## Survey on chronic spontaneous urticaria: a worldwide perspective

## 1 Your country of residence:

○ Afghanistan	O Costa Rica	O Itoly
O Afghanistan	_	Oltaly
Algeria	O Côte d'Ivoire	O Jamaica
O American Samoa	Croatia	O Japan
O Andorra	O Cuba	Q Jordan
O Angola	O Cyprus	Kazakhstan
O Antigua and	O Czech Republic	O Kenya
Barbuda	O Denmark	O Kiribati
O Argentina	O Djibouti	O North Korea
O Armenia	O Dominica	O South Korea
O Australia	O Dominican	OKosovo
O Austria	Republic	O Kuwait
O Azerbaijan	© East Timor	_
-	O Ecuador	O Kyrgyzstan O Laos
O Bahamas	_	
Bahrain	Egypt	O Latvia
Bangladesh	O El Salvador	Lebanon
O Barbados	Equatorial Guinea	CLesotho
O Belarus	O Eritrea	O Liberia
O Belgium	O Estonia	O Libya
O Belize	O Ethiopia	O Liechtenstein
O Benin	O Faroe Islands	O Lithuania
O Bermuda	○ Fiji	<ul> <li>Luxembourg</li> </ul>
O Bhutan	O Finland	O Macedonia
O Bolivia	O France	O Madagascar
O Bosnia and	O French Polynesia	O Malawi
	O Gabon	_
Herzegovina	_	O Malaysia
O Botswana	O Gambia	O Maldives
OBrazil	O Georgia	O Mali
O Brunei	Germany	O Malta
O Bulgaria	O Ghana	Marshall Islands
O Burkina Faso	O Greece	Mauritania
O Burundi	O Greenland	O Mauritius
O Cambodia	O Grenada	O Mexico
O Cameroon	○ Guam	<ul><li>Micronesia</li></ul>
O Canada	O Guatemala	O Moldova
O Cape Verde	O Guinea	O Monaco
O Cayman Islands	O Guinea-Bissau	O Mongolia
O Central African	O Guyana	O Montenegro
Republic	O Haiti	O Morocco
O Chad	O Honduras	_
_		O Mozambique
O Chile	O Hong Kong	O Myanmar
O China	OHungary	O Namibia
Colombia	Olceland	O Nauru
Comoros	◯ India	O Nepal
O Congo,	O Indonesia	<ul><li>Netherlands</li></ul>
Democratic Republic	○ Iran	New Zealand
of the	○ Iraq	O Nicaragua
O Congo, Republic	O Ireland	O Niger
of the	O Israel	O Nigeria

O Northern Mariana	O Sao Tome and	O Togo
Islands	Principe	O Tonga
O Norway	O Saudi Arabia	<ul><li>Trinidad and</li></ul>
○ Oman	O Senegal	Tobago
O Pakistan	O Serbia	O Tunisia
O Palau	O Seychelles	O Turkey
Palestine, State of	O Sierra Leone	<ul><li>Turkmenistan</li></ul>
O Panama	<ul><li>Singapore</li></ul>	O Tuvalu
O Papua New	O Sint Maarten	O Uganda
Guinea	O Slovakia	O Ukraine
O Paraguay	O Slovenia	O United Arab
O Peru	O Solomon Islands	Emirates
<ul><li>Philippines</li></ul>	O Somalia	O United Kingdom
O Poland	O South Africa	O United States
O Portugal	O Spain	O Uruguay
O Puerto Rico	O Sri Lanka	O Uzbekistan
O Qatar	O Sudan	O Vanuatu
O Romania	O Sudan, South	O Vatican City
O Russia	O Suriname	O Venezuela
O Rwanda	O Swaziland	O Vietnam
O Saint Kitts and	O Sweden	O Virgin Islands,
Nevis	O Switzerland	British
O Saint Lucia	O Syria	O Virgin Islands,
Saint Vincent and	O Taiwan	U.S.
the Grenadines	O Tajikistan	O Yemen
O Samoa	O Tanzania	O Zambia
O San Marino	O Thailand	O Zimbabwe
O San Manno	Thalland	O Zimbabwe
2 Your gender:		
○ Female		
O Male		
Maio		
3 Your age:		
•		
O Less than 30		
○ 30-39		
O 40-49		
O 50-59		
O 60-69		
O Greater than 69		
4 Your specialty (Please cho	ose all that apply):	
Alloray/Immunology		
☐ Allergy/Immunology ☐ Dermatology		
☐ Paediatrics		
☐ General practice☐ Other:		
⊔ Oli IԵI		

