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Chronic Pruritus Management: Efficacy of Hydroxyzine

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Abstract

Pruritus, or chronic itching, is a prevalent and often debilitating dermatological condition affecting approximately 13–17% of the population, with a lifetime prevalence of 22–26%. Chronic pruritus, lasting more than 6 weeks, is associated with various skin diseases, including atopic dermatitis, psoriasis, and chronic urticaria. It significantly impacts the quality of life, leading to sleep disturbances, impaired daily functioning, and psychological suffering. Pruritus can be subdivided based on its origin in the peripheral and central nervous systems, resulting in different subtypes such as proprioceptive, systemic, neurogenic, psychogenic, and mixed pruritus. Hydroxyzine, a first-generation antihistamine, has shown efficacy in managing chronic pruritus by inhibiting H1 receptors and mast cell histamine production. Studies, including one by Thomas *et al.*, demonstrate significant improvements in pruritus symptoms and quality of life over 12 weeks. Hydroxyzine is recommended as a first-line treatment for pruritus due to its antipruritic, anxiolytic, and sedative properties. The European guidelines endorse its use for various etiologies of pruritus.

Key words: Histamine, Hydroxyzine, Pruritus, Quality of life

INTRODUCTION

Pruritus is identified as the most prevalent clinical condition in dermatology. Chronic pruritus/chronic itching is a bothersome and frequently debilitating illness characterized by continuous itching with several underlying causes.^[1,2] Pruritus lasting >6 weeks is defined as chronic pruritus and is a prevalent symptom of several skin diseases such as atopic dermatitis, psoriasis, and chronic urticaria. According to the reports, the prevalence of chronic pruritus is 13–17%, and the lifetime prevalence is 22–26%. ^[3] According to the global burden of disease initiative, pruritus is among the 50 most prevalent conditions associated with high burden levels.^[4]

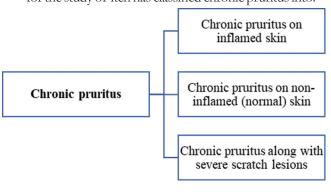
Pruritus has a substantial influence on the quality of life of individuals suffering from it.^[5,6] The consequences of

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chronic pruritus extend beyond the physical discomfort of itching. It can cause sleep problems, poor everyday functioning, and psychological suffering including anxiety, sadness, and lack of concentration.^[1,2]

CLASSIFICATION

I. Based on physical examination, the International forum for the study of itch has classified chronic pruritus into: [4]



II. Based on the origin of pruritus in the skin, it can also be sub-divided according to the peripheral and

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central nervous system mechanisms into various sub-types: [1]

CLINICAL EVIDENCE

Thomas et al. reported that hydroxyzine substantially improved pruritus symptoms and quality of life in patients with chronic pruritus due to dermatological causes over 12 weeks. [2] Due to its antipruritic, anxiolytic, and sedative properties, the European guidelines on chronic pruritus recommend hydroxyzine as the first-line treatment for pruritus caused by a variety of aetiologies. In addition, hydroxyzine concentrations are higher in the skin than in plasma.[1,2]

The DLQI score substantially rose from baseline by 2.70 (95% CI: 2.39-3.01) at 2 weeks and 10.86 (95% CI: 9.95-11.78) at 12 weeks [Figure 1].

During the 12-week period, the mean 5-D itch score significantly decreased (P < 0.0001).^[2]

Compared to baseline, there was a significant increase in the 5-D score by 2.76 (95% CI: 2.48-3.05) at 2 weeks and 7.35 (95% CI: 6.88-7.83) at 12 weeks [Figure 2].[2]

Pruritoceptive pruritus can be caused by dermatological conditions such as dermatophytosis, xerosis, scabies, urticaria, insect bite reactions, atopic dermatitis, and psoriasis

Systemic pruritus is driven by responses from non-cutaneous organ systems that are transmitted by the central nervous system and have no peripheral nerve input

> Mixed pruritus is a result of multiple factors, and is mediated by two or more mechanisms, including atopic dermatitis which is characterised by skin-based irritation and

Psychogenic pruritus is caused by mental disorders such as obsessive-compulsive disorder, anxiety, somatic symptom disorders,

psychosis, and substance abuse neurogenic pruritus

Pathophysiology:

