



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

WEIGHT LOSS AND DIETARY INTERVENTIONS FOR HIDRADENITIS SUPPURATIVA: A SYSTEMATIC REVIEW

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Introduction: Hidradenitis suppurativa (HS) is an inflammatory disorder characterized by recurrent, painful, and malodorous abscesses and nodules predominantly in skin folds. It is associated with substantial morbidity and poor quality of life. There are no curative therapies, and the only approved biologic drug has variable efficacy and requires high doses, making adjunct treatments crucial. An important risk factor for disease severity is obesity.

Objective: To conduct a systematic review examining weight loss and dietary interventions for HS. Our secondary objective was to examine nutritional supplements in HS.

Materials and Methods: A systematic literature search was conducted using Medline, EMBASE and the Cochrane Database. We included all study types in adults (>18 years), with a minimum sample size of 5, examining any dietary or weight loss intervention. Two authors screened n=1279 articles of which nine met inclusion criteria.

Results: All included studies were observational. Weight loss interventions described patient controlled weight loss, or bariatric surgery. Although weight loss was associated with regression of HS lesions, there was also evidence that subsequent increase in skin folds may exacerbate symptoms and necessitate excision of excess skin. Other dietary interventions involved eliminating dairy and brewer's yeast. Nutritional supplements included zinc gluconate, vitamin D and riboflavin. All interventions were associated with various measures of decreased HS severity, such as reduction in the number of nodules and decreased frequency of flares.

Conclusions: HS symptoms improve with weight loss, and dietary restriction of dairy or brewer's yeast. Although weight loss may initially improve symptoms, substantial weight reduction can increase panniculus, thereby potentially exacerbating underlying HS.





Supplementation with oral zinc gluconate, vitamin D, and riboflavin have a suppressive, rather than curative, effect on HS lesions in single studies. Prospective randomized controlled trials are required to validate these findings. Clinicians should consider routinely discussing healthy eating with HS patients.

