Interventions for hyperhidrosis in secondary care: a systematic review and value-of-information analysis

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Declared competing interests of authors: none

Published December 2017
DOI: 10.3310/hta21800

Plain English summary

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Health Technology Assessment 2017; Vol. 21: No. 80
DOI: 10.3310/hta21800

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Hyperhidrosis is characterised by uncontrollable and excessive sweating that occurs at rest, regardless of temperature, and has a major impact on quality of life.

The aim of this project was to summarise the evidence on the clinical effectiveness and cost-effectiveness of treatments for primary hyperhidrosis and assess the need for and value of further research.

We systematically reviewed studies of the effectiveness of treatments to be prescribed by dermatologists and minor surgical treatments for hyperhidrosis of the hands, feet and armpits; as 'endoscopic thoracic sympathectomy' (ETS) surgery is established as an end-of-line treatment, we did not review this further. We analysed the cost-effectiveness of the treatments for the armpit. We also investigated the value and cost-effectiveness of conducting further research for the armpit. We consulted patients about our analysis and findings.

The evidence on treatments for hyperhidrosis was of limited quality and insufficient to draw firm conclusions. There was consistent weak evidence of some benefit from iontophoresis (a process in which an electrical field is used to deliver drugs through the skin) for hyperhidrosis of the hands, and botulinum toxin (BTX) injections were found to be effective for patients with hyperhidrosis of the armpit. For armpit hyperhidrosis, our analyses suggested that using treatments in the following order would be the most cost-effective: iontophoresis, BTX, medication, curettage, ETS.

Combining the evidence and patient advisor input, we established that further research on the clinical effectiveness and cost-effectiveness of BTX (with anaesthetic) compared with iontophoresis for hyperhidrosis of the hand would be useful. The Hyperhidrosis Quality of Life Index tool appears to be the best questionnaire for measuring the impact of treatments on quality of life in future studies. The results of ongoing studies of new technologies that damage the sweat glands, and of new formulations of anticholinergic medications, may be informative.

Health Technology Assessment

HTA/HTA TAR

ISSN 1366-5278 (Print)

ISSN 2046-4924 (Online)

Impact factor: 4.236

Health Technology Assessment is indexed in MEDLINE, CINAHL, EMBASE, The Cochrane Library and the Clarivate Analytics Science Citation Index.

This journal is a member of and subscribes to the principles of the Committee on Publication Ethics (COPE) (www.publicationethics.org/).

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This report

The research reported in this issue of the journal was funded by the HTA programme as project number 14/211/02. The contractual start date was in December 2015. The draft report began editorial review in December 2016 and was accepted for publication in July 2017. The authors have been wholly responsible for all data collection, analysis and interpretation, and for writing up their work. The HTA editors and publisher have tried to ensure the accuracy of the authors' report and would like to thank the reviewers for their constructive comments on the draft document. However, they do not accept liability for damages or losses arising from material published in this report.

This report presents independent research funded by the National Institute for Health Research (NIHR). The views and opinions expressed by authors in this publication are those of the authors and do not necessarily reflect those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health. If there are verbatim quotations included in this publication the views and opinions expressed by the interviewees are those of the interviewees and do not necessarily reflect those of the authors, those of the NHS, the NIHR, NETSCC, the HTA programme or the Department of Health.

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