

PRURITUS

## INTERVENTIONS FOR PRURITUS OF UNKNOWN CAUSES

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Introduction: Pruritus is the predominant symptom of many diseases and can best be described as a sensation that leads to the desire to scratch. Pruritus can be classified according to its duration, as acute or chronic, if it lasts less or longer than six weeks respectively. However, to date, there is no standardised accepted classification of chronic pruritus. The International Forum for the Study of Itch (IFSI) has proposed a classification system for chronic pruritus, describes six categories of underlying pruritogenic diseases. This systematic review will focus on 'Category VI - pruritus of unknown cause'

The prevalence of pruritus of unknown cause in individuals with generalized pruritus range ranged from 3.6% to 44.5%, with the highest prevalence among the elderly. The initial clinical approach in people with pruritus includes a medical history, physical examination and a complete blood test, a chest radiograph and when is appropriate, tests to identify endemic parasitic infections. However, in some cases the underlying cause remains unclear, it is called 'Pruritus of unknown cause (PUC).

Management options for pruritus of unknown cause may include a wide variety of treatments. These treatments can be classified as either topical or systemic, and may be available as further into pharmacological or and nonpharmacological therapies.

Pruritus of unknown cause is a challenging condition to treat due to its unidentified etiology.

Objectives: To assess the effects of interventions for PUC in adults and children.

Materials and Methods: Cochrane Systematic review. We will include randomized controlled







## ABSTRACT BOOK ABSTRACTS



trials and quasi-randomized controlled trials. We will follow standard Cochrane methods for study selection, data extraction and synthesis.

Results: we have screened 6218 references and we are currently extracting data from the included studies. We expect to present the final results of this review in the Conference.

Conclusions: conclusions will be presented at the Conference.



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