- · Itch is caused by the interaction of numerous pruritogenic substances and receptors.
- · Pruritus originates in the epidermis and dermo-epidermal junction, comprising a complex interaction between activated unmyelinated C nerve fibres, immune cells, and keratinocytes.
- · Several pruritogens are released, including histamine, proteases, cytokines, prostaglandins, neuropeptides, and nerve growth factors.1

Therapy:

- H1 antihistamines are part of the symptomatic therapy as the first step of the management of chronic
- · Many sedating first-generation antihistamines including hydroxyzine are used for the management
- · First-generation antihistamines have a reduced specificity for H1 receptors and also additional benefits through anti-muscarinic, anti-adrenergic, anti-serotonin, and H4 receptor activity.5
- The sedative effects often subside by day 4 of therapy.
- · Among these, hydroxyzine is considered to be the most potent antihistamine in providing symptomatic relief in pruritus.5

CONCLUSION

Pruritus can significantly impact the quality of life. Hydroxyzine, a first-generation antihistamine, relieves itch by inhibiting H1 receptors and mast cell histamine production. Studies support its effectiveness as a firstline treatment for chronic itching, thus improving both pruritus and overall quality of life. The anxiolytic and sedative properties of it contribute to its clinical significance.

Expert Opinion

Figures 3 and 4 provide a concise summary of expert opinions regarding the use of hydroxyzine.

Chronic Pruritus Management: Efficacy of Hydroxyzine

Do you consider hydroxyzine to be the first choice in chronic itch patients due to its assured anti-pruritic (central and peripheral action) and anxiolytic benefits?

95% doctors agreed that Hydroxyzine is their preferred molecule for chronic itch management.

In which severity of chronic itch, do you find hydroxyzine 50 mg SR to be most useful?

Pathological changes in the afferent pathway

of sensory nerve fibres are associated

with neurogenic pruritus

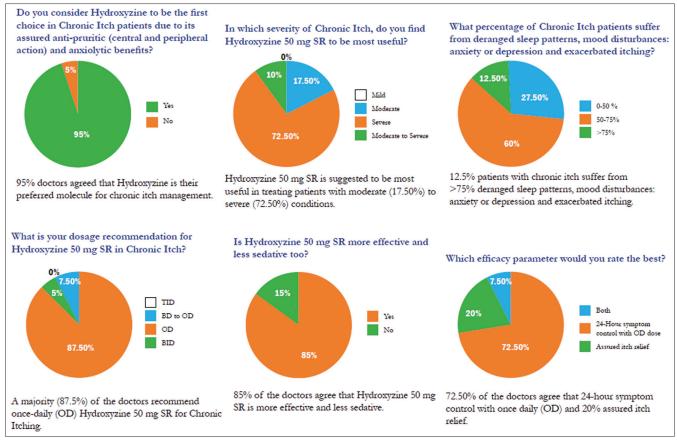


Figure 3: Summary of Expert Opinion

Hydroxyzine 50 mg SR is suggested to be most useful in treating patients with moderate (10%) to severe (70%) conditions.

What percentage of chronic itch patients suffer from deranged sleep patterns, mood disturbances: anxiety or depression and exacerbated itching?

12.5% of patients with chronic itch suffer from >75% deranged sleep patterns, mood disturbances: Anxiety or depression and exacerbated itching.

What is your dosage recommendation for hydroxyzine 50 mg SR in chronic itch?

A majority (87.5%) of the doctors recommend once-daily (OD) Hydroxyzine 50 mg SR for Chronic Itching.

Is Hydroxyzine 50 mg SR more effective and less sedative too?

85% of the doctors agree that Hydroxyzine 50 mg SR is more effective and less sedative.

Which efficacy parameter would you rate the best?

70% of the doctors agree that 24-h symptom control with once daily (OD) and 20% assured itch relief.

