Here is what you need to know, and how you can find out.

**WHAT IS HIDRADENITIS SUPPURATIVA (HS)?**
HS is a painful skin disease that can be identified by:

1. **THE TYPES OF LESION IT CREATES ON THE SKIN**, such as:
   - **NODULES** (hard lumps under the skin)
   - **ABSCESSSES** (pus surrounded by swollen skin)
   - **SINUS TRACTS/FISTULAS** (a passage that links two or more lesions together)

2. **RECURRENCE** (a return of lesions after they disappear)

3. **LOCATION OF LESIONS IN PARTS OF THE BODY WHERE SKIN TENDS TO RUB TOGETHER**, and where specialized sweat glands called apocrine glands are found:
   - **ON AND AROUND THE BREASTS**
   - **IN THE ARMPITS** (one of the most commonly affected areas)
   - **BETWEEN THE BUTTOCKS** (has the most negative impact when affected)
   - **IN THE GROIN** (another commonly affected area)

**HS MAY BE DUE TO DEFECTS WITHIN THE HAIR FOLLICLE**

**Hair follicle**: A cavity where hair grows out of the skin

**WHO USUALLY DEVELOPS HS?**

- **1% OCCURRENCE IN THE POPULATION**
- **22 YEARS AVERAGE AGE WHEN HS FIRST APPEARS**

**CAN INCREASE THE RISK OF HS**

- **Sex hormones**: Since HS occurs after puberty, sex hormones likely play a role.
- **Smoking**: Smokers have greater odds of developing HS than non-smokers or ex-smokers.
- **Excess weight**: Researchers have found a link between HS and obesity.

**DIAGNOSED BY A DOCTOR**

- **5–8 YEARS AFTER IT STARTS**
- **62% OF PEOPLE WITH HS WERE DIAGNOSED BY A DERMATOLOGIST**

**A DERMATOLOGIST IS TRAINED TO KNOW THE DIFFERENCE BETWEEN SKIN CONDITIONS**

*Historically, there has been low awareness of HS and its symptoms among doctors due to low prevalence of the disease.*
WHAT HS IS NOT

- It is not an infection, or caused by an infection
- It is not a series of ordinary sores, cysts or boils
- It is not a type of severe acne
- It is not contagious
- It is not caused by poor hygiene

HOW IS HS DIAGNOSED?

The diagnosis of HS and its severity is clinically assessed – there are no lab tests to do this. Disease severity is assessed with consideration of multiple factors including lesion type(s), lesion count, scarring, pain, previous treatment failures, physical and psychological impact and other impact on quality of life.

While there is no single scale that captures all these aspects, several different scales may be used by physicians in these assessments.

WHAT ARE SOME OF THE COMMONLY REPORTED SYMPTOMS OF HS?*

<table>
<thead>
<tr>
<th>Symptom</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pain/Burning</td>
<td>61%</td>
</tr>
<tr>
<td>Decreased Movement</td>
<td>50%</td>
</tr>
<tr>
<td>Pus or Drainage</td>
<td>43%</td>
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</tbody>
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* Based on hospital charts of patients with HS.

WHAT CAUSES HS?

The exact cause of HS is unknown. However, research shows that HS occurs when the body is attacked by its own immune system. This is why HS is called an immune-mediated disorder: even though it causes painful symptoms on the surface of the skin, its effects are more than skin deep.

If you think that you may have hidradenitis suppurativa, it makes sense to consult a dermatologist – a doctor who specializes in diseases of the skin. A dermatologist will be able to give you a diagnosis, advise you on how to live with the symptoms you have, and recommend the most appropriate treatment for you.