Hidradenitis Suppurativa: Greek patients' perspective on disease burden

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INTRODUCTION

- Hidradenitis suppurativa (HS) is a chronic, progressive, debilitating, recurrent, inflammatory skin disease characterized by the occurrence of very severe, persistent, painful nodules, abscesses, and fistulas, most commonly found in the skin folds of the axilla, groin, gluteal, and perianal areas. HS is associated with a significant decrease in the patients' quality of life, which makes the selection of the appropriate therapy extremely important¹.
- Despite the impairment in QoL of patients with HS, there is a lack of evidence and clear understanding of disease burden, treatment challenges and unmet need in the Greek population with HS. Therefore, patients' insights are important to get a holistic perspective of the disease in Greece.

OBJECTIVE

• The present study was conducted to understand burden of disease, challenges faced by patients and unmet needs in HS in Greece.

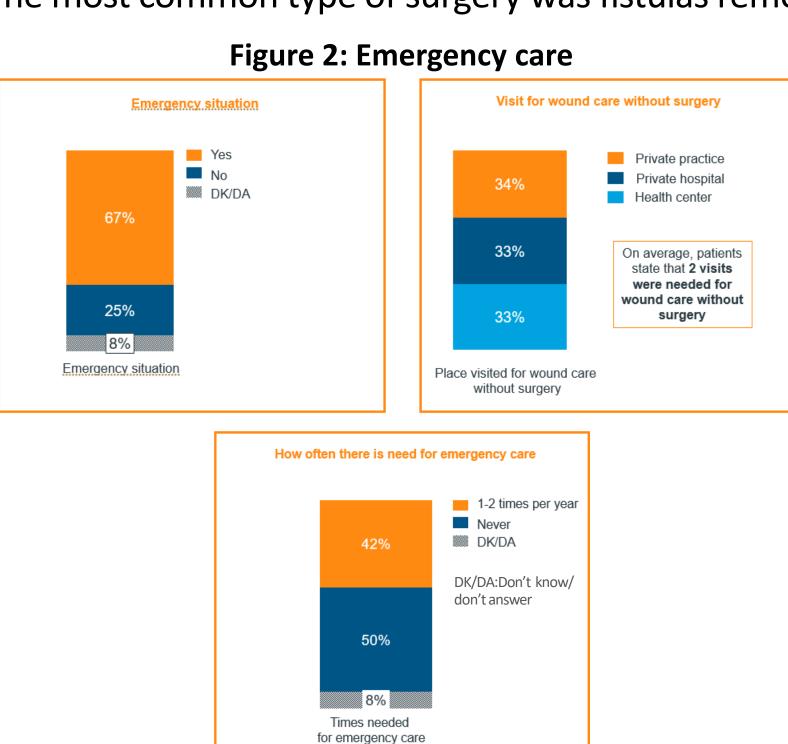
METHODS

• The survey was conducted via a structured questionnaire and patients' recruitment was implemented via physicians. All patients signed a Consent Form in order to participate in the survey.

RESULTS

- Twelve patients with HS participated in the survey. According to the results, the demographic characteristics of the total HS patients' sample were: females (83%), <40 years old (75%), high level of education (75%), currently working (75%), singles (50%). Biologic (67%) and other pharmaceutical therapies (67%) are the most commonly-cited therapies, while half (50%) of patients reported that they have received in total 2-3 different treatments since diagnosis.
- Disease severity at the time of sampling was categorized by the treating physician according to IHS4: severe in 42%, moderate in 50% and mild in 8% of patients (Figure 1). The most frequent symptoms reported by the patients were pruritus, abscesses, fistulas and noisome purulent discharge (Figure 1). All patients reported that they are visiting private or public physicians for wound care. Additionally, the majority (67%) of patients reported that they have been in emergency situation (acute onset of new or worsened inflammatory nodules, abscesses, or swollen draining tunnels)² and 42% of patients needed emergency care 1-2 times/year since diagnosis (Figure 2). The highest rate of patients who stayed on a hospital ward within the last year was among patients with severe HS (20%). The most common type of surgery was fistulas removal (60%) (Figure 3).

