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The Risk Factors of Compensatory Sweating in Patients Who Underwent One-Stage Bilateral Single-Port Thoracoscopic Sympathectomy for Hyperhidrosis

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Objectives: Postoperative compensatory sweating is the most common recent complication ranging from 33% to 85%. Compensatory sweating is a concern and often precludes surgery as a definitive therapy. The aim of this study is to identify the risk factors for compensatory sweating on patients who have undergone one-stage bilateral single-port thoracoscopic sympathectomy for hyperhidrosis.

Methods: From January 2011 to December 2017 one-stage bilateral single-port thoracoscopic sympathectomy was performed for focal hyperhidrosis in 154 patients. Follow-up data were obtained from hospital charts, and the patients were supposed to answer a detailed standard questionnaire by means of telephone interview. The data including characteristics of patients, Hyperhidrosis Disease Severity Scale (HDSS) score, duration of surgery, hospital stay, postoperative complications, compensatory sweating, recurrence of hyperhidrosis and patient satisfaction were collected. Binary Logistic Regression Analysis was practiced to assess the association with potential risk factors for compensatory sweating.

Results: Ninety-one (59%) patients were male and 63 (41%) patients were female (age range 16–47 years, mean 24 years). T2-T3 resection was performed on 29 (18.8%) patients with craniofacial and palmar hyperhidrosis. T3–T4 resection was performed on 125 (81.2%) patients with only palmar hyperhidrosis or axillary and palmar hyperhidrosis or axillar, palmar and pedal hyperhidrosis. Compensatory sweating occurred in 24 (15.5%) patients. When patients being asked to rate the severity of their compensatory sweating, the rate is -as moderate- that by eighteen patients (75%) and as severe by six patients (25%). No intolerable compensatory sweating was reported. According to the logistic regression analysis, T2-T3 sympathectomy (OR=6.243, p=0.030), axillary localization hyperhidrosis (OR=3.345, p=0.015), and HDSS score (OR=8.854, p=0.001) variables were identified as risk factors for compensatory sweating occurrence.

Conclusion: The axillary localization hyperhidrosis, T2-T3 sympathectomy, and high HDSS score were identified as risk factors for compensatory sweating occurrence. Patients with these risk should receive extensive information for postoperative compensatory sweating.

Keywords: Hyperhidrosis, thoracoscopic sympathectomy, compensatory sweating