

Hydroxyzine: Essential Therapy for Managing Chronic Pruritus

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Abstract

Pruritus, an intense urge to scratch, is common and often debilitating, affecting the quality of life by causing sleep disturbances, attention issues, and anxiety. Histamine plays a key role in pruritus. Chronic pruritus is prevalent, especially in the elderly, and management focuses on addressing underlying causes and symptom relief. Oral antihistamines and particularly hydroxyzine, are primary treatments. Hydroxyzine, a first-generation antihistamine, is effective for pruritus and has anxiolytic properties. Despite its sedative potential, it is well-tolerated, and its sustained-release formulation ensures consistent drug levels, improving adherence and outcomes. Clinical studies confirm the effectiveness of hydroxyzine in enhancing symptoms and quality of life in chronic pruritus patients. Up-dosing antihistamines may also be beneficial in managing pruritus.

Keywords: Antihistamines, Anxiety, Chronic pruritus, Hydroxyzine, Sustained release

INTRODUCTION

Pruritus is an uncomfortable sensation marked by an urge to scratch, making it the most prevalent clinical indication in dermatological practice.^[1] It can be localized or widespread and maybe a dermatological manifestation of any systemic disease.^[2] Pruritus can significantly impair psychosocial aspects of life, leading to sleep disturbances, attention problems, and anxiety. Histamine is a key mediator of pruritus in several disorders. Chronic pruritus (CP), which is initially linked to an underlying disease, may develop independently, over time, similar to chronic pain, requiring its own therapeutic approach.^[2,3] Pruritus is classified based on duration as acute (≤ 6 weeks) or chronic (> 6 weeks). It can be categorized based on mechanisms as pruritoceptive (dermatological itch), systemic, neuropathic, psychogenic, and mixed pruritus.^[1]

Epidemiologically, acute and chronic pruritus affect 8.4% and 13.5% of the population, respectively.^[1] Chronic pruritus has

a lifetime prevalence of 22%.^[2] The probability of chronic pruritus increases with age, affecting over 60% of adults aged ≥ 65 years, often due to skin aging, xerosis, comorbidities, and polypharmacy.^[1,2] Chronic pruritus is common in the general population and in those with skin or systemic diseases, significantly impacting quality of life (QoL).^[3] It is seen in patients with inflammatory skin diseases, metabolic disorders, liver and kidney diseases, infectious diseases, and neurological diseases.^[1] Furthermore, malignancy, psychiatric diseases, and several drugs can result in prolonged pruritus, necessitating a multifaceted treatment approach.

MANAGEMENT OF CHRONIC ITCH^[1]

Management focuses on identifying and treating underlying causes while providing symptomatic relief. The severity of pruritus should guide therapy choice, involving topical and systemic treatments. A detailed history and thorough examination are recommended for all patients with chronic pruritus, treatment often involves antihistamines.

HYDROXYZINE: PREFERRED ANTI-HISTAMINE FOR PRURITUS

Hydroxyzine, a first-generation H₁-antihistamine, is effective for treating pruritus from allergic conditions.

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It is also FDA-approved for anxiety.^[4] Its clinical utility is well-documented. Hydroxyzine is a member of the diphenylmethyl piperazine class of antihistamines. For adults with chronic pruritus, the recommended dose is 50 mg daily, up to 100–200 mg/day. For children, doses vary by age. For pruritus, treatment often starts at 25 mg before bed, increasing to 25 mg 3–4 times daily as needed.^[5]

MECHANISM OF ACTION

Hydroxyzine is a potent and selective H1 receptor inverse agonist, which accounts for its antihistamine and sedative effects. Hydroxyzine competes with histamine for active site binding [Figure 1a]. Unlike many first-generation antihistamines, it has a lower affinity for muscarinic acetylcholine receptors, reducing the risk of anticholinergic side effects.^[6] It crosses the blood-brain barrier, with a 30 mg dose resulting in 67.6% H1 receptor occupancy in the brain, correlating with sleepiness.^[7] Pharmacokinetically, hydroxyzine is rapidly absorbed and metabolized in the liver to cetirizine, its main metabolite, with higher concentrations found in the skin than plasma. It has a plasma half-life of 24 h in adults and 7.1 h in children.^[5]

BENEFITS OF SUSTAINED RELEASE FORMULATION^[5]

The sustained release formulation [Figure 1b]:

- Aids in maintaining consistent blood levels
- Enhances patient adherence by reducing dosing frequency
- Improves bioavailability
- Enhances patient health and QoL.

