Regarding “Impact of transthoracic endoscopic Sympathectomy on plantar hyperhidrosis”

We have read with great interest the article of Paliogiannis et al 1 regarding the evolution of plantar hyperhidrosis on patients submitted to Transthoracic Endoscopic Sympathectomy (TES) for the treatment of palmar and axillary hyperhidrosis.

The Authors state, based on a case series of 26 patients with palmar or axillary hyperhidrosis associated to plantar hyperhidrosis that, after surgical intervention, three patients (11.5%) displayed complete regression of plantar hyperhidrosis, 11 (42.3%) partially improved and the remaining 12 (46.1%) did not have any change, i.e., neither improved nor worsened.

From two studies of evolution the plantar hyperhidrosis after TES in patients with palmar or axillary hyperhidrosis associated to plantar excessive sweating, the first based on self-assessment 2, and the second on an objective evaluation with a sudometer 3, we observed that the improvement of maintenance of the sweating levels in feet were 91.43% and 52.2%, respectively. However we found that unlike the data presented in this study there were cases of worsening in plantar hyperhidrosis, with 6 out of 70 patients (8.57%) in the first (self-assessment) and 38 of 80 (47.5%) in the second measurements with the audiometers) group.

We believe it is of utmost importance that surgeons and be patients be aware that while there is room for improvement in plantar sweating after surgery, there is a definite risk of worsening in plantar hyperhidrosis after intervention, which cannot be overlooked.

References


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