

PERSONALIZED APPROACH TO THE TREATMENT OF CHRONIC SPONTANEOUS URTICARIA: A MODERN VIEW OF THE PROBLEM AND THE CLINICAL CASE REPORT

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Abstract. Despite improved clinical recommendations for the diagnosis and treatment of chronic spontaneous urticaria (CSU), there are cases of clinical forms with resistance to standard therapy, when the patient needs a personalized approach to treatment. Diagnosis and treatment of chronic urticaria requires taking a detailed medical history and a thorough physical examination, a complete set of routine laboratory tests, and a step-by-step approach to treatment. The pathogenesis of CSU has not been fully studied. Mast cells, basophils, histamine and other mediators play an important key role. A "common path" for spontaneous and induced urticaria is the release of histamine and other proinflammatory mediators, which explains the effectiveness of H1 blockers as first-line therapy. The primary causes of mediator release are not fully understood and probably do not differ. The aim of the treatment of CSU is to achieve a significant improvement in symptoms with the avoidance or reduction of drug side effects. This publication presents an algorithm for the diagnosis and treatment of CSU, taking into account a personalized approach to the

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treatment of its refractory forms. Our clinical case demonstrates a personalized approach to the treatment of CSU, and the diagnostic algorithm may deviate from the standard approved algorithm if the effectiveness of first-line therapy with antihistamines has not been achieved. Today, the pathogenesis of CSU is not fully understood, and the stages in diagnosis and treatment need improvement, including widespread use of biological therapy with monoclonal antibodies in clinical practice of allergists.

Key words: urticaria, personification, spontaneous urticaria, urticaria, omalizumab.

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