



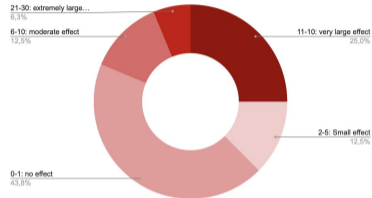
Hidradenitis suppurativa (HS) is a multifactorial, chronic, inflammatory and recurrent disease of the hair follicle. Usually, it develops after puberty and presents with inflammatory nodules, abscesses and draining sinus tracts with subsequent scarring. Moreover, it has predilection in axillary, inguinal and anogenital regions. The Hurley clinical staging system is used to classify HS into three severity groups. HS significantly impairs quality of life (QoL) and has substantial psychosocial burden associated with anxiety and depression. Dermatology Quality of Life Index (DLQI) and Hospital Anxiety and Depression Scale (HADS) have been used to determine impairment of QoL and risk of psychiatric disorders. The aim of this study is to evaluate and describe psychological burden and the impact on patient QoL according to localization of lesions and disease severity.

We performed a retrospective observational study at a dermatological center in Bogotá, Colombia. We characterized patients diagnosed with HS, attended in the institution from January 2016 to March 2021. We evaluate location of the lesions (neck, inframammary fold, intergluteal cleft, thighs, axillary, inguinal, preauricular and anogenital regions), severity of the disease according to Hurley stage, anxiety and depression symptoms with HADS-A and HADS-D and impairment of quality of life using DLQI. We excluded three patients who had incomplete information. Data was collected and analyzed using Microsoft® Excel and SPSS 26.

Of 28 patients 78.6% (n= 22) were women. The median age was 28 years (IQR 19). The most common location was the axillae (60.7%) followed by inguinal region (57.1%), most of them were classified as "moderate effect" (33.3%) and "very large effect" (35.7%) on patients' quality of life according to DLQI respectively. None of the patients affected in the axillae or the inguinal region had considerable symptoms of anxiety or depression. DLQI's most frequent result was "very large effect" (25.0%) and among them Hurley 2 was the most common severity stage, as well as the 6 patients (21.4%) that showed high risk of anxiety by HADS-A. HADS-D showed high risk of depression in 2 patients (7.1%) and both of them were classified as Hurley 3.

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DLQI in HS patients



As it is reported in literature, women in their thirties were more commonly affected by HS. Additionally, axillae and inguinal involvement showed a greater impact in the patient's quality of life. Chronicity of the disease and physical changes are the most determinant factors impairing life quality. Patients with higher severity of the disease had considerable symptoms of psychiatric disorders mentioned above. This study shows the significant burden on patients with HS which is commonly underestimated, highlighting the importance of interdisciplinary management. In future studies we can apply more specific assessment tools such as HSSA (HS Symptom Assessment), HSIA (HS Impact Assessment) and HSQoL in order to quantify the burden of disease leading to higher awareness of HS.