UP-DOSING OF ANTIHISTAMINE IN PRURITUS MANAGEMENT

In a study involving 178 patients with CP or chronic spontaneous urticaria (CSU), 138 patients (78%) required up-dosing of non-sedating H1-antihistamines due to persistent symptoms. A satisfactory response was seen in 41 patients (23%). Among those with weals or weals with angioedema, 80% of patients needed up-dosing, and 64% of those with angioedema only. Higher up-dosing led to side effects in 10% of patients. Up-dosing higher than fourfold appears effective and safe, reducing the need for third-line therapies by 49%.^[8]

A review by Guillen-Aguinaga *et al.* (2016), found cetirizine up-dosing effective in 53.8% of non-responsive CSU patients, improving pruritus without increased adverse reactions.^[9]

CONCLUSION

Chronic pruritus is a widespread condition that significantly impacts the quality of life and has serious psychological implications. Managing pruritus is challenging, especially when it is not linked to a primary skin disease. Second-generation antihistamines are often recommended as first-line therapy, but their effectiveness can vary. When these are insufficient, first-generation antihistamines such as hydroxyzine hydrochloride are suggested. Hydroxyzine is effective and well-tolerated, providing significant symptom relief and improved quality of life. Its sustained-release formulation ensures consistent symptom control over extended periods. In addition, up-dosing antihistamines may be beneficial in managing pruritus.

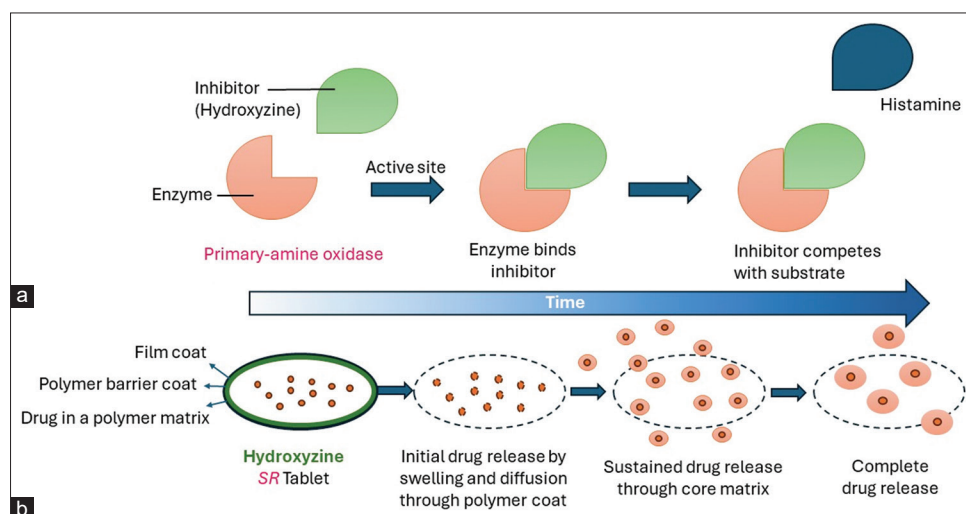


Figure 1: (a) Hydroxyzine competing with histamine for active site binding; (b) Drug release mechanism of hydroxyzine sustained-release tablet.^[5] (Adapted from Indian Medical Association. (2023). Hydroxyzine: An Effective Antihistamine and the Drug of Choice for Pruritus. <https://www.ima-india.org/ima/pdfdata/Hydroxyzine-An-Effective-Antihistamine-and-the-Drug-of-choice-for-Pruritus.pdf> (accessed 18 May 2024).^[5]

Table 1: Conditions where hydroxyzine 50 mg SR has been prescribed

Conditions where hydroxyzine 50 mg SR has been prescribed

- Acute generalized lichen planus
- Acute dermatitis
- Acute eczema
- Acute urticaria
- Airborne contact dermatitis
- Allergic contact dermatitis
- Atopic dermatitis
- Bullous pemphigoid
- Chronic idiopathic urticaria
- Chronic liver diseases
- Chronic prurigo
- Chronic urticaria
- Contact dermatitis
- Eczema
- Eczema with tinea
- Irritate contact dermatitis
- Lichen simplex chronicus
- Overweight patient with scabies, tinea, acute eczema
- Prurigo nodularis
- Prurigo simplex
- Psoriasis
- Senile pruritis
- Xerosis

EXPERT OPINION

Based on the expert opinion, all experts agreed both central and peripheral pathways are important for treating chronic itch, and hydroxyzine was their preferred choice of treatment due to its antipruritic and anxiolytic benefits [Figures 2a-d and Table 1].

What Treatment was Followed Before the Introduction of Hydroxyzine 50 mg SR?

Around 73% of doctors opined that before the introduction of Hydroxyzine 50 mg SR, the standard treatment regimen typically involved administering a night-time sedative antihistamine along with a daytime non-sedative antihistamine to manage chronic pruritus.