Dr. Aneja Pritpal Singh

MBBS, Aneja Skin and Hair Centre, Jalandhar, Punjab

Chronic itch disrupts patient sleep and contributes to mood disorders such as anxiety or depression. Approximately 0–50% of the patients concurrently experience disturbed sleep patterns, mood disturbances, and heightened itching. Recognizing the importance of both central and peripheral pathways, I advocate for Hydroxyzine, the 50 mg SR formulation, as a preferred first-line option. In severe cases, an OD dose of Hydroxyzine has demonstrated efficacy with reduced sedation. Current treatment involves a combination of two different antihistamines with updosing. Hydroxyzine's lower sedative potential is advantageous and 10 mg IR, 25 mg IR, and 50 mg SR forms are tailored to mild, moderate, and severe cases, respectively.

Dr. Vinayak Vyas

MD (Dermatology), Jamnagar, Gujarat

Chronic itch has complex symptoms, often involving severe disruptions in sleep and mood disturbances. Over Where will you use Hydroxyzine 10 mg IR, 25 mg IR & 50 mg SR?

10 mg IR	25 mg IR	50 mg IR	Dose not specified
Mild itching (Tinea corporis)	Moderate itching (Allergic dermatitis)	Chronic itching (Senile pruritus)	Anxiety
Acute urticaria	Chronic itch secondary to renal impairmnet	Chronic urticaria	Prutitus or itching
Atopic dermatitis in pediatrics	Adult urticaria	Severe pruritus	
General pruritus	Adult chronic pruritus	Severe chronic itch	
Atopic dermatitis in pediatrics	Moderate pruritus	Chronic pruritus	
Pediatric patients	Acute urticaria		

Choice of molecule in treating Chronic Itch (Rank in the order of preference: 1-highest preferred to 4 - lowest preferred)

1- Hydroxyzine (75%)

2- Bilastine (77.5%)

3- Levocetrizine (57.5%)

4- Other than obove(62%)

Figure 4: Ranking as per expert opinion

75% of patients were affected. I frequently initiate therapy with Hydroxyzine 50 mg SR, using its dual-action benefits for anti-pruritic and anxiolytic effects. Hydroxyzine, levocetirizine, bilastine, and loratadine are drugs of choice. Hydroxyzine 50 mg SR stands out for superior efficacy with minimal sedation and its 10 mg IR and 25 mg IR are preferred for milder to moderate cases, while Hydroxyzine 50 mg SR is the choice for acute and chronic itch.

Dr. Rajvardhan Malgonda Bagane

MD (DVL), Bhartesh Skin Care, Miraj, Maharashtra

In moderate chronic itch cases, approximately 50–75% of patients experience deranged sleep patterns, mood disturbances, and exacerbated itching. Addressing both central and peripheral pathways is crucial for treatment. As an initial intervention, Hydroxyzine at 50 mg SR has dual-action benefits of anti-pruritic and anxiolytic effects. The preferred drugs for treatment are levocetrizine, hydroxyzine, fexofenadine, and desloratidine Hydroxyzine 50 mg SR has shown superior effectiveness while minimizing sedation, making it a preferred option for chronic conditions. For specific scenarios, Hydroxyzine 10 mg IR in acute urticaria, 25 mg IR for chronic itch secondary to renal impairment, and 50 mg SR for chronic urticaria.

Dr. Girish Narkhede

MBBS MD, Sparsh Skin Cosmetic and Hair Clinic, Jalgaon, Maharashtra

In cases of severe chronic itch, approximately 50–75% of patients experience disruptions in sleep patterns, along with mood disturbances and exacerbated itching. Address both central and peripheral pathways for treatment. As an initial approach, Hydroxyzine at 50 mg SR has dual-action benefits of anti-pruritic and anxiolytic effects. The OD dosing demonstrates efficacy in cases of severe chronic itch, ensuring consistent 24-h symptom control. I recommend Hydroxyzine 10 mg IR for mild itching due to conditions like Tinea corporis, 25 mg IR for moderate itching in cases of allergic dermatitis, and 50 mg SR for chronic itching such as in senile pruritus.

Dr. Ajay Sirsikar

MBBS DVD, Twacha Skin Clinic, Kalyan, Maharashtr

In cases of severe chronic itch, disruptions in sleep patterns, alongside mood disturbances and exacerbated itching, are experienced by approximately 50–75% of patients. Addressing both central and peripheral pathways for effective treatment. Hydroxyzine at 50 mg SR, Doxepin, Gabapentin, or Pregabalin are often prescribed. Patients appreciate the convenience of OD dosing, ensuring consistent 24-h symptom control. Molecules other than antihistamines opt for enhanced effectiveness. Hydroxyzine 50 mg SR has shown superior efficacy while minimizing sedation. Hydroxyzine 10 mg IR, 25 mg IR, and 50 mg SR are useful in acute itch, severe itch, and severe chronic itch respectively for patients dealing with acute and chronic itch.

