



QUALITY OF LIFE, QUALITY OF CARE, AND PATIENT SAFETY

THE IMPACT OF HIDRADENITIS SUPPURATIVA ON PHYSICAL AND MENTAL HEALTH IS HIGHER THAN THAT OF OTHER NON-DERMATOLOGICAL CHRONIC CONDITIONS

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Background. Hidradenitis suppurativa (HS) has a heavy impact on patients' quality of life (QoL), which has been shown to be worse than most dermatological conditions. However, a comparison with non-dermatological diseases has rarely been done.

Objective: To compare the impact of HS on QoL to that of important chronic non-dermatological conditions.

Materials and Methods: This is a cross sectional study on consecutive HS patients from the hospital registry of a dermatological center. QoL was measured using the 36-item Short Form Health Survey Questionnaire (SF-36), which is a generic indicator of health status. Results can be summarized into a physical score (PCS) and a mental score (MCS). Dermatology-specific QoL was measured by the Skindex-17, and psychological distress by the 12-item General Health Questionnaire (GHQ-12). SF-36 scores of HS patients were compared to U.S. normative scores for minor and major medical conditions, and psychiatric conditions.

Results: PCS scores were consistently lower in older patients, in patients with higher clinical severity, older age of onset, high level of pain, higher number of involved body sites, lower dermatological QoL, in smokers, and GHQ-cases. MCS was associated with sex (worse scores in women), lower dermatological QoL, and with GHQ-cases. QoL in HS patients was worse than that of minor medical and psychiatric conditions for the physical component, and significantly lower than severe medical conditions for pain. As for the mental components, HS patients had significantly lower scores than medical conditions and almost superimposable scores to psychiatric conditions.





Conclusions: The impact of HS is much stronger than that of important medical conditions such as type-2 diabetes and hypertension. The real burden of HS, measured by patient-reported outcomes and not only by classical outcomes, such as mortality, must be taken into account in its management and treatment.