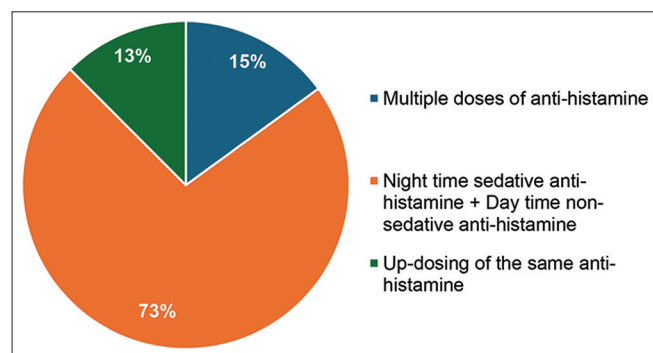


Figure 2a: Treatment regimen of chronic pruritus before the introduction of Hydroxyzine

In chronic Itch Conditions, Based on Your Experience with Hydroxyzine 50 mg SR, Will it Replace the Up-dosing of Second-generation Antihistamine?

Based on clinical experience, around 87% of doctors opined that Hydroxyzine 50 mg SR has shown potential to replace the up-dosing of second-generation antihistamines in managing chronic itch conditions.

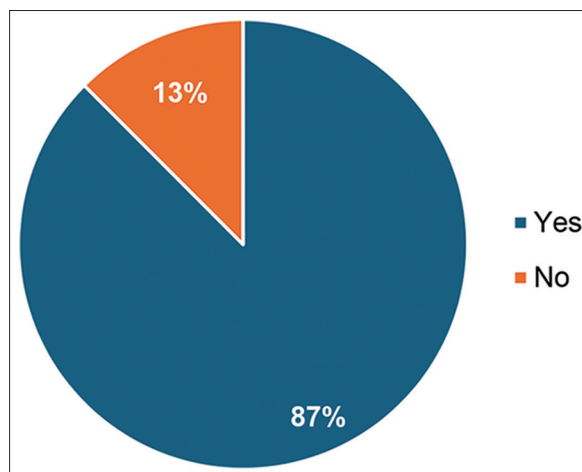


Figure 2b: Expert opinion on replacement of up-dosing of second-generation antihistamine with Hydroxyzine 50 mg SR

Which Benefit of Hydroxyzine 50 mg SR do you Find Most Useful in Treating the Above-mentioned Indication?

Based on experience, 78% of doctors found that Hydroxyzine 50 mg SR offers 24-h symptom control, convenient once-daily dosing, and less sedation, while 15% believed that Hydroxyzine 50 mg SR offered 24-h symptom control.

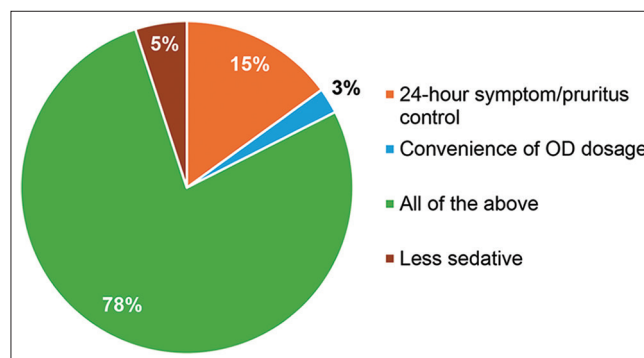


Figure 2c: Benefits of Hydroxyzine 50 mg SR in chronic pruritus

Do You Think Hydroxyzine 50 mg SR can be Recommended to Patients Suffering from Comorbid Conditions Such as Hypertension?

Around 90% of doctors agreed that Hydroxyzine 50 mg SR can be recommended to patients suffering from comorbid conditions such as hypertension.

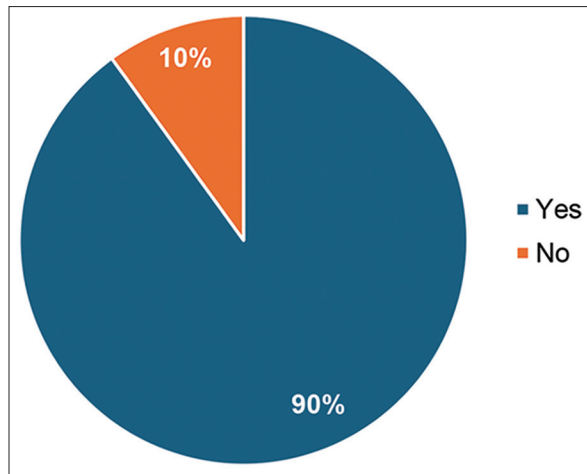


Figure 2d: Expert opinion on the recommendation of Hydroxyzine 50 mg SR to patients suffering from comorbid conditions such as hypertension

**1. Dr. Anvitha Chidanand, MD (Dermatology)
Nanjappa Multispeciality Hospital, Shivamogga,
Karnataka**

Hydroxyzine 50 mg is effective for conditions including urticaria, atopic dermatitis, prurigo nodularis, and senile pruritus, addressing issues such as persistent itching and quality of life impacts (anxiety, mood disturbances, stress, and sleep problems). Previously, I used nighttime sedatives and daytime non-sedative antihistamines, but Hydroxyzine 50 mg SR can replace up-dosing of second-generation antihistamines. It offers broad-spectrum action, less sedation, and anxiolytic benefits. I prefer BID dosing for senile pruritus and find it both effective and less sedative compared to alternatives. For chronic itch management, hydroxyzine, along with levocetirizine, is my preferred antihistamine. I would replace Hydroxyzine 10 mg with Hydroxyzine 50 mg SR in treatments.