Dr. Bipin Dabholkar

MBBS DDVL, Sai Skin Care, Chiplun, Maharashtra In moderate chronic itch, up to 50% of patients experience disruptions in sleep patterns, alongside mood disturbances and exacerbated itching. Doxepin, hydroxyzine, levocetrizine, or loratidine was prescribed. These medications offer anti-pruritic and anxiolytic effects and have shown efficacy in cases of moderate chronic itch. OD dosing is recommended. I recommend hydroxyzine 10 mg IR, 25 mg IR, and 50 mg SR in moderately severe itch conditions. Hydroxyzine 50 mg SR ensures consistent 24-h symptom control with OD dose for patients dealing with acute and chronic Itch.

Dr. Mangesh Prabhulkar MBBS DVD, Derma Care, Vasai, Maharashtra

Severe itching impacts sleep and mood in 50–75% of cases, affecting quality of life. Hydroxyzine is the preferred first-line treatment for chronic itch due to its anti-pruritic and anxiolytic benefits. Hydroxyzine 50 mg SR is the most effective for severe cases, with a recommended OD dosage. Hydroxyzine 50 mg SR is a superior alternative, in terms of effectiveness and sedation. I recommend dosing of same antihistamines. For assured itch relief, Hydroxyzine 50 mg SR is considered for chronic cases.

Dr. Satish T Bhatia

MD Skin Dermetics, Indian Cancer Society Cooperage, Mumbai, Maharashtra

In patients with moderate chronic itch, more than 75% of patients experience disruptions in sleep patterns, along with mood disturbances and exacerbated itching. The order of choice of treatment is as follows: Hydroxyzine, levocetirizine, fexofenadine, and montelukast. hydroxyzine 10 mg IR, 25 mg IR and 50 mg SR are useful in dermatitis. The efficacy parameter of hydroxyzine 50 mg SR was found to be an assured itch relief. It offers a versatile and highly effective choice for patients dealing with acute and chronic itch.

Dr. Naresh Kumar Banjara

MBBS MD, Banjara Skin and Cosmetic Clinic, Sawaimadhopur, Rajasthan

In moderate chronic itch patients, ranging from 0 to 50%, endure disruptions in sleep patterns, accompanied by mood disturbances and exacerbated itching. It is imperative to address both central and peripheral pathways for effective treatment. Hydroxyzine and Doxepine are the preferred drugs of choice. It provides anti-pruritic and anxiolytic effects and has demonstrated efficacy in severe cases of chronic itch. Patients find OD dosing appealing, ensuring consistent 24-h symptom control. It presents a versatile and effective option for patients grappling with severe chronic itch.

Dr. Mamta Dhayal

MBBS DVD, Dr Dhayal's Skin Clinic, Mumbai, Maharashtra

In cases of severe chronic itch, up to 50% of patients experience disruptions in sleep patterns, alongside mood disturbances and exacerbated itching. Addressing both central and peripheral pathways is crucial. Hydroxyzine, desloratadine, levocetirizine, and bilastine are the order of preferred drugs for the treatment. I prefer hydroxyzine 25 mg. Patients appreciate the convenience of OD dosing in severe cases, ensuring consistent 24-h symptom control. Consider combining two different antihistamines, increasing the dosage of the same antihistamines and molecules other than antihistamines for enhanced effectiveness Hydroxyzine 10 mg IR, 25 mg IR, and 50 mg SR are prescribed in cases of urticaria, senile xerosis, and atopic dermatitis respectively.

Dr. Kalpesh Thakur

MD, DDV, Gurunanak Hospital, Mumbai, Maharashtra

The severe chronic itch, a proportion of patients, roughly 50–75%, grapple with l disruptions in their sleep patterns, coupled with mood disturbances and intensified itching. Cetirizine, Hydroxyzine, levocetirizine, and bilastine are the drugs of choice. Hydroxyzine 10 mg IR, 25 mg IR and 50 mg SR is prescribed, in cases of chronic urticaria, and effective choice for acute and chronic itch.