5 Length of time in your current field of practice (years):
O Less than 5 years O Between 5 and 9 years O Between 10 and 14 years O Between 15 and 19 years O Over 19
6 You work at (Please choose all that apply):
☐ Private practice ☐ University clinic ☐ Hospital ☐ Specialized urticaria centre ☐ Other:
7 You primarily see:
O Outpatients O Inpatients O Other
8 You primarily see:
O Adults O Children O Both
9 How many Chronic Spontaneous Urticaria (CSU) patients do you see per week?
<ul> <li>0-5</li> <li>6-9</li> <li>10-20</li> <li>21-30</li> <li>31-40</li> <li>41-50</li> <li>&gt;50</li> <li>Other (please specify)</li> </ul>
10 How often do your CSU patients complain of angioedema? (% from the total number of patients)
○ Less than 10% ○ 10-20% ○ 21-30% ○ 31-40% ○ 41-50%

○ 51-60% ○ 61-70% ○ 71-80% ○ 81-90% ○ Over 90%
11 Please specify the urticaria guidelines you are aware of (Please choose all that apply):
☐ EAACI/WAO/GA2LEN/EDF ☐ AAAAI practice parameter ☐ National guidelines ☐ I am not aware of any ☐ Other:
12 Which of the guidelines do you follow in clinical practice (Please choose all that
apply):
☐ EAACI/WAO/GA2LEN/EDF ☐ AAAAI practice parameter ☐ National guidelines ☐ I don't use any ☐ Other:
13 If you DO NOT FOLLOW OR DEVIATE from the guidelines, please indicate the reasons behind it (Please choose all that apply):
The guidelines do not undergo revision frequently enough
<ul><li>☐ I rely more on my own clinical experience</li><li>☐ I do not agree with the guidelines' recommendations and/or conclusions</li></ul>
<ul><li>☐ Some of the recommendations are unclear to me and require further detalization</li><li>☐ Some of the guidelines' recommendations cannot be implicated in my country of</li></ul>
residence $\Box$ I had a negative experience with following the guidelines in my clinical practice
Overly simplified approach to CSU management recommended by the guidelines that does not reflect the complexity of the disease
☐ The discrepancy and/or disagreement between the guidelines ☐ Not applicable
Other:
14 Which of the following tests do you order or perform in all CSU patients? (Please choose all that apply):
Complete blood count (CBC) with differential
Erythrocyte sedimentation rate (ESR)

☐ Total IgE ☐ Eosinophil cationic protein (ECP) ☐ D-dimer ☐ Skin prick tests ☐ Allergen-specific IgE ☐ Antinuclear antibodies (ANA) ☐ Tryptase ☐ Autologous serum skin test (ASST) ☐ Search for chronic infections ☐ None ☐ Other:
15 Which of the following tests do you order or perform in patients with long-standing (>6 months), severe(symptoms interfering with normal daily activity and sleep) and poorly-controlled disease (lack of response to antihistamines)? (Check any that apply in addition to those selected in previous question):
CBC with differential ESR CRP Anti-thyroid antibodies (anti-TG/TPO) TSH Total IgE ECP D-dimer Skin prick tests Allergen-specific IgE ANA Tryptase ASST Search for chronic infections None Other:
16 How often do you elucidate a cause of CSU, %? (Note: the cause of CSU is the condition that when treated leads to improvement or resolution of CSU):
<ul> <li>Less than 10%</li> <li>10-20%</li> <li>21-30%</li> <li>31-40%</li> <li>41-50%</li> <li>51-60%</li> <li>61-70%</li> <li>71-80%</li> <li>81-90%</li> <li>Over 90%</li> </ul>

