

Evidence summary

Chinese medicine for chronic urticaria

This summary of key findings from *Volume 3: Chronic urticaria*¹ of the Evidence-based Clinical Chinese Medicine monograph series outlines:

- what chronic urticaria is
- current treatments
- findings from research into classical Chinese medicine literature and modern Chinese medicine clinical studies.

What is chronic urticaria?

Urticaria is a skin rash comprising red, raised wheals that vary in size.² The rash is often accompanied by an itch and a burning sensation. Symptoms generally resolve within 24 hours.³ Chronic urticaria is diagnosed when the sudden onset of symptoms continues for more than six weeks.³ Chronic urticaria may result from exposure to sunlight, heat, cold, water, vibration or pressure, or there may be no known cause.⁴

Current treatments

Antihistamines are an effective treatment for chronic urticaria, and doctors usually prescribe non-sedating second-generation antihistamines.⁵ For people who are very distressed from the rash, a short course of steroids may be considered.⁶

Chinese medicine treatment options include Chinese herbal medicine, body acupuncture, ear acupuncture, cupping, and dietary and lifestyle advice. Chinese medicine practitioners base their treatments on the patient's symptoms, relevant clinical textbooks and guidelines, research and clinical experience.

Classical Chinese medicine literature

The *Encyclopedia of Traditional Chinese Medicine (Zhong Hua Yi Dian)* is a large and important collection of Chinese medicine books. It includes 533 citations that describe treating a skin rash that

resembles chronic urticaria with Chinese herbal medicine, including decoctions, powders and liquid formulas. While the *Encyclopedia of Traditional Chinese Medicine* also describes using acupuncture and moxibustion to treat chronic skin conditions like urticaria, they are much less frequently cited.

Xiao feng san is the only Chinese herbal medicine formula recommended in clinical textbooks and guidelines, mentioned in the classical literature and tested in modern clinical studies. Likewise, acupuncture is mentioned in all three sources.

Modern Chinese medicine clinical studies

To write the *Chronic urticaria*¹ monograph, nine biomedical databases (five English-language and four Chinese-language) were searched in May 2014. This search found 132 relevant studies of Chinese medicine for chronic urticaria. Of these, 83 were randomised controlled trials, six were non-randomised controlled clinical trials and 43 were non-controlled studies.

An additional search of the International Clinical Trials Registry Platform in June 2022 identified three new relevant registered randomised controlled trials of Chinese herbal medicine.

Chinese herbal medicine

Most studies (73) were randomised controlled trials of oral Chinese herbal medicine.

Studies that reported on comparisons that clinicians consider important (e.g. oral Chinese herbal medicine compared with antihistamines) showed oral Chinese herbal medicine did not reduce symptom severity more than second-generation antihistamines. However, it did increase the chance of improving symptoms by at least 30% and reduce the chance of relapse.

Oral Chinese herbal medicines combined with antihistamines reduced symptom severity, increased the chance of improving symptoms by at least 30%, improved health-related quality of life and reduced the chance of relapse.

The number of adverse events with oral Chinese herbal medicine was lower in trial participants who received oral CHM than in those who received antihistamines. Some participants experienced mild gastrointestinal adverse events.

Results were analysed for two of the three new relevant registered randomised controlled trials of Chinese herbal medicine. Chinese herbal medicine formulas were more effective than placebo for some outcome measures (e.g. reducing symptom severity and recurrence) but not others (e.g. improving health-related quality of life).

Acupuncture and related therapies

The original database search found 10 relevant studies of acupuncture therapies for insomnia. Of these, seven were randomised controlled trials. Results showed acupuncture therapies were not effective when used alone, but they did increase the chance of reducing symptoms by 30% or more when combined with antihistamines.

No new relevant registered randomised controlled trials of acupuncture for chronic urticaria were identified since 2014.

Key messages

- Chinese medicine treatments have been used throughout history to treat urticaria-like skin rashes.
- Treatment approaches have evolved over time.
- Chinese herbal medicine may reduce symptoms and improve quality of life when used with antihistamines.
- Acupuncture may enhance the effects of antihistamines.
- Clinicians and patients should discuss the potential risks and benefits of treatment, so patients can make informed choices about their care.

For more information

You can find out more about Chinese medicine for chronic urticaria in the book *Evidence-based Clinical Chinese Medicine Volume 3: Chronic urticaria*¹ from <https://doi.org/10.1142/9946>

To find out more about Chinese medicine research at the China–Australia International Centre for Chinese Medicine, visit www.rmit.edu.au/research/centres-collaborations/multi-partner-collaborations/cairccm

References

1. Coyle M, Yu J. (2017) *Evidence-based Clinical Chinese Medicine. Volume 3: Chronic urticaria*. Xue CC, Lu C, editors. World Scientific; Singapore.
2. Powell RJ, Du Toit GL, Siddique N, et al. (2007) BSACI guidelines for the management of chronic urticaria and angio-oedema. *Clin Exp Allergy* 37(5): 631–50.
3. Cho YT, Chan TC, Lee CH, et al. (2022) Taiwanese dermatological association consensus for the definition, classification, diagnosis, and management of urticaria: A 2021 update. *J Formos Med Assoc* 121(7): 1191–203.
4. Zuberbier T, Aberer W, Asero R, et al. (2014) The EAACI/GA(2) LEN/EDF/WAO Guideline for the definition, classification, diagnosis, and management of urticaria: The 2013 revision and update. *Allergy* 69(7): 868–887.
5. Zuberbier T, Abdul Latiff AH, Abuzakouk M, et al. (2022) The international EAACI/GA²LEN/EuroGuiDerm/APAAACI guideline for the definition, classification, diagnosis, and management of urticaria. *Allergy* 77(3): 734–66.
6. Ryan D, Tanno LK, Angier E, et al. (2022) Clinical review: The suggested management pathway for urticaria in primary care. *Clin Transl Allergy* 12(10): e12195.

Disclaimer

This evidence summary is not intended as a guide for self-medication or medical advice – patients should seek professional advice from qualified Chinese medicine practitioners.