



Primary Hyperhidrosis: An update on Epidemiology and Disease Severity

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Background

- Primary hyperhidrosis (PHHS) is characterized by excessive sweating due to overactive sympathetic nerves
- Impacts work, social relationships, physical activities, and impairs emotional and mental health

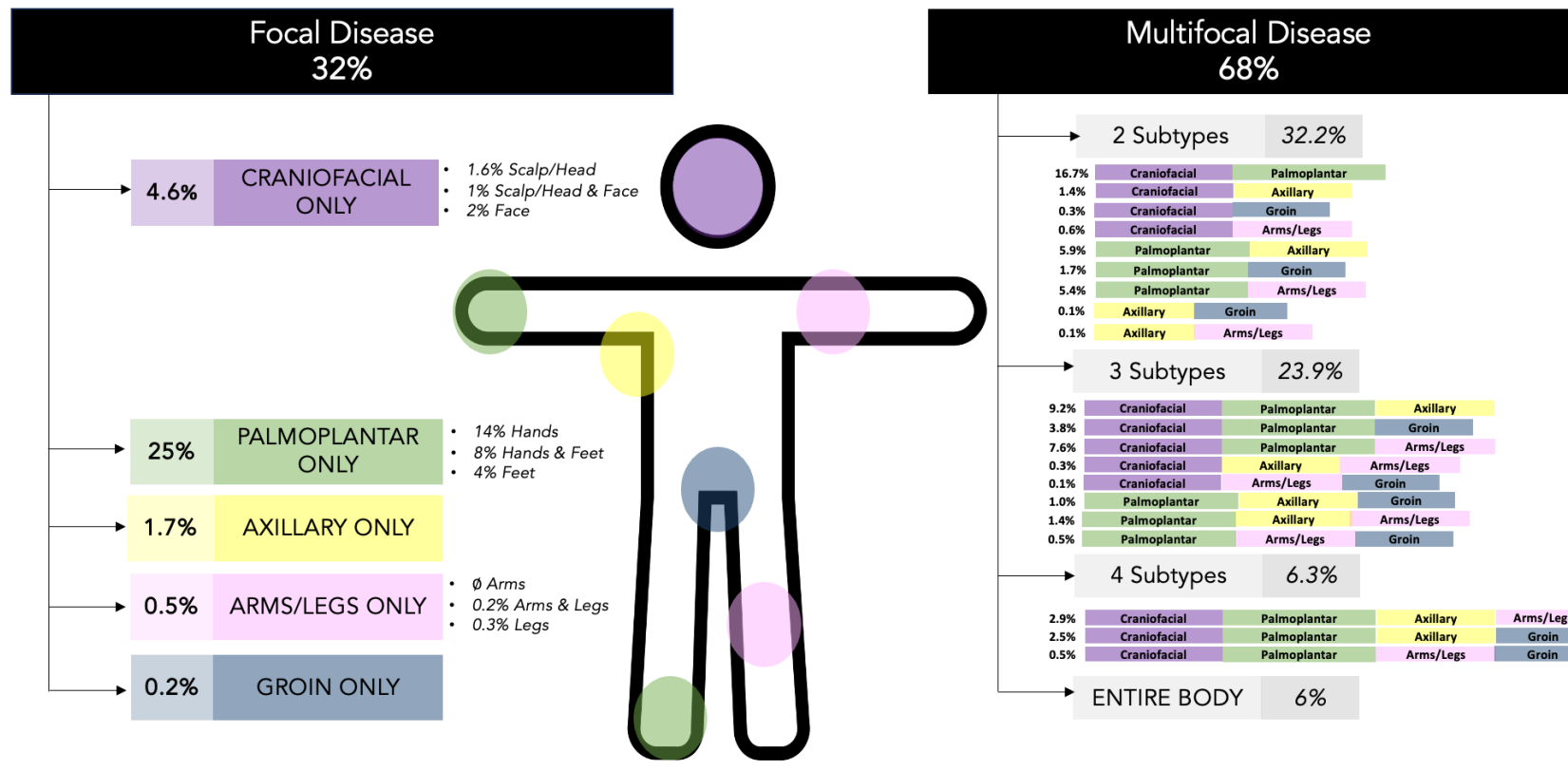
Objectives: Provide updated demographic data on PHHS and evaluate its severity and impact.

Methods: An IRB-exempt survey was electronically distributed to members of the International Hyperhidrosis Society. Respondents with secondary hyperhidrosis were excluded. Compiled results were analyzed with GraphPad Prism using Fishers exact tests for categorical variables (significance= $P < 0.05$).

