

## Mini Review

# A Mind-Body Holistic Approach to Help Manage Chronic Urticaria

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Chronic urticaria is defined as hives that last longer than six weeks [1,2]. They are divided into inducible and spontaneous urticaria. The former includes cold exposure, cholinergic (exercise related or heat exposure), aquagenic, or related to pressure or vibration. Spontaneous urticaria is unrelated to a known cause. It is estimated nearly 1.5 million people in the United States are affected by the itchy hives. About 40% of people have urticaria and angioedema<sup>1</sup>.

The current recommendation for the treatment of chronic urticaria begins with exploring the possible cause of urticaria. If the cause is not found, the treatment of choice begins with the daily use of H1 or H2 antihistamine. There is an option of doubling the dose of H2 antihistamine if a patient failed to respond with a standard dose of H2 antihistamine [3,4]. Recently, the use of Omalizumab has been recommended in a selected group of patients if they failed to respond to antihistamine [5].

## IS THERE A MISSING LINK IN THE MANAGEMENT OF CHRONIC URTICARIA?

Despite the available medications listed above, our survey showed nearly 80% of patients with chronic urticaria remain unhappy. The most frustrated aspect of the chronic hive is that patients could not effectively stop repeated scratching. Scratching admittedly is a natural defense of the patients if they found the itchy hives appear. Unfortunately, the habitual scratch is caused by two factors: First, it is our natural tendency to scratch the hives hoping it will disappear or the itch could be minimized; second, it is likely the force of scratch will enhance release of histamine or cytokines under the skin as in the case of atopic dermatitis [6]. The result of the perpetual scratch would result in more scratch till the surface of skin is broken.

In our survey of our patients with chronic hives, almost 90% of our patients expressed their frustration that they were unable to control the scratch due to itch. Further, they felt itching seen by others is embarrassing in the school or in public places. The worse off all, the medications have limited effect on their perpetual scratching. Clinically, we very rarely taught patients how not to scratch when hives appeared.

## A NEW STRATEGY TO HALT HABITUAL SCRATCH IN CHRONIC URTICARIA

When we found all the medical advices and medications could not stop habitual scratch in many patients, we thought a holistic mind-body approach may be more helpful to our patients.

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Nearly 12 years ago, we first taught patients with atopic dermatitis (AD) about this technique and with a resounding success [7]. We then adapted the teaching for patients with chronic urticaria about 10 years ago.

The steps of the strategy are as follows:

- 1). When the itch overwhelmed the patient, we first let patient imagine the scenario that a "Bad energy" is flowing randomly in the body non-stop. We first explained that if s/he starts scratching, it only worsens the flow of the bad energy.
- 2). Explain to the patient that we must invent a way to let this "bad energy" flow out of the body without using a scratch.
- 3). Instruct patient to bring both hands together, clasp them and begin to squeeze as hard as s/he can till the knuckles turn white.
- 4). At that moment, allow patient to imagine the hard squeeze is moving bad energy and let it flow from shoulders, down to upper arms, forearms, hands and finally the bad energy is squeezed out from the fingertips.
- 5). Teach patient that each attempt of squeeze should last at least for 15 seconds. It is done by calling out one-one thousand, two-two thousands, three-three thousands..... All the way to fifteen-fifteen thousands, then allow the hands to relax.
- 6). When the urge of scratch returns due to recurrence of itch, patient needs to repeat 15 seconds squeeze again. This exercise can continue whenever urge of scratch returns.

We have formally registered a total of 182 patients with chronic urticaria for this exercise. After six months, we noticed 155 patients (85%) still remembered to practice the squeeze exercise. Among them, 40% of them needed this exercise less than once a week. Meanwhile, we found the control of itchy hives was very dramatic! 75% of them only used antihistamine on as needed basis. 20% were completely cleared of chronic hives. Only 5% still struggled with frequent hives.

Overall, the feedback we received from the patients was uniformly positive. Only few of them got secondary skin infection

due to scratch. That was far better than before when nearly all of them needed local antibiotics due to broken skin after intense scratch. They all unanimously agreed the squeeze method significantly helped manage their chronic hives.

They also commented the overall usefulness of squeeze method as follows:

- a). It is easy to practice
- b). It could be initiated any time, any place without causing attention of people nearby (classroom or office)
- c). It requires without help of medications.

## CONCLUSION

The nagging problem of incessant of habitual scratch often compromised the effect of medical management, especially with drugs on chronic hives. The success of our study made us wonder if there is a missing link in our treatment strategy of chronic urticaria. Addition of mind-body technique like the "Hand squeeze" method may help fill the void. It allows patients to manage the habitual scratch more effectively. The best benefit of this approach, however, is allowing the patients to realize they could manage the problem with relative ease by themselves, as we also learned when we taught patient with AD previously.

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