Figure 1: Medical status **Symptoms Disease severity** Pruritus Not characterized Severe Hyperhidrosis Painful subcutaneous Moderate Abscesses Fistulas Noisome purulent 50% Hypertrophic scars Epidermal cysts Mobility reduction Fungal urinary tract infections



Need of hospitalization

Yes, I stayed on a hospital ward for overnight within the last year

No not within the last year

DK/DA

17%

20%

14%

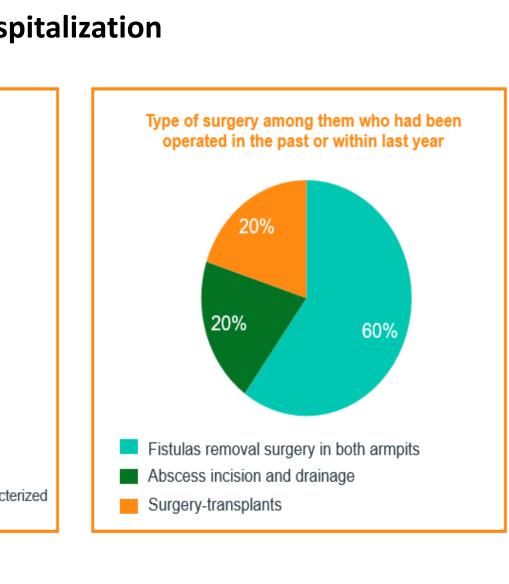
86%

TOTAL

Severe

No severe/not characterized

DK/DA: Don't know/ don't answer

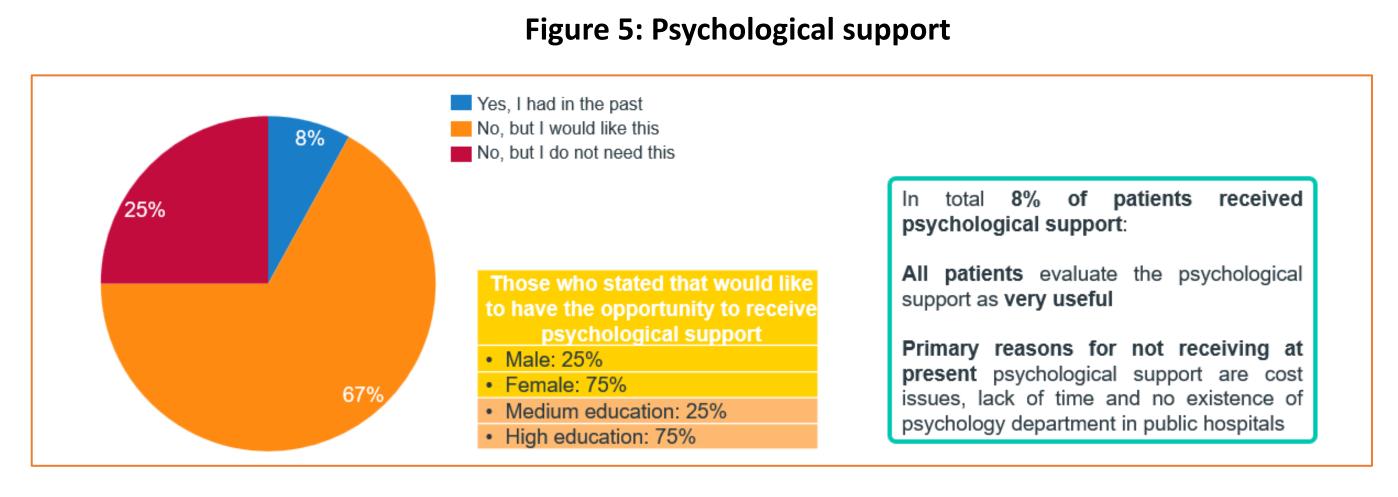


• The most important challenge HS patients face is psychological burden³ (Figure 4). Only 8% of patients received psychological support in the past, while 67% would like to have the opportunity to get psychological support (Figure 5).

