Introduction: Hidradenitis suppurativa (HS) is a chronic, inflammatory, recurrent and debilitating skin disease, which is frequently associated with other systemic conditions. In particular, several studies have suggested that patients with HS have a higher cardiovascular risk compared with healthy controls (HCs).

Objective: We carried out a study to evaluate the correlation between homocysteinaemia and HS to allow early identification of cardiovascular risk among patients under study.

Materials and Methods: This was a prospective, nonrandomized, case–control study. The case group consisted of 26 patients with HS (15 women, 9 men; mean age 32 years, range 18–52 years), and the HC group also consisted of 26 people (16 women, 8 men; mean age 31.1 years (range 18–55 years). Disease severity was evaluated by Hurley score, Sartorius score and the six-point Physician Global Assessment (HS-PGA). Plasma homocysteine concentration was determined by chemiluminescent microparticle immunoassay (CMIA).

Results: The mean plasma levels of homocysteine in patients with HS (mean 16.71 ± 10.17) were significantly higher than the control group (12.96 ± 8.16). As we expected, there was a significant overlap in homocysteine plasma levels among the patients under study. Moreover, we found a statistically significant correlation between the plasma levels of homocysteine and disease severity evaluated using Sartorius score.

Conclusions: In conclusion, we found a significant increase in plasma homocysteine in patients with HS, which correlated with disease severity, and was in line with a similar increase reported previously for patients with psoriasis. The study was limited by its small sample size, and further studies with large groups are needed to verify these preliminary results.