**2. Dr. Vidya Ramesh, MBBS, DVD, Cosmetologist
Sparsha Hospital, Shivamogga, Karnataka**

Hydroxyzine 50 mg SR is particularly effective for chronic eczema and extensive tinea infections. It addresses continuous itching, anxiety-related quality of life impairments, mood swings, stress, and sleep difficulties associated with chronic pruritus. In some cases, a twice-daily dose is needed, such as in airborne contact dermatitis and eczema with tinea. It is both effective and less sedative compared to alternatives, providing added anxiolytic benefits. While levocetirizine is typically preferred, it can be replaced with Hydroxyzine 50 mg SR in certain cases. In addition, it is useful in acute pruritic conditions such as scabies and acute eczema. Despite comorbidities like hypertension, it can be recommended with monitoring.

**3. Dr. Nagaraj K S, MBBS, DVD
Siddeswara Skin Clinic, Tumkur, Karnataka**

I have successfully used Hydroxyzine 50 mg SR for chronic pruritic dermatosis, addressing troublesome symptoms such as persistent itching and its impact on quality of life. While typically administered once daily, I consider a twice-daily dose for chronic urticaria. Hydroxyzine 50 mg SR is more effective and less sedative, making it my preferred choice for chronic itch management, especially with its added anxiolytic benefit. Among antihistamines, I prefer hydroxyzine and levocetirizine. I would replace levocetirizine with Hydroxyzine 50 mg SR to enhance chronic pruritic dermatosis management. Hydroxyzine 50 mg SR is effective in acute pruritic conditions such as acute urticaria and prurigo.

**4. Dr. Jayasri Pramanik, MBBS, DVD, MD
Lifeline Polyclinic, Kalyani, West Bengal**

I recommend Hydroxyzine 50 mg SR for managing chronic urticaria and pruritus. Its benefits include 24-h symptom control, once-daily dosing convenience, and reduced sedation. While typically administered once daily, its efficacy is notable even without a BID dose, making it preferable in chronic itch management, especially with its anxiolytic benefit. To optimize management, I suggest replacing levocetirizine with Hydroxyzine 50 mg SR. In addition to antihistamines, topical pramoxine is favored. Hydroxyzine 50 mg SR has also proven to be effective in acute pruritic conditions such as acute urticaria and pruritus due to systemic disorders.

**5. Dr. Ram Gopal Sha, MBBS, MD (Dermatology)
New Shree Guru Medical Hall, Agartala, Tripura**

Among antihistamines, I prioritize hydroxyzine, followed by levocetirizine, fexofenadine, and desloratadine. To optimize management, I would replace fexofenadine and desloratadine with Hydroxyzine 50 mg SR. In addition, I find gabapentin or pregabalin beneficial for chronic itch management. In acute pruritic conditions, Hydroxyzine 50 mg SR, particularly in 25 mg IR for acute urticaria and 50 mg for chronic urticaria, has shown efficacy. Despite comorbid conditions such as hypertension, I consider Hydroxyzine 50 mg SR to be safe to recommend.

**6. Dr. Vijayalakshmi Lakshmanan, MD (Skin), DDV
Gokul Ent Speciality Clinic, Mumbai, Maharashtra**

As a dermatologist, chronic pruritus often impacts patients' quality of life due to persistent itching, anxiety, stress, and sleep disturbances. Hydroxyzine 50 mg SR, however, provides 24-h control and is less sedative, making it more

effective. Its anxiolytic properties make it a preferred choice, potentially replacing the need for up-dosing second-generation antihistamines. While it is typically dosed once daily, BID dosing might be needed for intractable pruritus. I often consider replacing cetirizine, levocetirizine, doxepin, and cyproheptadine with Hydroxyzine 50 mg SR, which is also effective in acute urticaria and safe for patients with hypertension.

**7. Dr. Mamta Sahu, MBBS, MD (Dermatology)
Nigam Medicines, Cuttack, Odisha**

In my practice, I prefer using Hydroxyzine 50 mg SR for chronic urticaria. The most troublesome issue in chronic pruritus is persistent itching, which impacts the quality of life by causing anxiety, mood disturbances, stress, and sleep problems. For chronic urticarial pruritus, I occasionally use a BID dose. Its anxiolytic benefits make it a preferred choice for chronic itch management. I favor hydroxyzine over other antihistamines and would replace the currently prescribed bilastine with it. Besides antihistamines, I sometimes use low-dose steroids. Hydroxyzine 50 mg SR is also effective for acute conditions such as urticaria and is safe for patients with hypertension.