Dr. Pramod Ganesh Bhandary MBBS, MD, Mumbai, Maharashtra

For moderate itch cases, up to 50% of patients experience disruptions in sleep patterns, mood disturbances, and exacerbated itching. Preference of medications includes antihistamines, cyclosporin A, phototherapy, and anticonvulsants. Hydroxyzine 50 mg SR offers antipruritic effects and demonstrating efficacy. Patients with moderate itch find the OD regimen convenient, ensuring 24-h symptom control. I often utilize a combination of two different antihistamines for enhanced effectiveness while minimizing sedation. The choice between IR for sedation and SR for working-class patients.

Dr. Madhavi Zende

MBBS/DDV, Skin Central Skin & Hair Clinic, Pune, Maharashtra

In my clinical practice, I observed moderate chronic itch, a substantial 50–75% of patients face disruptions in sleep patterns, accompanied by mood disturbances and heightened itching. It is crucial to address both central and peripheral pathways for effective treatment. The choice of molecule is Hydroxyzine. It provides anti-pruritic effects while maintaining a less sedative profile. Atarax SR is preferred over Hydroxyzine 50 mg SR. Combining two different antihistamines has been shown to enhance efficacy.

Dr. Sanjay Ramdas Jadhav

MBBS DDV FCPS, Ram Sita clinic, Dombivli, Maharashtra Around 50–75% of individuals experience impacts on sleep patterns and mood, with a severe level of debilitation in cases of severe itch. The order of preference of medications is Hydroxyzine, levocetirizine, loratadine, and bilastine. Hydroxyzine is the first choice due to its assured anti-pruritic and anxiolytic benefits. A dosage of 50 mg SR is chosen, ensuring assured itch relief. It is a highly effective choice for patients with acute or chronic conditions.

Dr. Vineet Kumar Verma

MD, Skin Health Clinic, Kota, Rajasthan

Approximately 50–75% of patients with moderate chronic itch facing disruptions in sleep patterns, alongside mood disturbances and heightened itching. Hydroxyzine followed by Levocetirizine is the order of choice of drugs. The dual-antihistamine approach has proven highly effective, providing a well-rounded strategy for relief. Hydroxyzine is less sedative compared to other options. Hydroxyzine 10 mg IR, 25 mg IR, and 50 mg SR are prescribed as required to the patient's needs. This has delivered assured itch relief for my patients dealing with chronic pruritus.

Dr. Ishita Dua

MD Dermatology, Swarvind Skin Clinic, Gwalior, Madhya Pradesh

In severe cases of chronic itch, around 50–75% of patients face disruptions in sleep patterns, along with mood disturbances and intensified itching. I recognize that hydroxyzine is the first option because of its proven anti-pruritic and anxiolytic properties and can effectively target both central and peripheral routes. Hydroxyzine, levocetirizine, desloratadine, and bilastine are the order of preference of drugs for treatment the optimal dosage of hydroxyzine for different scenarios: 10 mg for pediatric patients, 25 mg for mild-to-moderate pruritus, and 50 mg for severe pruritus.

Dr. Pawan Kumar

MD, Siddhi clinic, Shahdol, Madhya Pradesh

In moderate chronic itch, up to 50% of patients endure disruptions in sleep patterns, mood disturbances, and intensified itching. Hydroxyzine, levocetirizine, bilastine, and ebastine are the choice of drugs. This dynamic regimen not only minimizes sedation but also offers versatile and highly effective options for patients navigating the challenges of chronic itch, whether in acute or chronic acts. With this approach, we aim to achieve consistent 24-h symptom control, providing our patients with a performance of relief.

Dr. K Karthikeyan

MD, RK Skin and Dental clinic, Cuddalore, Tamil Nadu

In moderate chronic itch, impacting 50–75% of patients with disruptions in sleep patterns, mood disturbances, and heightened itching. I accept hydroxyzine can address both central and peripheral pathways for effective treatment and is the first choice due to its anti-pruritic and anxiolytic benefits. Consider options such as cetirizine, levocetirizine, hydroxyzine, and bilastine for therapy. Hydroxyzine not only ensures superior effectiveness but also allows for consistent 24-h symptom control. Specifically, a dosage of 50 mg has demonstrated efficacy in providing relief and performance of relief in chronic itch.

