

HYPERHIDROSIS

MANAGEMENT OF HYPERHIDROSIS ABOUT A SERIES OF 21 CASES

M El Amraoui (1) - A Achbouk (2) - N Hjira (1) - M Boui (1)

Mohammed 5 University, Dermatology-venereology, Mohammed V Military Teaching Hospital, Rabat, Morocco (1) - Mohammed 5 University, Plastic Surgery, Mohammed V Military Teaching Hospital, Rabat, Morocco (2)

Background: Hyperhidrosis (HH) is an excessive production of sweat which is responsible for aesthetic and social discomfort with a major impact on the quality of life and an increased frequency of infectious complications. Despite its relative rarity, it is sometimes a diagnostic and therapeutic puzzle for the dermatologist.

Objective: To study the epidemiological, clinical, etiological, therapeutic and evolutionary profile of hyperhidrosis in the dermatology department of the Mohammed V military training hospital in Rabat

Materials and Methods: Descriptive prospective study, conducted over a period of 12 months (June 2017-May 2018) according to a pre-established exploitation sheet.

Results: 21 cases, 65% of women and 35% of men, age of patients ranged between 13 and 44 years with an average of 27.41 years. 94% of HH were localized, 6% were generalized and no case of regional HH. The most frequent locations were: 65% palmar, 35% axillary and 29% plantar. The severity according to the HDSS score was: level I 0%, level II 35%, level III 41% and level IV 23%. The treatments used were antiperspirants 65%, lonophoresis 29%, Oxybutynin 35%, Botulinum toxin 41% and thoracic sympathectomy 23%. The effectiveness of treatments ranged from none to 100% with an average of 64%, the most effective treatments were botulinum toxin and thoracic sympathectomy, the least effective treatments were antiperspirants and Oxybutynin, while ionophoresis is in the intermediate zone. Patient satisfaction ranged from 3/10 to 10/10 with an average of 7.17 / 10.

Conclusions: Hyperhidrosis profoundly affects the psychic state of particularly young and adolescent patients. Light forms can be managed by antiperspirants, Oxybutynin and iontophoresis, whereas moderate and severe forms justify the use of botulinum toxin or even thoracic sympathectomy and hence the value of multidisciplinary collaboration.





