

Influence of skin subjective symptoms on sleep quality in patients with hidradenitis suppurativa

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INTRODUCTION & OBJECTIVE

Previous studies showed more sleep disturbance (SD) in patients with hidradenitis suppurativa (HS). During HS, unpleasant subjective symptoms [USS], such as itch, pain and others (tingling, burning, or tightness) have a negative influence on sleep quality. This study aims to evaluate the prevalence of SD in CD patients and to identify the influence of itch, pain and other unpleasant sensations on SD.

MATERIAL & METHODS

A representative sample of the Israeli population over the age of 16 was selected using the quota method.

The questionnaire gathered information about the patients' demographic and socio-demographic profiles. Patients were considered to be those who reported feelings of stigmatization (FS) if they reported that they felt that they were ostracized or rejected by others and/or that they felt that they were looked at with disgust and/or that people avoided touching them and/or that people avoided approaching them because of their dermatoses. A comparison of FS and patients without FS (non-FS) was used to evaluate predictors of FS specifically: socio-demographic and clinical parameters, psychological impact on self-perception, relationships, daily life, and social or professional life. The positive response to the question assessed adherence, "Did you get tired of taking a treatment every day?". The patients in the 'visible' group showed SD on at least one visible part of the body

RESULTS

A population of 586 HS respondents was selected, including 302 (51.5%) males and 284(48.5%) females respectively (mean age 36.05+/-1158). min 16-82 years). A total of 378(64.5%) respondents reported SD due to CD. The mean age of SD population was not different than the non-SD population (mean age 36.179 ±11.00 years vs. 35.84 ±12.59years; P = 0.7353). Gender Males 63,6% vs Females 65.5%. 0.91) and BMI >or =25 (51.0% vs 45.7%, p 0.73) were not predictor of SD 208 HS (35.5%) respondents were considered to have no SD

What are usually referred to as unpleasant skin sensations are reported more often in HS patients suffering from a sleep disorder: this is particularly true for itching (61.6% vs 51%, p=0.01); skin tingling (44.78% vs 37.0%, p<0.01); skin burning (47.9% vs 30.3%, p<0.01) and pins & needles (46.6% vs 37.0%, p<0.03).

These disorders are not without consequences for the daily lives of HS patients with sleep disorders.

They are significantly more likely than HS individuals without sleep disorders to wake up tired, to report periods of drowsiness during the day or to admit to repeated yawning during the day.

DISCUSSION

Our study establishes the prevalence important of SD (64.5 %) in respondents with HS. Patients with subjective symptoms suffer more from SD, suggesting that they are aggravating factors, but are likely not the only reason for SD in HS patients. We found that during HS, intermediate sensations also contribute to SD. Our study also shows that the risk of daytime sleepiness is significant and can be the cause of accidents. Repeated yawning can have a negative effect on social relationships. These findings suggest the importance of early detection and management of SD in patients with HS . It is important to include questions about SD in the examinations of HS patients.

