

Hyperhidrosis: Quality of life and treatment with botulinum toxin types A and B

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Introduction:

Hyperhidrosis has been shown to have a severely negative effect on quality of life, as measured by the Dermatology Life Quality Index (DLQI). However, physical, psychosocial, and consequence-related symptoms of the disease are difficult to fully obtain with current instruments. Consequently, there is a risk that the burden of hyperhidrosis is underestimated.

Methods:

Based on a previous retrospective study¹, a new questionnaire; the Swartling Hyperhidrosis Index (SHI), was created. The aim was to capture symptoms of hyperhidrosis on a deep level. A study was undertaken to investigate the usefulness of the SHI as well as to present quality-of-life background data and treatment effect/adverse events after injections of botulinum toxin (BTX) in patients with hyperhidrosis.

Results:

The SHI from 505 consenting Swedish patients, visiting the Hidrosis Clinic in Copenhagen, were analyzed together with other routinely used questionnaires and case report notes. The median SHI score was 31 points ($Q_1=26$, $Q_3=37$). The score ranges from 0 to 48, with a higher score indicating a worse outcome. According to the SHI, the most troublesome issues were physical contact, low self-esteem, discomfort with clothing, and feeling unhygienic. The median DLQI score ($n=470$) was 16 points ($Q_1=12$, $Q_3=21$) of 30 points possible. Treatment with BTX type A and/or BTX type B were given to 504 patients in totally 949 areas (284 patients treated multifocal areas). Out of these 949 treatments 74 adverse events were reported; most commonly palmar muscle weakness ($n=25$), compensatory hyperhidrosis ($n=18$), forehead muscle weakness ($n=8$) and dry mouth ($n=5$).

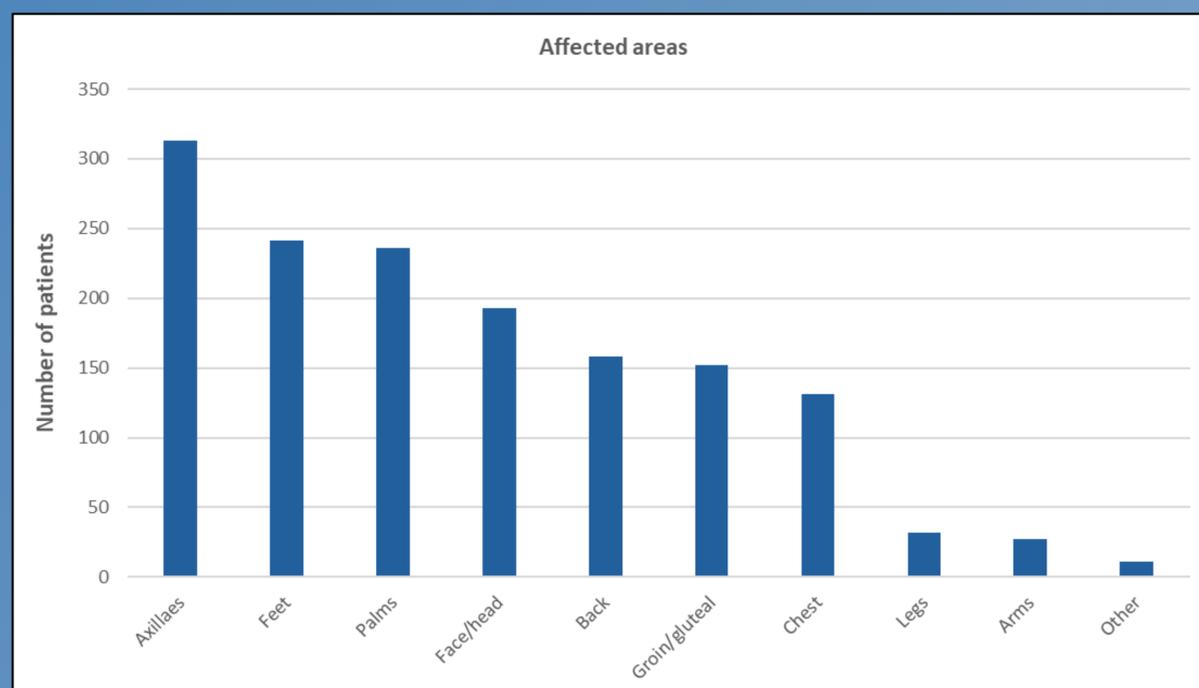


Figure 1. Affected areas reported by the patients. Almost 80% suffered from multifocal hyperhidrosis.

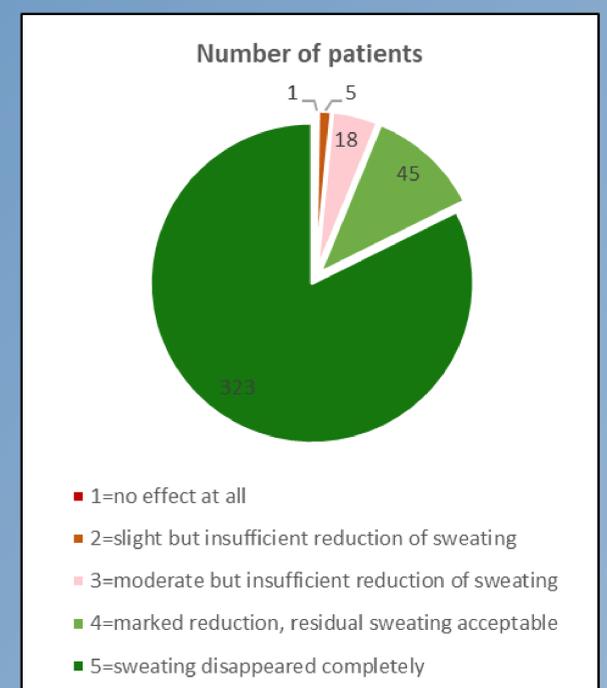


Figure 2. The treatment effect of BTX was obtained for 392 patients in the case report notes at the subsequent visit.

Conclusions:

Hyperhidrosis has a severely negative effect on patients' quality of life, measured by DLQI. Treatment with BTX type A and/or BTX type B reduced the excessive sweating in a high degree. The SHI seems to be a promising questionnaire to profoundly capture problematic issues for patients with hyperhidrosis. Further validation of the SHI is warranted.

Reference:

¹Mirkovic SE, Rystedt A, Balling M, Swartling C. Hyperhidrosis Substantially Reduces Quality of Life in Children: A retrospective study describing symptoms, consequences and treatment with botulinum toxin. *Acta Derm Venereol.* 2018;98:103-107.