eg, milk, eggs, peanuts
- Physical contact eg, stinging nettle plant, latex allergy, animal saliva allergy
- Bee and wasp stings.

Sometimes, urticaria can be triggered by:

- Exposure to heat or cold
- Physical exertion
- Stress or strong emotions
- · Vibration, scratching, or pressure on skin
- Exposure to sunlight or water (rare).

In many cases, an exact trigger cannot be identified.

People with allergies or autoimmune diseases (eg, lupus, coeliac disease, Hashimoto thyroiditis) are more likely to develop long-lasting urticaria.

SYMPTOMS -

Hives can come up anywhere and typically have the following features:

- Puffy or raised areas of skin
- Very itchy and may disturb sleep
- May look reddish (especially on lighter skin), pale, or the same colour as the surrounding skin
- Vary in size, from pinpoint to giant patches
- Vary in shape eg, round, lines, or irregular
- **Short-lived** (it can be useful to take a photo to show your doctor later).

While individual hives are usually gone within a day, new ones may appear. If this happens daily for more than 6 weeks, it is called **chronic urticaria.**

COMPLICATIONS -

Hives can sometimes occur with the following:

- Angioedema occurs in the deeper layers of skin or mucous membranes (eg, lips, mouth eyes) and can sometimes be serious
- **Anaphylaxis** a rare but very serious allergic reaction.

If the airways are blocked by swelling, these conditions can be life-threatening, so **seek** immediate medical attention if you experience:

- Lip, tongue, or throat swelling
- Cough, wheeze, or trouble breathing
- Voice hoarseness or throat tightness
- Light-headedness or dizziness
- · Abdominal pain, nausea, or vomiting.

DIAGNOSIS -

A healthcare professional can usually diagnose urticaria by asking a few questions and **examining your skin**. Blood tests may be used to rule out other underlying diseases.

If allergies are suspected, your doctor may request **allergy tests** (eg, skin prick testing), and you may be referred to an allergy specialist.

TREATMENT AND PREVENTION -

Hives are mainly treated with **antihistamine pills** eg, cetirizine. Treatment is not always needed in mild cases.

Avoid known triggers where possible.

If you have chronic urticaria (for >6 weeks), you may be referred to a dermatologist or an allergy specialist for further tests and treatment.

OUTCOME -

Urticaria are generally harmless and resolve within 6 weeks for the majority of people.

Symptoms are treatable. In some cases, hives keep coming back for months or years.





https://dermnetnz.org/topics/ urticaria-an-overview

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