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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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Background: Postoperative compensatory sweating is the most common late complication ranging from 33% to 85%.

Aim: The aim of this study was to identify the risk factors for compensatory sweating in patients who underwent 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 answered a detailed standard questionnaire in 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 used to assess the association between 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 in 29 (18.8%) patients with craniofacial and palmar hyperhidrosis. T3-T4 resection was performed in 125 (81.2%) patients with only palmar hyperhidrosis or axillary and palmar hyperhidrosis or axillary, palmar and pedal hyperhidrosis. Compensatory sweating occurred in 24 (15.5%) patients. When asked to rate the severity of their compensatory sweating it was rated as moderate by 18 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.

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

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