



FACT SHEET

Hidradenitis Suppurativa

WHAT IS HIDRADENITIS SUPPURATIVA (HS)?

Hidradenitis suppurativa (HS), sometimes referred to as “acne inversa” by dermatologists, is a chronic, often painful, immune-mediated disease characterized by inflamed areas typically located around the armpits and groin. These inflamed areas often include lesions, nodules, boils and abscesses, and usually occur where many oil and sweat glands are located, as well as under the breasts, on the buttocks and in the inner thighs, where skin rubs together.^{1,2}

Though it affects the skin, HS is an inflammatory disorder, which means the condition is associated with irregularities in the body’s immune system. The exact cause of HS is unknown, but immunologic or structural abnormalities of the hair follicle are believed to play a role in its development.^{2,3,4}

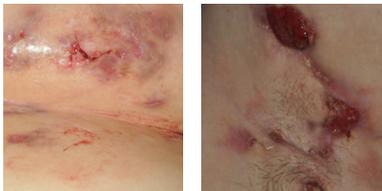
WHO DOES IT AFFECT?

- HS can occur at any age, but the condition typically develops in adults in their early 20s, with declining rates after the age of 50 to 55.²
- Women are more likely to develop HS than men. The ratios reported range from twice as likely to five times more likely.^{3,5}
- A link with sex hormones is suggested by prevalence peaking during the reproductive years, but there is no evidence of a direct link.^{3,5}
- Research shows that HS may run in families, as about one third of people diagnosed with HS have a family history with the condition.^{2,3,5}
- Current research suggests a link between HS and both smoking and obesity.^{2,5}

SIGNS AND SYMPTOMS

Mild cases of HS can resemble small bumps or blackheads, while patients with more severe forms can have multiple interconnected sinus tracts and abscesses, which sometimes release fluid and have an unpleasant odor. Lesions caused by HS can be very uncomfortable and painful, often interfering with the quality of life of those living with the condition.^{1,2,3}

Dermatologists typically assess the signs and symptoms of HS on a scale – these categories are developed from a clinical measure of severity called the Hurley scale.^{2,3,5}

<p>Mild Cases:</p> <p>Single or a few isolated boils without sinus tracts or scarring ^{2,3,5}</p>	<p>Painful bumps and abscesses in the armpits, groin, under the breasts, buttocks or inner thigh. These bumps generally start as firm, pea-sized nodules. Many cases are misdiagnosed as common boils or acne. ^{2,3,5}</p>	
<p>Moderate Cases:</p> <p>Recurring boils in multiple areas with scarring and sinus tracts ^{2,3,5}</p>	<p>Scarring can occur with HS as a result of long-term or repeat occurrences in a single location. ^{2,3,5}</p>	
<p>Severe Cases:</p> <p>Widespread nodules (some as large as golf balls) with many interconnected sinus tracts, which may lead to scarring and release of unpleasant-smelling pus ^{2,3,5}</p>	<p>The disease course varies over time. Abscesses may go away on their own, rupture discharging pus, or get worse over time. It’s common for the affected areas to emit an unpleasant odor. ¹</p>	

In most patients, flares of HS are accompanied by increased pain and suppuration, or draining, at varying intervals, often occurring premenstrually in women.²

PREVALENCE AND IMPACT

HS is an immune-mediated disorder and its exact prevalence is unknown. It's estimated that it affects at least one percent of the general adult population.^{1,2}

DISEASE MANAGEMENT

There is currently no cure for HS and there are no approved medications for the treatment of the disease by any regulatory health authorities. Surgery has been used for recalcitrant HS.^{1,3} Patients who have symptoms of HS may wish to consult a dermatologist, who is an expert in diagnosing and treating skin diseases like HS.⁶

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