

Laser at 924/975 + curettage best for axillary hyperhidrosis

March 2 2015



(HealthDay)—For patients with axillary hyperhidrosis, the optimal treatment option is laser at 924/975 nm combined with curettage, according to a study published online Feb. 6 in *Lasers in Surgery and Medicine*.

Franck Marie Leclère, M.D., Ph.D., from the CHU University of Bordeaux in France, and colleagues conducted a randomized prospective controlled trial involving 100 patients with axillary hyperhidrosis. Patients were treated with laser alone at 975 nm (group 1); laser alone at 924/975 nm simultaneously (group 2); curettage alone (group 3); and laser at 924/975 nm followed by curettage (group 4).

The researchers found that two <u>patients</u> from group 1 experienced burns which took more than one month to heal. The worse results were achieved in group 1; at one and 12 months after treatment, the starch test



scale results were 2.48 and 2.76, respectively, while the Global Aesthetic Improvement Scale (GAIS) results were 1.04 and 0.92. The corresponding starch test scale results were 1.36 and 1.48 in group 2, and the corresponding GAIS results were 2.36 and 2.72. The starch test scale results were 1.56 and 1.76, respectively, in group 3, corresponding with small to substantially smaller dark areas; the GAIS results were 2.28 and 2.64, respectively. Group 4 obtained the best results: the starch scale test scores were 0.40 and 0.44, respectively, while the GAIS scores were 3.72 and 3.76.

"This <u>treatment</u> was safe, with few side effects and improvement that persisted to one year follow-up," the authors write.

More information: Abstract

Full Text (subscription or payment may be required)

Copyright © 2015 HealthDay. All rights reserved.

Citation: Laser at 924/975 + curettage best for axillary hyperhidrosis (2015, March 2) retrieved 4 January 2023 from https://medicalxpress.com/news/2015-03-laser-curettage-axillary-hyperhidrosis.html

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.