Demographics

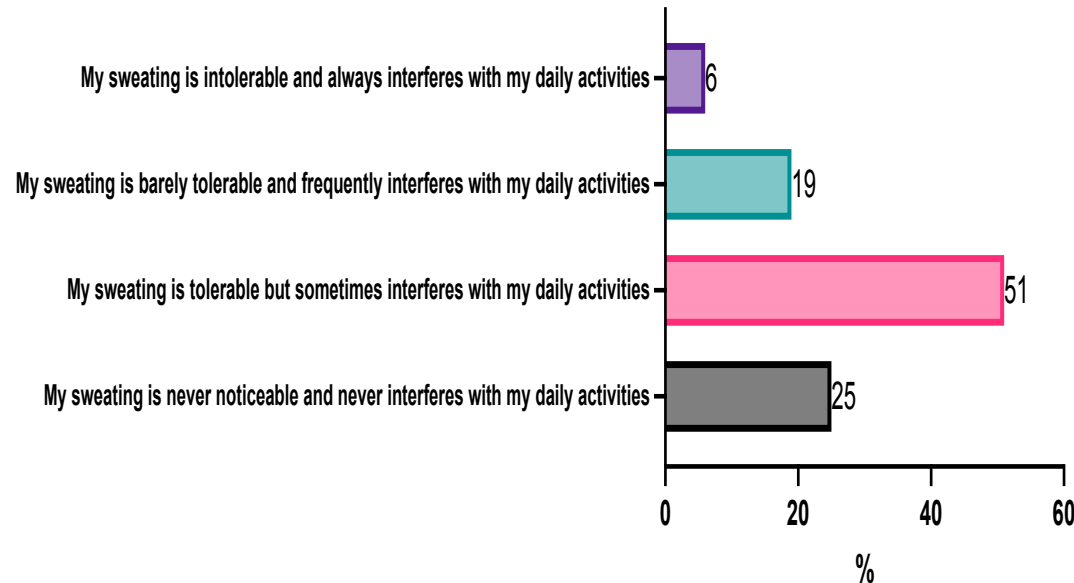
- Of the 1,668 respondents, **637 qualified for a PHHS diagnosis**
- 57% female, 42% male, 1% non-binary
- Age range: 18-74

Results: Affected Body Regions and Comorbidities

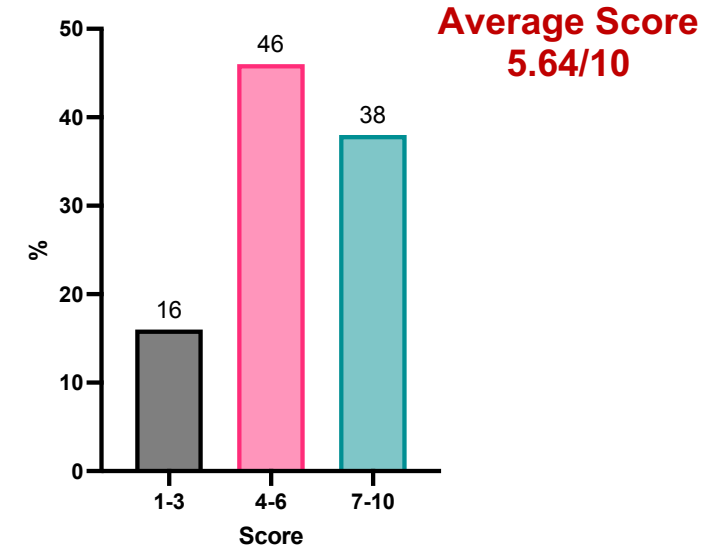


Most common comorbidities: Eczema (35%)/Atopic dermatitis (24%) > Acne (21%)>psoriasis (16%) >Hives (15%) > Lichen Planus (10%)

Impact of HHS on QOL



During the last 3 days, how would you rate your sweating at its worst?



- 80% under dermatologic care
- 80% using medication or receiving treatment
- Self-identified African Americans significantly more likely to experience severe disease than other groups ($p < 0.05$), though just as likely to be receiving care



There may be a higher occurrence of palmoplantar disease than previously reported



Eczema/Atopic Dermatitis, and Acne are the most common cutaneous comorbidities



Potentially higher degree of severity in those identifying as African American



Despite 80% of patients receiving care from dermatologists, the mean severity was moderate, emphasizing the need for increased PHHS awareness, education, and therapeutic options.