Dr. Mansing Shinde

MBBS, DVD, Skin Clinic, Kolhapur, Maharashtra

In severe cases of chronic itch, affecting 50–75% of patients with disruptions in sleep patterns, mood disturbances, and heightened itching. Hydroxyzine is the first choice due to its anti-pruritic and anxiolytic benefits. I integrate a combination of two distinct antihistamines. Hydroxyzine 50 mg SR is more effective and less sedative too. For those with chronic pruritus, the extended-release formulation at 50 mg has proven pivotal, furnishing dependable 24-h symptom relief and offering a consistent and reliable performance of relief that patients with acute or chronic itch.

Dr. Krishna Murthi

MBBS, DD, Krishna Skin Clinic, Arakkonam, Tamil Nadu

In moderate chronic itch, which affects 50–75% of patients and leads to disruptions in sleep patterns, mood disturbances, and heightened itching. Given its proven anti-pruritic and anxiolytic properties, Hydroxyzine is the top choice and can effectively target both central and peripheral pathways for treatment. Hydroxyzine 50 mg extended-release form, taken OD. This ensures symptom control, which is beneficial for patients experiencing chronic episodes of itching. This approach has been well-received and has 24-h symptom control with OD dose.

Dr. Debidutta Nayak

MBBS, MD, SkiNeeds, Cuttack, Odisha

In my clinical practice, moderate chronic itch, affecting up to 50% of the patients and causing disruptions in sleep patterns, mood disturbances, and intensified itching. Irecommend hydroxyzine, taken OD, as it provides effectiveness and safety. It has anti-pruritic and anxiolytic properties, is the top choice and effectively address both central and peripheral pathways for treatment. Combining two different antihistamines is more effective in providing

relief. For patients dealing with severe chronic itch, the SR formulation hydroxyzine 50 mg ensures consistent symptom relief around the clock. The efficacy parameter of hydroxyzine was assured itch relief in both acute and chronic conditions.

Dr. R Baskaran

MD, DD, Amutha Skin Clinic, Chennai, Tamil Nadu

Severe chronic itch, affecting more than 75% of patients and resulting in disruptions in sleep patterns, mood disturbances, and intensified itching. Hydroxyzine 50 mg SR is useful in severe cases and gives 24-h symptom control with an OD dose. It is the first choice and effectively address both central and peripheral pathways for treatment hydroxyzine 10 mg IR, 25 mg IR, and 50 mg SR are utilised in Pruritus or Itching and anxiety.

Dr. M Rangaswaroop

MBBS, MD, Bangalore, Karnataka

In my clinical practice, severe chronic itch, affecting up to 50% of patients and causing disruptions in sleep patterns, mood disturbances, and heightened itching. A tailored approach is crucial and prescribing hydroxyzine SR taken OD as treatment in severe cases. I admit this with guaranteed anti-pruritic and anxiolytic properties. Increasing the dose of antihistamines is applicable. This approach is more effective, providing reliable symptom relief for 24 h. 50 mg SR hydroxyzine is utilized in chronic Pruritus.

Dr. MG Gopala

MBBS, MD, Sree Venkateswara Skin and Laser Clinic, Bangalore, Karnataka

In cases of severe itch, the impact on sleep and mood is considered to affect 0–50% of individuals. Hydroxyzine is the first option because of its proven anti-pruritic and anxiolytic properties and can effectively target both central and peripheral routes. Hydroxyzine can be used in severe cases as an OD dose for 24-h symptom control. I suggest 10 mg IR for mild itch, 25 mg IR for chronic urticaria, and 50 mg SR for severe itch. It can be used in acute and chronic conditions.

Dr. MLD Unnithan

Sign and VD Specialist, Karnataka

In 50–75% of patients with moderate itch, sleep patterns and mood disturbances are severely debilitating. Hydroxyzine can address both central and peripheral pathways for effective treatment and is the first choice due to its assured anti-pruritic and anxiolytic benefits.

