TREATMENT:Lichen Urticatus can be very annoying. The disorder tends to clear on its own within several days to several months but can spontaneously recur. In order to avoid recurrence one must take preventive measures which should be both indoors and outdoors.

Indoors Preventive Measures: This can be achieved by using insecticide sprays, residential insecticides, or by physical means using nets. Synthetic pyrethroides are commonly used as they cause less ecological problems and are available as sprays or vapourizing mats and liquids. Families with pets should exercise flea control in their home, including using flea collors, flea medication, frequent bathing of dog or cat.



Mosquito repellent liquid and spray.

Outdoors Preventive Measures: More care must be taken when outdoors which can be done by wearing protective clothing. Application of insect repellent judiciously which are available in form of cream, sprays and stickers.



# Mosquito Repellent Sticker, Mosquito Repellent Cream & Mosquito Repellent Spray

Symptomatic Treatment:

- 1. Topical steroid cream: To be applied on affected areas at the onset of symptoms.
- Antihistamine tablets: To reduce the spots and itching.
- 3. Topical soothing agent can be used in relieving the symptom of itchiness.
- 4. Antiseptic cream: To reduce or avoid secondary infections.
- 5. Oral Antibiotics: If secondary infection is present.

# किरा टोकाइको एलर्जी / लाइकेन अर्टिकेट्स (LU) (सिसनल एलर्जी) LICHEN URTICATUS (PAPULAR URTICARIA)

LU एकप्रकारको लामो समय र पटक-पटक देखापर्ने एलर्जी हो । जसको मुख्य कारण किराको ठोकाई हो ।

- यो विशेषज्ञारि २-९० बर्षका बालबालिकामा देखिएता पनि कुनैपनि उमेरको व्यक्तिमा यो समस्या हन सक्छ ।
- पानीपर्ने, रार्मी मौसम र बाहिरी काम / खेलकुदको बेलामा प्राय : यो समस्या शुरु हुन्छ र दोहोरिने रार्दछ ।
- यो सरुवा रोग होडन ।

### लक्षण :

- एकै ठाउँ स-साना धेरै चिलाउने राता बिबिरा आउने
- एक प्रकारको आकार जस्तै लामो जारेर धर्सा आउने
- कुनै बिबिरा निको हुँदा-हुँदै अर्को बिबिराका कुप्पा देखिन्छ
- एक ठाउँमा टोकेतापनि शरिरको धेरै भागमा खटिराहरू देखा पर्दछ
- धेरै प्रकारका किराहरु जस्तै लामखुट्ट्रे,भुसुना, उडुस/अपियाबाट यो समस्या हन सक्छ
- रातो चिलाउने डाबरबाट शरू भएर बिचमा पानी फोका पनि देखिन सक्छ
- कहिलेकाही ठला-ठला पानी फोका पनि देखिन सकिन्छ

#### सानाउ

यो समस्या पठक-पठक दोहरिने हुँदा कहिलेकाही दिक्क वा कन्काटिलो लाञन सक्छ । उपचार नजर्दा पनि कहिलेकाही निको त हुन्छ तर फेरि रोहणिल्ला

डाक्टरको सल्लाह अनुसार उपचारपिछ पिन सबै भन्दा जरुरी रोकथाम हो ।

## रोक्तशाम :

- घर भित्र किरा मार्ने स्प्रे (भोल औषधी), भऱ्याल ढोकामा जाली प्रयोग गर्ने ।
- घर पालुवा जनावर कुकुर, बिरालो इत्यादी छन् भने उनीहरूको शरीरमा पनि किराको उपचार तथा रोकथाम ठार्न पर्छ ।
- यस्ता मौसममा बेलकीपरा विशेषञारि परा बाहला र छोपिने लगा लगाउने
- बाहिर धेरै बेर बस्दा/ हिंडदा किराको ठोकाईबाट जोजाउने ऋिम पनि पढक-पढक लजाउनु पर्छ जसले जार्दा किराले ठोक्दैन र यो समस्या दोहरिदैन ।







# DISHARC

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# INTRODUCTION

Lichen Urticatus(LU) or Papular Urticaria is a common disorder manifested by chronic or recurrent and persistent itchy papules caused by a hypersensitivity reaction to insect bites.

LU can occur at any age but it is seen mostly in children 2 to 10 years of age as children have weak resistance as compared to adults. There is increased seasonal incidence of papular urticaria in the summer time and rainy season when children are involved in outdoor activities and in particularly in places where there are lot of insects. The condition is related to an individual's immune response rather than the insect bite itself. The condition is not contagious.



Lichen Urticatus caused by mosquitoes.



A very typical case with grouped lesion.



Lesions can be present in covered areas.

- The initial manifestation of papular urticaria is itching.
- It is difficult not to scratch, so the spots become crusted and may get infected.
- Sometimes one new spot provokes old ones to come up and itch intensely.
- The spot remain for few days to few weeks and can leave persistent marks or scars, especially if they have been scratched deeply.
- Intense pruritus accompanies the eruption, resulting in excoriations, particularly in darkly pigmented individual.
- The lesion is usually reddish in color 0.2 to 2cm in diameter.
- Sometimes each spot develop a fluid-filled blister upto one centimeter in diameter.
- The lesions are commonly found on the face, forearms, legs and other areas of the skin that are usually not covered and are often exposed.
- However, it may also occur in other parts of the body that are covered like lower back but sparing of the genital, perianal and axillary regions.