



ACNE, ROSACEA, AND RELATED DISORDERS (INCLUDING HIDRADENITIS SUPPURATIVA)

PERSONAL AND FAMILY HISTORY OF 1428 SUBJECTS WITH HIDRADENITIS SUPPURATIVA: EPIVER STUDY

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Introduction: Epiver survey is a French multicenter study and one of the largest series of patients with Hidradenitis Suppurativa (HS) non-retrieved from health insurance databases and diagnosed by experts.

Objective: As part of a French network that studies HS (RésoVerneuil), we wanted to characterize the personal and family history of our patients with HS. These data came from the Epiver survey.

Material and methods: From March 2016 to December 2017 RésoVerneuil members anonymously recorded data of their patients with HS. Personal history (pilonidal sinus (PNS), ance, acne treated with isotretinoin), cardiovascular history (arterial hypertension, stroke/ transient ischemic attack (TIA), angina/myocardial infarction, dyslipidemia, insulin-dependent diabetes, non-insulin-dependent diabetes), inflammatory disease history (inflammatory bowel disease (IBD), inflammatory rheumatism (IR)) and familiar history (HS, PNS, IBD, IR) were investigated.

Results: The incidence of familiar and personal history of IBD and IR was particularly high. It





is considered that 0.5% of the French population is suffering from IBD against 3.5% of our patients. 10% of people with IBD have a first degree relative with IBD, whereas 4.7% of our patients and IBD-free population have a direct relative with IBD. The incidence of personal history of IR was 5.1%, whereas it is assumed that the incidence of ankylosing spondylitis would be 1% in the general population. Regarding risk factors for cardiovascular disease (hypertension, dyslipidemia, diabetes) there was an unusually high incidence in our young population with an average age of 33.5 years (median 32). Similarly, we were surprised to notice an incidence of 2% of stroke/TIA or angina pectoris or myocardial infarction in our population.

Conclusions: The association between HS and IBD/IR is so strong that a multidisciplinary care of patients with HS should be carried out not limited to dermatological examination.

