

SECTION 1

What is urticaria? Expert opinion from the 1st Global Urticaria Forum

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Conflicts of interest

Marcus Maurer is, or recently was, a speaker and/or advisor for FAES, Almirall Hermal, Genentech, GSK, Merckle Recordati, Novartis, Sanofi-Aventis, Schering-Plough, MSD, Merck, Moxie, Takeda, UCB and Uriach. Ana Giménez-Arnau has acted as a medical advisor for Uriach Pharma, Genentech, Novartis; has received research grants supported by Uriach Pharma, Novartis and has been involved in educational activities sponsored by Uriach Pharma, Novartis, Genentech, Menarini and MSD.

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Chronic urticaria (CU) is defined by the recurrent occurrence of itchy hives, angioedema or both for 6 weeks or more.¹ It may be further classified into chronic inducible urticaria (CINDU) or chronic spontaneous urticaria (CSU) (also called chronic idiopathic urticaria [CIU]), depending on whether a specific trigger for the development of CU signs and symptoms can be identified or not.¹ The exact prevalence depends on the population studied, but reports suggest that, globally, CU can affect up to 1% of the population, with CSU accounting for approximately two-thirds of cases.² In addition to the burden of physical symptoms of itchy hives and angioedema, many aspects of quality of life (QoL) are found to be reduced in patients with CU due to interference with daily activities, social interaction and emotional well-being,³ with the presence of angioedema further impairing QoL.⁴ CSU has a high overall impact on QoL when compared with many other common dermatological conditions.⁵ There is also a high socioeconomic impact from both the direct (medication or healthcare visits) and indirect costs (absence from or reduced efficiency while at work).^{2,6}

The European Academy of Allergy and Clinical Immunology (EAACI)/Global Allergy and Asthma European Network (GA²LEN)/European Dermatology Forum (EDF)/World Allergy Organization (WAO) recently published updated recommendations for the definition, classification, diagnosis and management of CU.¹ The first international Global Urticaria Forum was held in November 2014 in Prague, Czech

Republic. More than 400 clinicians from across the globe attended this educational meeting which focused on both CSU and CINDU.

We are pleased to report in this supplement a summary of the presentations and discussions that took place at the first international Global Urticaria Forum, including the burden of disease and unmet need associated with CU, the most up-to-date approaches to the diagnosis and management of CU, recommended patient assessment tools and their use in clinical practice, and the latest efficacy and safety data for CU treatment options. Because urticaria is a cutaneous and systemic disease, comorbidities were also discussed, as well as recommendations for the management of urticaria in special populations.

Through plenary lectures, case reports, audience discussions and practical workshops, the Global Urticaria Forum presented the real urticaria, raising the profile it deserves in the context of dermatological diseases. We hope that these perspectives will be useful to your clinical practice and help to address some of the key challenges in understanding, diagnosing and effectively managing and treating CU.

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