ABSTRACT BOOK ABSTRACTS



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HYPERHIDROSIS

ASSESSMENT RATES OF SWEAT PRODUCTION IN PRIMARY HYPERHIDROSIS: BEFORE AND AFTER IONTOPHORESIS

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Introduction: Treatment of localised primary hyperhidrosis is difficult, with variable results, long-lasting and cost-time consuming and, depending on the chosen method, invasive and very expansive (such as botulinum toxin injections or surgery).

Objectives: To estimate the usefulness of Minor test in evaluating the response of localised hyperhidrosis to iontophoresis.

Materials and Methods: Minor test implies the following steps: 2% iodine solution is applied to the affected area, a few minutes of air-drying and then corn starch powder is brushed on the area. Rarely the sweating could be stimulated by physical exercise, sauna or drug administration, as pilocarpine.

When sweat spreads to the surface of the affected skin, the starch and iodine combine and yellow color changes to dark blue proving the presence of the sweat.

lontophoresis is easy to perform, not expensive and resides of immersing the palms, soles and /or axillary regions in tap water for 10 minutes/session, while passing a small electrical current through the treated area. Protocol varies based on the number of sessions per week and number of weeks of initial treatment. For responders a basal low frequency session (1-2/week) could continue for months.

Digital photography is mandatory before and after each session for follow-up and validation the treatment.

Results: Hyperhidrosis Disease Severity Scale (HDSS), Hyperhidrosis Impact Questionnaire (HHIQ), Dermatology Quality of Life Index (DLQI), and gravimetric sweat











production measurements are reliable methods to appreciate the excessive sweating in primary hyperhidrosis. More practical could be the quality-of-life and impairment of daily activities measurements and, in our experience, Minor test, especially in patients who undergo iontophoresis.

Conclusions: The response to treatment, clinical examination and patient's appreciation of sweating were evaluated. The association to starch-iodine test could be a qualitative test to asses sweating.



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