Figure 4: Primary difficulties/needs in relation to HS

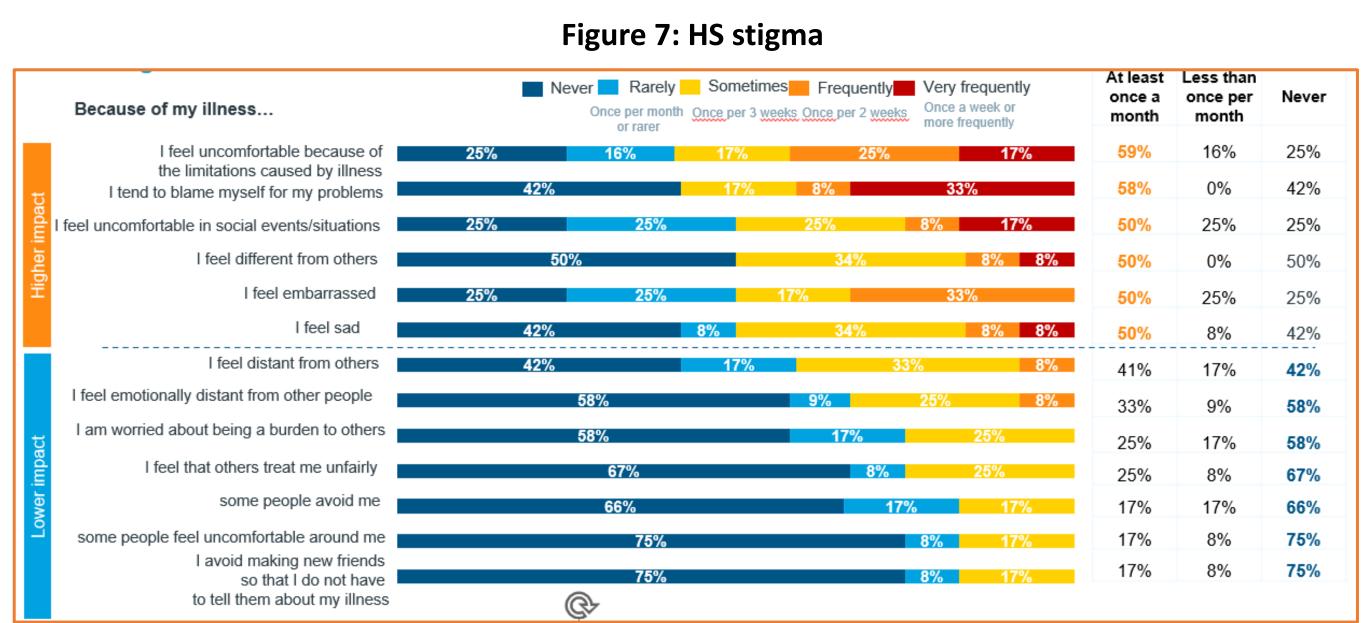
Psychological burden
Ineffective available treatments
Loss of productivity
Incomplete information
17%

High cost of treatments / care / HS management
Difficulty in diagnosis
8%



• Patients state that HS primarily impacts their social activities (Figure 6), leading them to blame themselves, experience feelings of discomfort, embarrassment, and sadness more often than once a month (Figure 7).

Figure 6: Constraints to social & everyday life due to HS DA Never Rarely Sometimes Frequently Vey frequently Less than Never Once per 3 weeks Once per 2 weeks once per month month I had to limit my social activities 33% I had to limit the things I used to do to have fun at home (like reading, listening to music, etc.) I felt that I had to limit my contact with my friends I had difficulty handling 42% 33% the family needs I had to limit my hobbies 34% 34% 8% 8% or leisure activities my work behind due to illness I felt that I had restrictions 42% doing my job (including work from home)



CONCLUSIONS

- HS impacts patients' everyday activities, work and socialization. Patients tend to blame themselves, feel uncomfortable, different from others, embarrassed and sad.
- Patients with moderate to severe HS experience a high disease burden, due to required wound care, that impacts daily activities, work and socialization. This study demonstrates the impact of HS on a patient's psychosocial well-being and emphasizes the importance of treating patients from a holistic standpoint.

REFERENCES

- 1. Ingram JR, Bettoli V, Espy JI, Kokolakis G, Martorell A, Villani AP, Wallinger H, Coak E, Kasparek T, Muscianisi E, Richardson C, Kimball AB. Unmet clinical needs and burden of disease in hidradenitis suppurativa: real-world experience from EU5 and US. J Eur Acad Dermatol Venereol. 2022 Sep;36(9):1597-1605. doi: 10.1111/jdv.18163. Epub 2022 May 9. PMID: 35445469; PMCID: PMC9545202.
- 2. Okun, M. M., Flamm, A., Werley, E. B., & Kirby, J. S. (2022). Hidradenitis Suppurativa: Diagnosis and Management in the Emergency Department. The Journal of emergency medicine, 63(5), 636–644. https://doi.org/10.1016/j.jemermed.2022.08.001
- 3. Ooi XT, Choi E, Han H, Ahmad H, Patwardhan KR, Chandran NS. The psychosocial burden of hidradenitis suppurativa in Singapore. JAAD Int. 2022 Dec 7;10:89-94. doi: 10.1016/j.jdin.2022.10.010. PMID: 36691658; PMCID: PMC9860399.

DISCLOSURES

This study was funded by Novartis Hellas. All authors contributed to interpretation of the results, preparation, review and approval of the final poster. KK, DI, XM, EK are employees of Novartis Hellas. MK is an employee of IQVIA Hellas, which was a paid consultant to Novartis in connection with the development of this study.