The order of preference of drugs includes hydroxyzine 50 mg, bilastine 20 mg, fexofenadine 180 mg, and cetirizine 10 mg. This approach, with specific dosages, ensures 24-h symptom control with OD dosing. I suggest 10 mg IR for urticaria, 25 mg IR for pruritis, and 50 mg SR for severe pruritis.

Dr. Arun Prasad

MD Derma, Dr. Eswaramurthi's Skin Clinic, Coimbatore, Tamil Nadu

My preferred regimen choice includes hydroxyzine 180. Hydroxyzine, levocetirizine, and doxepine are choice of drugs for treatment. For mild chronic itch cases affecting 50–75% of individuals demonstrating moderate effects on sleep and mood patterns. Among these, hydroxyzine 180 is effective. I avoid updosing antihistamines or using other medications. For specific pruritus severities, I recommend 10 mg IR for general use, 25 mg IR for elderly patients, and 50 mg SR for rare cases. This approach provides 24-h symptom control with OD dosing, which is effective for individuals with mild chronic itch.

Dr. B Eswaramurthi

MBBS, DDVL, Arun Prasad Skin Clinic, Nandyal, Andhra Pradesh

In cases of severe chronic itch, sleep patterns and mood are affected in 0–50% of individuals, and the drug choice includes hydroxyzine, levocetirizine, beta histamine, and loratadine. For severe pruritus, I recommend 10 mg IR for children, 25 mg IR for adult urticaria, and 50 mg SR for adult chronic urticaria. This approach provides 24-h symptom control with OD dosing, which is effective for both pediatric and adult populations dealing with acute and chronic itch.

Dr. Ravishankar Reddy

MBBS, DDVL, RSD Clinic, Kurnool, Andra Pradesh

For patients experiencing severe chronic itch (50–75% impact), of the drugs of choice: Hydroxyzine, levocetirizine, beta histamine, and loratadine. I opt for 10 mg IR in children, 25 mg IR in adult urticaria, and 50 mg SR in adult chronic urticaria. This regimen ensures 24-h control, effectively addressing chronic and acute itch in both pediatric and adult populations.

Dr. Naveen Kumar

MBBS, DD, SRI Venkateshwara Hospital, Karimnagar, Telangana

In severe chronic itch, over 75% of patients are severely impacted by disruptions in sleep and mood patterns. Hydroxyzine is the best choice and a better alternative

to other drugs due to its effectiveness, lower sedative properties, and 24-h symptom control in chronic cases. I prescribe 10 mg IR for mild, 25 mg IR for moderate, and 50 mg SR for chronic cases. My current approach is updosing the same antihistamine rather than combining two different antihistamines.

Dr. Anji Babu

MD Derma, Uma Skin Clinic, Karimnagar, Telangana

Around 50–75% of chronic itch patients are impacted by sleep and mood disturbances along with increased itching. Hydroxyzine 50 mg SR is effective owing to its 24-h symptom control and assured itch-relief in chronic cases. The best drug choice for me is Hydroxyzine, followed by levocetirizine, fexofenadine, and bilastine.

Dr. Sumanchandar Rao

MD, DVL, Dr Vshya Skin Clinic, Karimnagar, Telangana

In cases of severe chronic itch patients, where 50–75% cases suffer from disturbed sleep patterns along with disrupted mood. Hydroxyzine is the most preferred choice for me in both moderate and severe conditions. I prefer levocetirizine after hydroxyzine. Combining different antihistamines and updosing the antihistamines as required. I suggest 10 mg IR for mild cases, 25 mg IR for moderate severity, and 50 mg SR for chronic cases.

Dr. Rajesh Sankar

MD Skin and VD, Dermatology consultation, Ernakulam, Kerala

In severe cases of chronic itch, where sleep patterns and mood disturbances are severely debilitating and affect 50–75% of patients, the most preferred choice is Hydroxyzine. Hydroxyzine provides relief for pruritic conditions in both pediatric and adult populations. For chronic itch, the hydroxyzine 50 mg SR option ensures 24-h symptom control. Hydroxyzine is beneficial for chronic cases requiring sustained relief.