**8. Dr. Ganesh Sonawane, MBBS, DDV
Suman Skin Clinic, Mahad, Maharashtra**

In my practice as a dermatologist, I prefer Hydroxyzine 50 mg SR for chronic urticaria. Previously, I used nighttime sedative antihistamines and daytime non-sedative antihistamines. Hydroxyzine 50 mg SR provides 24-h symptom control, is less sedative, and convenient as an OD dosage, which makes it highly effective. For chronic inducible urticaria, I might consider a BID dose. I typically use levocetirizine but would replace cetirizine with Hydroxyzine 50 mg SR for better management. Besides antihistamines, I sometimes use sedative drugs. Hydroxyzine 50 mg SR is safe for patients with hypertension with monitoring.

**9. Dr. Mahesh Rajaram Shahane, MBBS, DDV
Spارش Skin Clinic, Ambernath, Maharashtra**

In my practice, Hydroxyzine 50 mg SR is my preferred choice for managing conditions such as urticaria, psoriasis, eczema, and atopic dermatitis. While currently prescribing hydroxyzine, I would contemplate replacing Fexofenadine 120 mg with Hydroxyzine 50 mg SR for improved management. In addition to antihistamines, steroids are sometimes used for chronic itch. Hydroxyzine 50 mg SR also demonstrates efficacy in acute pruritic conditions such as irritant contact dermatitis and is deemed safe for patients with hypertension.

**10. Dr. Dipali Shendarkar, MBBS, DVD, FCPS, DDV
Aadi Skin Care Clinic, New Panvel, Maharashtra**

Previously, I employed a combination of nighttime sedative and daytime non-sedative antihistamines. However, Hydroxyzine 50 mg SR, with its 24-h symptom control and reduced sedative effects, offers a more convenient once-daily dosage. In cases of chronic idiopathic urticaria, a BID dose may be considered. Its additional anxiolytic benefit makes it my preferred choice for chronic itch management, surpassing other antihistamines such as levocetirizine. In addition to antihistamines, I use anti-anxiety medications for chronic itch. Hydroxyzine 50 mg SR proves effective in acute pruritic conditions such as Lichen simplex chronicus and is safe for patients with hypertension.

**11. Dr. Gourab Roy, MD (Dermatology)
Apollo Clinic, Kolkata, West Bengal**

In my practice, I prefer using Hydroxyzine 50 mg SR for chronic urticaria. For chronic spontaneous urticaria that does not respond to conventional dosing, a BID regimen may be necessary. Its anxiolytic benefits make it the preferred choice for chronic itch management. I prefer hydroxyzine over other antihistamines and would replace levocetirizine with Hydroxyzine 50 mg SR for better management. Apart from antihistamines, I use doxepin for chronic itch. While Hydroxyzine 50 mg SR is not used for acute pruritic conditions, it is safe for patients with hypertension.

**12. Dr. Pramod Dattatraya Nishigandh, MBBS, DDV
Dr. Nishigandh Skin Care and Cosmetic Clinic,
Rahuri, Maharashtra**

In my practice, Hydroxyzine 50 mg SR is my preferred treatment for severe itching dermatological conditions, addressing the persistent itching that severely impacts patients' quality of life through anxiety, mood disturbances, stress, and sleep disruptions. While I typically administer once daily, I rarely use a BID dose for chronic pruritus indications. Even though I typically favor levocetirizine among antihistamines, I would switch to Hydroxyzine 50 mg SR for better management. Although not typically used for acute pruritic conditions, Hydroxyzine 50 mg SR can be effective in acute urticaria.

**13. Dr. Alok Sultania, MBBS, DDV
Kosme Care, Bilaspur, Chhattisgarh**

In my practice, I prefer hydroxyzine 50 mg SR for urticaria. Chronic pruritus causes persistent itching, anxiety, mood disturbances, stress, and sleep problems, significantly impacting the quality of life. In the past, nighttime sedatives and daytime non-sedative antihistamines were used. Hydroxyzine 50 mg SR can replace the up-dosing of

second-generation antihistamines, offering 24-h symptom control, less sedation, and convenient once-daily dosing. For conditions such as xerosis in older adults, a BID dose may be required. I favor hydroxyzine over levocetirizine and use cyproheptadine for additional support. Hydroxyzine 50 mg SR is also effective for acute urticaria and contact dermatitis and is safe for patients with hypertension.

14. Dr. Kaberi Som, MD, DVD (Dermatology)
Dr Som's Skin Clinic, Thane, Maharashtra

For acute urticaria, lichen planus, and bullous pemphigoid, a BID dose of Hydroxyzine 50 mg SR might be necessary. Hydroxyzine is preferred due to its added anxiolytic benefits. For chronic itch, I prefer antihistamines such as bilastine, desloratadine, levocetirizine, and hydroxyzine and would replace levocetirizine with Hydroxyzine 50 mg SR for better management. Besides antihistamines, I use dapson and apremilast. Hydroxyzine 50 mg SR is effective in acute urticaria, acute eczema, and acute generalized lichen planus and is safe for patients with hypertension.

