

Differentiating HAE from other types of angioedema



	HAE-C1-INH ^{1,5}	HAE-nC1-INH ^{1,2,6,7}	Mast cell-mediated angioedema ^{*1,2}	Acquired angioedema with low C1-INH ^{1,2,8}	ACEi-induced angioedema ⁹
Onset of attacks	Begins during childhood ^{1,2}	Begins during or after the second decade of life ⁷	All ages ²	Usually begins after 30 years of age ^{1,2}	Variable (50% within first week of treatment) ⁹
Response to antihistamines and corticosteroids	No response ^{1,2}	No response ²	Response ¹	No response ²	No response ⁹
Family history	Yes, ~75% of cases ¹	Yes ¹	No ^{1,2}	No ¹	No ¹
Gender-based differences	Male to female ratio 1:1 ³	More prevalent in females ⁶	Not reported	Not reported	More prevalent in females ⁹
Duration of attacks	2–5 days ⁵	2–5 days ⁷	1 day ²	2–5 days ⁸	Resolves within 2 days upon ACEi discontinuation in the majority of cases ⁹
Abdominal attacks	Yes ^{1,2}	Yes ⁷	Not reported	Yes ⁸	Yes ⁹
Urticaria and pruritus	No ^{1,2}	No ⁷	Often ²	No ⁸	No ⁹
Prodromal symptoms	84% of patients ⁴	Not reported	Not reported	Not reported	Not reported

*Includes histamine. ACEi, angiotensin-converting enzyme inhibitor; HAE, hereditary angioedema; HAE-C1-INH, HAE with C1-esterase inhibitor deficiency;

HAE-nC1-INH, HAE with normal C1-esterase inhibitor.

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