Preface

Hyperhidrosis

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Editor

Millions of patients worldwide still suffer from primary hyperhidrosis, and with increasing awareness and access to the Internet, it is likely that more patients will seek treatment.

The literature on surgical management of primary hyperhidrosis had increased tremendously over the last two decades, and this is the second issue of *Thoracic Surgery Clinics* devoted to hyperhidrosis.

We begin with historical perspectives that acknowledge our sympathetic surgical heritage and bring us up to present time. Then, we move to mechanisms of pathophysiology, which are getting clearer, although we still don't have a deeper understanding why some patients develop primary hyperhidrosis. The vast majority, however, are adequately treated by nonsurgical methods that are constantly improving and will likely reduce the need for surgery in the future. The latest developments are consequently reviewed in detail.

Any professional involved in diagnosis and management of patients with hyperhidrosis will likely recognize that despite nonsurgical treatments some patients remain so disabled that they ask for sympathetic surgery despite a high risk of side effects. The key to success when medical treatment fails therefore lies in meticulous patient selection, which is discussed in a separate article.

Even when the indication for surgery has been established, there is still disagreement and conflicting opinions concerning which surgical procedure is better for primary hyperhidrosis. More than 1000 papers have been published, predominately nonrandomized studies, and it is apparent that there is little consensus about level and extent of targeting the sympathetic chain. An

evidence-based review therefore brings us up-to-date with the literature.

One of the most controversial topics in sympathetic surgery is which surgical technique is better: resection, transection, ablation or clipping, which is claimed to a reversible procedure. Whether clipping is truly reversible is hotly debated, but data are accumulated and reviewed in an up-to-date overview, including possible mechanisms of reversibility. It is only fair to say that sympathetic surgeons should switch to clipping if it is truly reversible, and conversely, they should abandon clipping if it is not, because some patients are likely to accept sympathetic surgery under false premises if they are told that the operation is reversible.

Despite thorough information and meticulous patient selection, some patients still regret sympathetic surgery because of side effects. Severe compensatory sweating is the most frequent cause, but less common side effects are also reviewed in this issue. Quality-of-life investigations following sympathetic surgery have emerged in the literature and are reviewed, just as newer pharmacological treatments of compensatory sweating are presented in separate articles. A newer surgical option to treat patients who regret surgery is the promising reversal procedure by robotic technology.

Finally, facial blushing and plantar hyperhidrosis are rare but growing indications for sympathetic surgery that are discussed separately.

From the list of expert authors in this issue of *Thoracic Surgery Clinics*, it is apparent that sympathetic surgery is not only done by thoracic surgeons. Instead, these procedures are performed

by dedicated surgeons across surgical subspecialties, who are interested in primary hyperhidrosis and all its complexity. For years, many of these surgeons have met at the biannual meeting for the International Society of Sympathetic Surgery, joining forces to promote better research, which is desperately needed in this field.

I am indebted to the Consulting Editor, M. Blair Marshall, for giving me the opportunity to act as Guest Editor, and to the staff at Elsevier, in particular, Susan Showalter, for their kind assistance throughout this process without which this issue would not have been possible. Finally, I would like

to thank all the authors who participated in this project. I am convinced that their outstanding contributions will provide the readers with an up-to-date overview of this interesting and complex topic.

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