15. Dr. Prem Kumar, MD (DVL), TDS
PK Skin City, Chennai, Tamil Nadu

I advise Hydroxyzine 50 mg SR for intractable pruritus. For chronic itch, I prefer hydroxyzine and would replace cetirizine with Hydroxyzine 50 mg SR for better management. Apart from antihistamines, I use mast cell stabilizers. Hydroxyzine 50 mg SR does not have a role in acute pruritic conditions.

16. Dr. Muthiah, MBBS DVD
Ezhil Hospital, Nagercoil, Tamil Nadu

While commonly preferred as once daily, I would use a BID dose for chronic itching conditions such as psoriasis, lichen planus, and chronic eczema. My mainstay for chronic itch management is hydroxyzine, and I prioritize replacing other treatments with Hydroxyzine 50 mg SR for improved outcomes. Alongside antihistamines, I incorporate second-generation antihistamines for itch management. Hydroxyzine 50 mg SR also proves beneficial in acute pruritic conditions. Moreover, it is safe to recommend it to patients with comorbid conditions like hypertension.

17. Dr. Anup Kumar Mishra, MBBS, MD (DVL)
Shyam Shah Medical College, Rewa, Madhya Pradesh

In my opinion, Hydroxyzine 50 mg SR is effective in managing chronic pruritus, including chronic urticaria, eczema, and lichen planus. It also has anxiolytic benefits, aiding in stress management. I prescribe hydroxyzine as a preferred antihistamine, often replacing levocetirizine. In

my experience, it can be recommended to patients with comorbid conditions such as hypertension.

18. Dr. Preeti, MBBS
Skin Solutions, Kanpur, Uttar Pradesh

In my practice, Hydroxyzine 50 mg SR stands out for addressing generalized pruritus in patients, which poses significant challenges including persistent itching, anxiety, mood disturbances, and sleep disruptions. Among antihistamines, hydroxyzine is my preferred choice, and I may consider replacing doxepin for enhanced management. In addition, Hydroxyzine 50 mg SR plays a role in acute pruritic conditions such as scabies. Given its safety profile, I confidently recommend it to patients with comorbid conditions such as hypertension.

19. Dr. Sudip Sarkar, MBBS, MD (Dermatology)
Purnam Clinic, Nimta, Kolkata, West Bengal

I often prefer Hydroxyzine 50 mg SR for acute urticaria due to its efficacy. I have found Hydroxyzine 50 mg SR to be more effective and less sedative, with the added advantage of anxiolytic properties. I would consider replacing levocetirizine with Hydroxyzine 50 mg SR for improved management. In addition to antihistamines, I also use steroids for chronic itch management. In acute pruritic conditions such as prurigo simplex, Hydroxyzine 50 mg SR can play a significant role.

20. Dr. Tamal Chakraborty, MBBS, MD, DVD
Sodepur Skin Clinic, Kolkata, West Bengal

In my practice, I prefer Hydroxyzine 50 mg SR for both acute and chronic urticaria due to its effectiveness. It effectively replaces the need for up-dosing second-generation antihistamines in chronic itch conditions, offering 24-h symptom control with reduced sedation. I favor hydroxyzine hydrochloride among antihistamines and replace lower doses with Hydroxyzine 50 mg SR for enhanced urticaria management.

21. Dr. T Sridhar, MBBS, DDVL
Family Care Skin Clinic, Mancheril, Telangana

In managing pruritus in conditions such as scabies and tinea, I prefer Hydroxyzine 50 mg SR for its efficacy. While typically administered once daily, in conditions such as prurigo nodularis, a twice-daily dose may be considered. Its added anxiolytic benefit makes hydroxyzine a preferred choice for chronic itch management alongside bilastine. To optimize management, I replace levocetirizine with Hydroxyzine 50 mg SR. Apart from antihistamines, moisturizers are prioritized.

22. Dr. Apurba Giri, MD (Dermatology)
New Akash Medical, Tamluk, West Bengal

Hydroxyzine 50 mg SR is essential in treating various conditions such as acute and chronic urticaria, psoriasis, and erythroderma. Previously, multiple antihistamine doses were common until the introduction of Hydroxyzine 50 mg SR. Alongside antihistamines, complementary medications such as montelukast and oral steroids are sometimes used for optimized management. In specific cases, replacing oral steroids with Hydroxyzine 50 mg SR offers a more balanced approach to conditions such as atopic dermatitis, lichen simplex chronicus, and psoriasis.

23. Dr. Jayanth Mysore, MBBS, DD
Dr Jayanth M Skin Clinic, Hyderabad, Telangana

For chronic urticaria, I prefer Hydroxyzine 50 mg SR for its efficacy and lasting relief. Chronic pruritus poses challenges such as persistent symptoms and reduced quality of life. Previously, up-dosing the same antihistamine was common practice, but Hydroxyzine 50 mg SR has proven to be a comprehensive solution, providing 24-h relief and reduced sedation. I prefer doxepin among antihistamines for its efficacy. Replacing lower dose hydroxyzine tablets with Hydroxyzine 50 mg SR can optimize treatment, especially for chronic urticaria.

