Oral pulse prednisolone therapy as a treatment of chronic spontaneous urticaria

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Background: chronic urticaria refers to urticaria that occurs intermittently for at least six weeks, three times per week or typically most of the days of the week. It can be classified as chronic inducible and chronic spontaneous urticaria (CSU). The latter type is that one which occurs without an external trigger and instead via an endogenous mechanism. Many guidelines for the management of CSU have been built and most of them included antihistamines, updosing of antihistamines, dapsone, colchicines, cyclosporine A and recently omalizumab. Maintenance steroid therapy was avoided by most of the authors because of its well-known hazards.

Aim: The aim of this study was to evaluate the efficacy of oral prednisolone pulse therapy as a method of treatment and control of CSU.

Methods: This retrospective study was conducted on 420 patients (377 females & 43 males) diagnosed to have CSU and all patients reported a failure of the traditional methods. They received oral pulse prednisolone therapy for 24 weeks. Follow up was done at 2, 12 and 24 weeks and assessment was via Urticaria Activity score (UAS)

Results: After 2 weeks of the treatment 19%, 69%, 9% & 3% of the patients showed 0,1,2,3 UAS respectively. After 12 weeks of the treatment 55%, 38%, 5%, 2% of the patients showed 0,1,2,3 UAS respectively. At the 24th week of treatment, 90%, 0%, 6%, 4% of the patients showed 0,1,2,3 UAS respectively. The common adverse effect was gastric upsets and 3 cases accused the treatment to be the cause of the appearance of their Diabetes Mellitus. Conclusion: oral pulse prednisolone therapy may be an affordable non-hazardous treatment for chronic spontaneous urticaria.

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