17 What are the common etiologies of CSU in your patients? (Please rank the frequency of CSU causes from 1 to 8: the most common cause - 1, the least common - 8)
☐ Idiopathic ☐ Type-I-Allergy ☐ Autoimmunity/autoreactivity ☐ Underlying systemic disorders ☐ Malignancy ☐ Chronic infections ☐ Food intolerance ☐ Non-neoplasm underlying systemic disorder ☐ Others
18 Which of the following medications do you administer a CSU patient as a first-line treatment? (Multiple answers will be regarded as a combination of medications used in the same patient):
First-generation H1-antihistamines  Second-generation H1-antihistamines at standard dose  Updosed second-generation H1-antihistamines (2-4 times the standard dose)  H2-antihistamines (e.g. famotidine or ranitidine)  Ciclosporin  Omalizumab  Montelukast  Dapsone  Systemic corticosteroids (for less than 10 days)  Systemic corticosteroids (for more than 10 days in a row)  Other:
19 Which of the following medications do you administer a CSU patient as a second-line treatment? (Multiple answers will be regarded as a combination of medications used in the same patient. Answer this question independently from question #18):
First-generation H1-antihistamines  Second-generation H1-antihistamines at standard dose  Updosed second-generation H1-antihistamines (2-4 times the standard dose)  H2-antihistamines (e.g. famotidine or ranitidine)  Ciclosporin  Omalizumab  Montelukast  Dapsone  Systemic corticosteroids (for less than 10 days)  Systemic corticosteroids (for more than 10 days in a row)  Other:

20 Which of the following medications do you administer a CSU patient as a third-line treatment? (Multiple answers will be regarded as a combination of medications used in the same patient. Answer this question independently from questions #18, 19):    First-generation H1-antihistamines   Second-generation H1-antihistamines at standard dose   Updosed second-generation H1-antihistamines (2-4 times the standard dose)   H2-antihistamines (e.g. famotidine or ranitidine)   Ciclosporin   Omalizumab   Montelukast   Dapsone					
Systemic cortic	,		0 days) 10 days in a row)		
Other:	,		To days III a Tow)		
	21 Please indicate your opinion on the overall efficacy of the following agents in treatment of CSU. Please choose the appropriate response for each item:				
	Very high	High	Moderate	Low	Not effective
H1-	9	3			
antihistamines of first	0	0	0	0	0
generation H1-					
antihistamines of second	0	0	0	0	0
generation in	0	0	0	O	O
standard dose H1-					
antihistamines of second					
generation in	0	0	0	0	0
high doses (2- 4 times					
higher) H2-					
antihistamines	0	0	0	0	0
(e.g. famotidine or ranitidine)	0	O	0	O	0
Ciclosporin	0	0	0	0	0
Omalizumab	0	0	0	0	0
Montelukast	0	0	0	0	O
Dapsone	O	O	O	O	0
Systemic	$\circ$	0	0	$\circ$	0

(for less than

	Very high	High	Moderate	Low	Not effective
10 days) Systemic					
corticosteroids (for more than 10 days in a row)	0	0	0	0	0

**22 Please assess tolerability of the following agents in treatment of CSU.** Please choose the appropriate response for each item:

	Good	Moderate	Bad
H1- antihistamines of first generation	0	0	0
H1- antihistamines of second generation in standard dose H1-	0	0	0
antihistamines of second generation in high doses (2- 4 times higher)	0	0	0
H2- antihistamines (e.g. famotidine or ranitidine)	0	0	0
Ciclosporin	0	0	0
Omalizumab	0	0	0 0 0
Montelukast	0	0	0
Dapsone	0	0	0
Systemic corticosteroids (for less than 10 days)	0	0	0
Systemic corticosteroids (for more than 10 days in a row)	0	0	0

Thank you very much for your participation!