24. Dr. K V T Gopal, MD (Dermatology)
Skin Care Clinic, Visakhapatnam, Andhra Pradesh

Hydroxyzine 50 mg SR effectively manages urticaria, addressing the significant concern of sleep disturbances associated with chronic pruritus. While typically administered once daily, a BID dose may be necessary for conditions such as atopic dermatitis. I prefer hydroxyzine among antihistamines and would replace levocetirizine with Hydroxyzine 50 mg SR for enhanced urticaria management. In addition, drugs such as doxepin help with chronic itch management. Even in acute pruritic conditions such as toxicoderma, Hydroxyzine 50 mg SR can be safely recommended for patients with comorbid hypertension, with close monitoring.

25. Dr. Manasa Chintawar, MBBS, DDVL
Ananya Skin Hair Laser and Multispeciality Clinic, Hyderabad, Telangana

In my practice, Hydroxyzine 50 mg SR effectively treats acute urticaria. Patients with chronic pruritus experience persistent itching, impacting their quality of life. While typically dosed once daily, a BID regimen of Hydroxyzine 50 mg SR is not usually necessary for chronic pruritus. Replacing levocetirizine with Hydroxyzine 50 mg SR improves acute urticaria management. However, due to potential hypertension exacerbations, it is not recommended for those with comorbidities.

26. Dr. Pothuru Usha, MBBS, DD
Samanvi Skin Clinic, Hyderabad, Telangana

Hydroxyzine surpasses other antihistamines in efficacy, with Hydroxyzine 50 mg SR enhancing management by replacing drugs such as bilastine and fexofenadine. While it is not suitable for acute pruritic conditions, it may help manage pruritus in older adults. However, caution is advised for patients with comorbid hypertension due to the potential risks.

27. Dr. Vinodini, MBBS, DD
Dr Vinodini Skincare Clinic, Hyderabad, Telangana

Hydroxyzine 50 mg SR is convenient for managing chronic idiopathic urticaria with once-daily dosing. Among antihistamines, hydroxyzine is my preferred treatment for chronic itch management, replacing bilastine for better outcomes. Besides antihistamines, I use tofacitinib for chronic itch. Although not suitable for acute pruritic conditions, it is safe for patients with comorbid hypertension.

28. Dr. Y Pydipathi Rao, MD, DD
Noble Poly Clinic, Visakhapatnam, Andhra Pradesh

Hydroxyzine 50 mg SR proves beneficial in managing chronic pruritus, replacing the need for up-dosing second-generation antihistamines. Among antihistamines, I prefer hydroxyzine, replacing second-generation ones for improved management. Apart from antihistamines, itch creams are recommended for chronic itch. While not suitable for acute pruritic conditions, Hydroxyzine 50 mg SR is safe for patients with comorbid hypertension.

29. Dr. B Vinay, MBBS MD DVL
Vinay Skin Care Clinic, Ongole, Andhra Pradesh

Hydroxyzine 50 mg SR does not have a significant role in acute pruritic conditions, except perhaps in cases of xerosis chronic pruritus. While it offers benefits like 24-h symptom control and convenience, I have not found it more effective or less sedative. Despite this, its added anxiolytic benefit makes it a preferred choice in chronic itch management. I prefer hydroxyzine and bilastine among antihistamines for chronic itch management.

30. Dr. Devanand, MD (Dermatology)
Skin Care, Cuddalore, Tamil Nadu

Hydroxyzine 50 mg SR is effective for chronic urticaria, often replacing the need for up-dosing second-generation antihistamines. Its 24-h symptom control is beneficial, although it retains sedative properties. I prefer levocetirizine among antihistamines but would consider replacing

eczema treatment with Hydroxyzine 50 mg SR for better management. While it may play a role in acute pruritic conditions, Hydroxyzine 50 mg SR is safe for patients with comorbid conditions such as hypertension.

31. Dr. P Sirisha, MD DVL
Sirisha Skin Clinic, Visakhapatnam, Andhra Pradesh

Hydroxyzine 50 mg SR is preferred for pruritus in older adults, in my opinion, replacing the need for up-dosing second-generation antihistamines. First-generation antihistamines are preferred, and I would replace bilastine with Hydroxyzine 50 mg SR for better management. Although not typically recommended for acute pruritic conditions, Hydroxyzine 50 mg SR may play a role in chronic cases. Despite comorbid hypertension, it can be safely recommended.

32. Dr. Gomathi R, MBBS, DDVL
Skin Plus Skin Hair Nail Clinic, Krishnagiri, Tamil Nadu

Hydroxyzine 50 mg SR is preferred for chronic pruritus and acute urticaria, replacing the need for multiple doses of antihistamines. It effectively controls symptoms 24/7, offering convenience and less sedation. While typically taken once daily, there are no indications for a BID dose. It is found to be more effective and less sedative, with added anxiolytic benefits. Preferred antihistamines include levocetirizine and hydroxyzine. I would replace levocetirizine with Hydroxyzine 50 mg SR for improved management. Apart from antihistamines, amitriptyline is favored for chronic itch management.

