Limited evidence for effectiveness of H1-antihistamines for chronic spontaneous urticaria

**Clinical Question**
How effective are H1-antihistamines for chronic spontaneous urticaria?

**Bottom Line**
For general use, 10 mg once daily of cetirizine for short-term (up to 2 weeks) and intermediate-term (up to 3 months) duration was effective in completely suppressing urticaria, although not in all individuals. Some benefit might be associated with use of desloratadine at 5 mg daily for at least an intermediate term and at 20 mg daily in the short term. Levocetirizine at 5 mg daily was effective for complete suppression in the intermediate term but not in the short term. A higher dose of 20 mg daily was effective in the short term, but 10 mg daily was not. Adverse events, such as headache or dry mouth, were tolerable with most antihistamines. Evidence was less clear for improvement in quality of life (e.g. reduction in sleep disturbance from itching, less distress from the appearance of hives) as many studies did not address this. It was not possible to say whether one antihistamine worked better than all the rest, as there was not head-to-head evidence for every possible treatment comparison.

**Caveat**
The quality of the evidence was affected by the small number of studies in each comparison and the small sample size for many of the outcomes, prompting downgrading the quality of evidence for imprecision.

**Context**
Chronic spontaneous urticaria is a condition characterised by a rash of red itchy raised wheals or hives, which appear for no identifiable reason. Other names include chronic idiopathic or chronic ordinary urticaria. 'Chronic' indicates that the condition has continued for at least six weeks.

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