



**Title** Botulinum Toxin Injection for Axillary Hyperhidrosis  
**Agency** HAS, Haute Autorité de Santé/French National Authority for Health  
2, avenue du Stade de France, FR-93218 Saint-Denis La Plaine Cedex, France;  
Tel: +33 1 55 93 71 12, Fax: +33 1 55 93 74 35; contact.seap@has-sante.fr, www.has-sante.fr  
**Reference** HAS report, 2006.  
www.has-sante.fr/portail/display.jsp?id=c\_520046

## Aim

To assess the expected benefit of unilateral or bilateral injection of botulinum toxin A (BTX) into the axillary cavity.

## Conclusions and results

This procedure is used to treat hyperhidrosis resistant to local treatment when the psychological and social impact is severe. HAS assessed the expected benefit of this procedure with a view to issuing an opinion regarding its inclusion on the reimbursement list (Social Security Code, article L.162-1-7) and the conditions for its use.

Low-level evidence studies (21 case series) suggested an efficacy of 75% to 90% for BTX on the HDSS score (*Hyperhidrosis Disease Severity Scale*) in treated subjects (n=20–146). BTX injection into the axillary cavity gave rise to few (<5%) and mild to moderate complications. In a series of 146 patients, 3 cases of extra-axillary perspiration were identified, 2 cases of axillary sensitivity to touch, 2 cases of pain at the site of injection, and 1 case of dizziness following injection.

Treatment had a positive impact on the quality of life in 3 studies (n=278 patients).

BTX injection into the axillary cavity is a third-line treatment for severe axillary hyperhidrosis, following antiperspirants and aluminum salt-based topical treatments. Surgery is used as a last resort, or as a complement to BTX injection when other treatments failed (1 guideline based on data from the literature, experts' opinion).

The data indicate that the procedure has therapeutic value.

## Recommendations

The expected benefit of BTX injection is sufficient considering its satisfactory risk/benefit ratio.

HAS considered the expected benefit of BTX injection to be adequate and issued a favorable opinion for its inclusion on the list of procedures reimbursed by the National Health Insurance.

## Methods

This assessment is based on a critical appraisal of the literature (systematic review of scientific data published in French and English between January 1986 and July 2006) and on the expert opinion of a 10-member multidisciplinary working group (neurologists, dermatologists, ENT specialists, plastic surgeons, and psychiatrist).

## Further research/reviews required

Data could be collected on doses to be injected and on the optimal frequency of injections.