

Hyperhidrosis

Treatment of Excessive Sweating (Hyperhidrosis) with Type A Botulinum Toxin

Sweating is essentially a normal process. It serves to thermoregulate the body. However, many people are more prone to sweating, especially in stressful situations, which can significantly worsen their quality of life.

Typically, the parts of the body with more sweat glands are affected: the armpits, palms, and feet. Conversely, excessive sweating (hyperhidrosis) all over the body is much less common.

Very rarely, excessive sweating can be caused by a violation of the hormonal background, a sugar disease - (diabetes mellitus) or certain neurological diseases. You should first exclude these causes.

But much more often the cause remains unknown (the so-called primary hyperhidrosis). In such cases, we focus on reducing symptoms. Primary hyperhidrosis is highly widespread. Approximately 2 % of the world's population suffer from it to some extent. Some people have permanently wet palms. For example, stress-induced primary hyperhidrosis during school exams can cause the palms to sweat so much that a piece of paper in a child's hands becomes wrinkled due to being soaked through. For adults, constantly wet palms can also cause serious social consequences. Stress-induced hyperhidrosis in the armpit area, with large wet patches appearing on the shirt, can also be very unpleasant. Severe forms of hyperhidrosis can lead not only to social problems, but also to complications in the form of skin diseases. For example, wet areas of the skin are more prone to viral and fungal infections, as well as chronic inflammatory reactions.

What is type A botulinum toxin?

Type A botulinum toxin is a protein produced by bacteria. When botulinum toxin is injected under the skin, a targeted blockade of nerve impulses occurs that cause sweating. If it is injected into a muscle, by blocking the nerve impulses, this will also lead to relaxation or paralysis of the treated muscles. Other nerve functions, such as the sense of touch through the skin, remain unaffected. Botulinum toxin has been used for many years to treat severe neurological motor disorders, as well as to correct facial wrinkles and treat increased sweating.

DERMEDESTHETIC

Dermedesthetic GmbH
Tel.: +41 (0) 41 558 60 99

Morgartenstrasse, 3
www.dermedesthetic.ch

6003 Luzern, Switzerland
praxis@dermedesthetic.ch

Treatment

For this procedure, you are invited to sit on an examination bed. The treated area is thoroughly disinfected. Then, small punctures are made using an extremely thin needle and botulinum toxin is administered into the treated area of your skin. The treatment is almost painless. However, it is theoretically possible to treat the skin with an ointment some 30 minutes before the procedure, which will make the punctures a little less noticeable. Occasionally, a slight burning sensation may appear during administration.

Are there any alternative treatment options for hyperhidrosis?

Currently, a certain number of medicines for external use are available, which, with regular use, can reduce sweating. Such products often contain aluminum salts, which inhibit the work of the sweat glands by changing their structure. There are very few oral medications that reduce sweating. The number of possible side effects is even greater, that is why such medicines are used extremely rarely. You can also remove the sweat glands surgically, especially in the armpits. The long-term effect speaks in favour of this method of treatment, but the consequences speak against. Theoretically, during the surgery, you can also cut off the part of the nerve trunk near the spinal cord that is responsible for sweat regulation. This method is rarely used. During an individual consultation, it is necessary to determine which methods are suitable for you. Experience has proven that "traditional" methods of therapy can also give acceptable results.

Counterindications

For safety reasons, it is not recommended to use this method during pregnancy and lactation. If you have any background diseases accompanied by muscle weakness (for example, myasthenia gravis, Lambert-Eaton syndrome), or blood clotting disorders, you should also refuse treatment with botulinum toxin.

Compatibility

When taking certain medicines, their interaction with botulinum toxin should be considered. These medicines can affect the effect of botulinum toxin, so make sure that you inform your doctor about taking certain medicines. Such medicines include: antibiotics of the aminoglycoside group, anesthetics, etc., and muscle relaxants.

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Side Effects

As with any other skin injection, in rare cases, skin irritation, skin infection, or slight swelling may occur. In very rare cases, fatigue, dry mouth, and general malaise were observed after treatment with type A botulinum toxin. In rare cases, increased compensatory sweating was observed on the skin areas adjacent to the treated ones. As a result of administration, a small hematoma may appear in the injected area. The risk of its occurrence increases when taking medicines that thin the blood. Therefore, we kindly ask you to stop taking any medications containing acetylsalicylic acid (for example, Aspirin®) and other blood-thinning medications (for example, Marcoumar®) a week before the treatment. Vitamin E and multivitamins containing vitamin E, as well as medicines containing ginkgo biloba, reduce the body's ability to clot blood. These should also be excluded a week before. Allergic reactions (redness, itching) in the injected area, which can also occur after repeated use of type A botulinum toxin, are extremely rare. Occasionally, patients reported insufficient effect, short-term effect, or no effect from the medicine. However, in some other cases, a longer-lasting effect was observed, which lasted up to one year under certain circumstances. When type A botulinum toxin is administered into a muscle, it also suppresses nerve impulses there, so that the affected muscle, depending on the amount injected, can no longer be fully tensed. This is the desired effect for muscle spasms, but a negative side effect for relaxed muscles. In particular, this effect can occur after palm treatment and lead to the temporary relaxation of hand muscles (force decay, for example, when turning a key or opening rotatable locks). Over the course of a few weeks, the muscle relaxation gradually fades away. No such side effects have been observed in the armpit. No persistent effect or side effects are known.

Learn more: www.compendium.ch/mproAIPS/sm/52433/de

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