Dr. J Ponnarasan

MBBS, DD, Cumbum, Tamil Nadu

In severe chronic itch cases where sleep patterns and mood disturbances are severely debilitating, affecting over 75% of patients, most of the time recommend hydroxyzine due to its higher efficacy and low sedative properties. Currently, I prefer combining 2 different antihistamines. For chronic itch, 50 mg SR ensures 24-h symptom control with OD dosing, making it an optimal choice.

Dr. Bhukya Harikumar

MD, DVL, Naveena Hospital, Khemman, Telangana

In chronic itch patients, sleep patterns, and mood disturbances, such as anxiety or depression, can be severely debilitating, affecting 50–75% of individuals. My preferred choice is Hydroxyzine due to its effectiveness followed by levocetrizine, bilastine, and loratadine. 10 mg IR is preferred for children while I prescribe 25 mg IR for adult urticaria and 50 mg SR for adult and chronic pruritus. Hydroxyzine is proven to be efficacious due to 24-h symptom control in both acute and chronic cases.

Dr. SN Suajaya

MD DVD, FRGUHS (Demagoguery), Surgi Derma Hospital, Bangalore, Karnataka

In patients with chronic itch, sleep disruptions, and mood disorders, such as anxiety or depression, can have a moderately debilitating impact, affecting 50–75% of individuals. Hydroxyzine is the most preferred drug due to its lower sedative properties and 24-h symptom control property in chronic cases, which is followed by doxepin, levocetirizine, and fexofenadine.

Dr. Monika Singh

MD DVD, Derma capital, Jaipur, Rajasthan

For patients grappling with moderate-to-severe chronic itch, the associated sleep disturbances and mood disorders, such as anxiety or depression, can be significantly debilitating, impacting 50–75% of individuals. The choice of drugs is as follows: Levocetirizine, hydroxyzine, doxepin, and gabapentin, with doxepin taking precedence. A combination of two different antihistamines, which have proven to be more effective. Hydroxyzine 10 mg IR, 25 mg IR and 50 mg SR are used in adults, with moderate pruritus and severe pruritus, respectively.

Dr. Roopak Saxena

MD (Dermatology), Private Consultation Chamber, Agra, Uttar Pradesh

In my clinical practice, patients with severe chronic itch, affect approximately 50–75% of cases. For antihistamines, the choice is fexofenadine, hydroxyzine, bilastine, and levocetirizine. Updosing the same antihistamines can lead to even more pronounced improvements. 10 mg or 25 mg doses at bedtime for those with milder cases. In adults with severe itch 50 mg SR either alone or in combination with other treatments. This approach has consistently provided 24-h symptom control with OD dosing.

Dr. Ankur Ghosh

MD (DVL), Khosbagan, Burdwan, West Bengal

In chronic itch patients, sleep and mood patterns are moderately affected in 50–75% of cases. Hydroxyzine OD is preferred in severe chronic itch patients due to its antipruritic properties. Followed by cetirizine and levocetirizine. Hydroxyzine 10 mg SR is prescribed for pediatric populations and 25 mg IR and 50 mg SR are given in moderate itching and severe itching, respectively.

Dr. Arijit Dey MBBS, West Bengal

In chronic itch patients, sleep patterns and mood disturbances depression are moderately to severely disrupted along with prevalence of aggravated itching. affecting approximately 0–50% of cases. Hydroxyzine is suggested for its dual anti-pruritic and anxiolytic benefits. I prefer updosing the same antihistamine rather than combining two different antihistamines. Hydroxyzine is proven to be effective in chronic itch as it provides assured relief from itchiness. Hydroxyzine 10 mg SR is recommended in mild-to-moderate pruritus; 25 mg IR is given in pruritus associated with fungal infection, psoriasis, etc., and 50 mg SR is given in chronic urticaria.

Dr. Jibesh Kar MBBS, Howrah, West Bengal Sleep patterns and mood are moderately disturbed and are observed in 50–75% of chronic itch patients. I consider central and peripheral pathways to be equally important in treating chronic itch patients. Hydroxyzine is effective and demonstrates 24-h symptom control in chronic cases. 10 mg IR is recommended for general pruritus while 25 mg IR for acute urticaria and 50 mg SR for chronic urticaria. My preferred drug choice is hydroxyzine, followed by levocetirizine, fexofenadine, and bilastine.

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