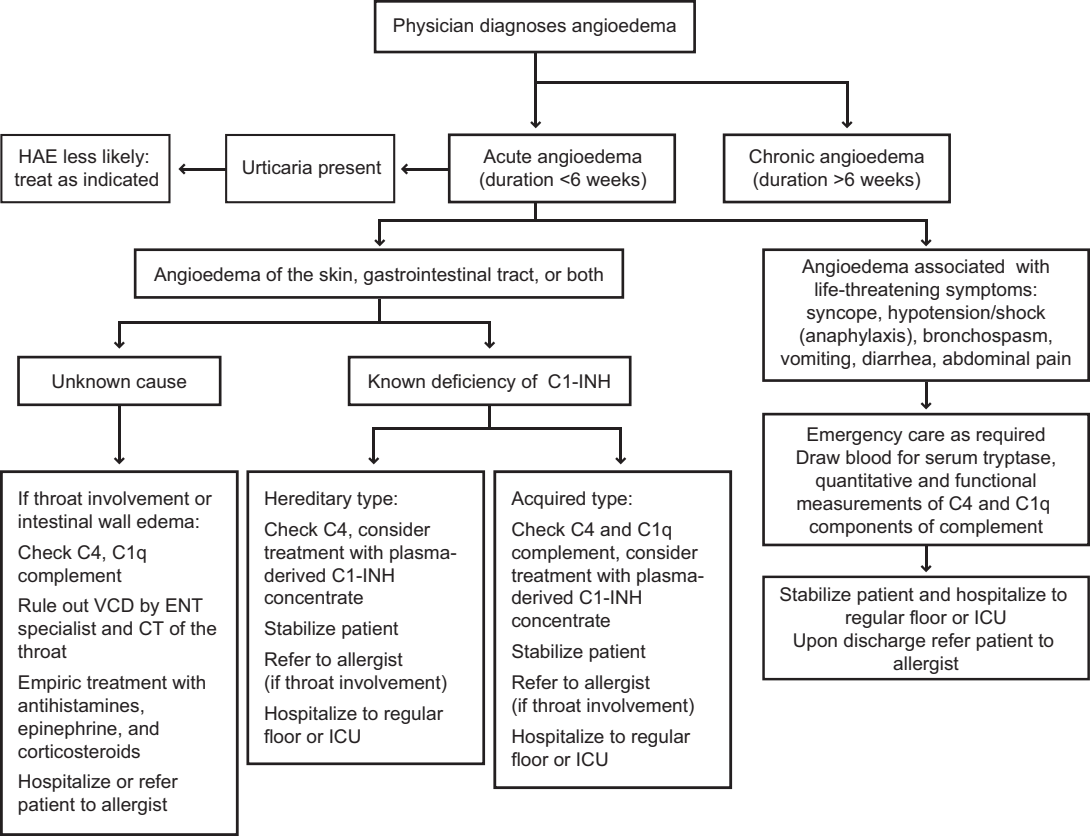
Physician diagnoses angioedema
Acute angioedema (duration <6 weeks)
Chronic angioedema (duration >6 weeks)
Urticaria present
HAE less likely: treat as indicated
Angioedema of the skin, gastrointestinal tract, or both
Angioedema associated with life-threatening symptoms: syncope, hypotension/shock (anaphylaxis), bronchospasm, vomiting, diarrhea, abdominal pain
Unknown cause
Known deficiency of C1-INH
Emergency care as required
Draw blood for serum tryptase, quantitative and functional measurements of C4 and C1q components of complement
Stabilize patient and hospitalize to regular floor or ICU
Upon discharge refer patient to allergist
If throat involvement or intestinal wall edema:
Check C4, C1q complement
Rule out VCD by ENT specialist and CT of the throat
Empiric treatment with antihistamines, epinephrine, and corticosteroids
Hospitalize or refer patient to allergist
Hereditary type:
Check C4, consider treatment with plasma-derived C1-INH concentrate
Stabilize patient
Refer to allergist (if throat involvement)
Hospitalize to regular floor or ICU
Acquired type:
Check C4 and C1q complement, consider treatment with plasma-derived C1-INH concentrate
Stabilize patient
Refer to allergist (if throat involvement)
Hospitalize to regular floor or ICU