LOW-DOSE TACROLIMUS IN THE TREATMENT OF SEVERE CHRONIC IDIOPATHIC URTICARIA

Tacrolimus (FK 506; Prograf, Killorgin, Ireland), a macrolide lactone, is a potent inhibitor of histamine release from basophils activated by antigen and anti-IgE as well as an inhibitor of histamine release and *de novo* synthesized inflammatory mediators (sulfidopeptide leukotriene C4 and prostaglandin D2) from mast cells.

Aharon Kessel, Ellen Bamberger, and Elias Toubi (2004) decided to investigate the effect of tacrolimus on clinical features in 19 patients with severe unremitting chronic idiopathic urticaria (CIU) lasting for more than 12 months. The outpatient study group was treated daily with tacrolimus, initially at a dose of 0.05 mg/kg to 0.07 mg/kg administered orally twice a day for 4 weeks, followed by 6 weeks of 0.025 mg/kg/day to 0.035 mg/kg/ day. Subsequently, the drug was continued for an additional 2 weeks at a dose of 1 mg per day and then discontinued (total treatment period of 12 weeks). By the end of treatment, improvement was noted in 9 of 12 responders, five patients were nonresponders. Ten of 12 responders were followed for an additional 3 months after tacrolimus discontinuation. These first clinical data suggest that tacrolimus may be a reasonable treatment for severe CIU. To establish tacrolimus as an alternative treatment of CIU unresponsive cyclosporine, the optimal dose and duration of therapy for CIU needs to be investigated in double-blind, placebo controlled studies.

(From: Kessel A, Bamberger E, Toubi E. Tacrolimus in the treatment of severe chronic idiopathic urticaria: An open-label prospective study. J Am Acad Dermatol 2005;52:145-8).

Professor Jasna Lipozenčić, MD, PhD



From the "Nivea" collection of Zlatko Puntijar