33. Dr. DM Mahajan, MD
Apollo Hospital, New Delhi

Hydroxyzine 50 mg SR is effective for both chronic and acute itchy skin, replacing the need for multiple antihistamine doses. Its 24-h control is beneficial for various pruritic conditions. While typically taken once daily, no indication exists for a BID dose in chronic pruritus. Preferred antihistamines include Bilastine during the day and Hydroxyzine 10 mg at night. I would replace Hydroxyzine 25 mg with Hydroxyzine 50 mg SR for improved management. Apart from antihistamines, amitriptyline is preferred for chronic itch management. While not typically recommended for acute cases, Hydroxyzine 50 mg SR may be useful in acute urticaria. It can be safely recommended despite comorbid hypertension.

34. Dr. Najuma Subba, MBBS, MD
Neotia Getwel Multispecialty Hospital, Siliguri, West Bengal

While not typically recommended for acute cases, Hydroxyzine 50 mg SR may be useful in severe acute

urticaria. Its 24-h control is beneficial, especially for troublesome symptoms such as sleep disturbance. Preferred antihistamines include levocetirizine, bilastine, fexofenadine, and hydroxyzine. I would replace Bilastine and fexofenadine with Hydroxyzine 50 mg SR for improved management. Tricyclic antidepressants are preferred over antihistamines for chronic itch management.

35. Dr. Anisha Najeeb, MD (Dermatology)
Skinworld Clinic, Siliguri, West Bengal

Hydroxyzine 50 mg SR is my preferred treatment for prurigo, as it offers 24-h symptom control and eliminates the need for multiple doses of antihistamines. Doxepin is preferred among antihistamines, but Hydroxyzine 50 mg SR may be a superior option for better management of prurigo. Apart from antihistamines, Bilastine is preferred for chronic itch management. While not typically recommended for acute cases, Hydroxyzine 50 mg SR may have a role in conditions such as acute urticaria. Nevertheless, it may be recommended for patients with comorbid conditions such as hypertension.

36. Dr. Suraj Pawar, MD (Skin)
Twacha Clinic, Akluj, Maharashtra

In my opinion, hydroxyzine 50 mg SR is suitable for various types of itching and may replace multiple doses of antihistamines in chronic itch conditions. Beyond antihistamines, drugs such as pregabalin are preferred for chronic itch. Further study is needed to determine the role of Hydroxyzine 50 mg SR in acute pruritic conditions. Despite comorbidities such as hypertension, it can be recommended.

37. Dr. Ishita Patra, MD, DNB, DVL
Wizderm Speciality Skin And Hair Clinic, Kolkata, West Bengal

Hydroxyzine 50 mg SR is preferred for acute severe urticaria but may not be more effective or less sedative compared to other options. However, its 24-h control is beneficial. In chronic itch management, hydroxyzine is a preferred choice due to its anxiolytic benefit. Among antihistamines, bilastine is favored, with levocetirizine being a potential replacement to enhance management. I prefer amitriptyline over antihistamines for chronic itch.

38. Dr. Debaleena Halder, MBBS, Certificates in Cosmetic Dermatology
Baharampur, West Bengal

Hydroxyzine 50 mg SR is typically used once daily, but in severe urticaria with edema, a twice-daily dose may be

considered. Preferred antihistamines include hydroxyzine, with cetirizine being a potential replacement. Beyond antihistamines, doxepin is preferred for chronic itch management. While Hydroxyzine 50 mg SR may have a role in acute dermatitis, it can still be recommended for patients with comorbid conditions like hypertension.

**39. Dr. Tara Chand, MBBS, DVD
Consultant, Muzaffarnagar, Uttar Pradesh**

Hydroxyzine 50 mg SR is a preferred option for treating urticaria, pruritus, and allergic contact dermatitis, offering 24-h control and reduced sedation. It effectively replaces up-dosing of second-generation antihistamines in chronic itch conditions. While typically taken once daily, a twice-daily dose may be necessary for conditions such as chronic prurigo. Hydroxyzine is favored for chronic itch management, with cetirizine as a potential alternative. Tricyclic antidepressants are also preferred for chronic itch management.

**40. Dr. Sudhir Singh, MD
Diya Skin Clinic, Nagpur, Maharashtra**

In my opinion, Hydroxyzine 50 mg SR is suitable for treating atopic dermatitis and urticaria. I prefer hydroxyzine, particularly, for chronic itch management, with cetirizine being a potential replacement. Apart from antihistamines, selective serotonin reuptake inhibitors (SSRIs) are preferred for chronic itch management. Hydroxyzine 50 mg SR can

also play a role in acute pruritic conditions such as acute urticaria, drug rash, and atopic dermatitis. Moreover, it can be recommended to patients with comorbidities such as hypertension, albeit with close monitoring.

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