





SINGLE PORT ENDOSCOPIC THORACIC SYMPATHECTOMY WITH HOLMIUM LASER FOR TREATING PALMAR HYPERHIDROSIS AT THAI BINH PROVINCIAL GENERAL HOSPITAL

RESEARCHERS:

PROF. PHD. HUNG DOAN QUOC PHD. HUU NGUYEN CONG

MD. MA. THANH DO TAT

Speaker: THANH DO TAT

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INTRODUCTION



- Primary palmar hyperhidrosis : hyperactivity of the sympathetic nervous system
- Rate: 1-1,5% of the population Male/Female=1/1, 20-40 yo, 25%-33% family factors.
- Endoscopic thoracic sympathectomy: Effective and optimal









INTRODUCTION





1.https://www.vascularsociety.org.uk/patients/procedures/13/sympathectomy

2. Georghiou GP, Berman M, Bobovnikov V, Vidne BA, Saute M. Minimally invasive thoracoscopic sympathectomy for palmar hyperhidrosis via a transaxillary single-port approach. Interact Cardiovasc Thorac Surg. 2004;3(3):437-441. doi:10.1016/j.icvts.2004.03.003





INTRODUCTION

Sympathetic ganglion destruction method



Electromagnetic





Dissection of sympathetic trunk



https://asiamedicalspecialists.hk/en/health-info/33/Sweaty-Palms

Clip







Sympathectomy ganglion and compensatory sweating

Author	Rate	Factor	
Chien-ChihLin (342 patients)	O %	Alone coagulant T4	
Larry R	Severe 1-2%	Resected T4	
Rafael Reifeld (1274 patients)	N1 > N2	N1: Cliped T2-T3 N2: Cliped T3-T4	
Neumayer C (144 patients)	N1: 55, 6% N2: 8,5%	N1: Burnt T2-T4 (91p) N2: Clipped T4 (53 p)	
Peter B Licht. (158 patients)	N1: 81% N2: 90% N3: 95%	N1: T2 (blush) N2: T2-T3 (Palmar) N3:T3-T4 (palmar+axillary)	







OBJECTIVE

"SINGLE PORT ENDOSCOPIC THORACIC SYMPATHECTOMY

WITH HOLMIUM LASER FOR TREATING PALMAR HYPERHIDROSIS"

- 1. Technical description
- 2. Early assessment of surgical results





SUBJECTS AND METHODS



- Time: in June July 2023
- **Subjects:** 47 patient (26 : isolated palmar, 21 : combined palmar/axillary)
- Methods: Description, prospective
- Evaluate results after surgery::
 - ✓ Technical failure ?
 - ✓ Level of palmar and axillary sweating after surgery?
 - ✓ Compensatory sweating after 1 month?
 - ✓ Post-op HDSS score?







SYMPATHECTOMY WITH HOLMIUM LASER







TECHNICAL PROCESS







RESULTS AND DISCUSSION

✤ PREOPERATIVE CHARACTERISTIC







RESULTS AND DISCUSSION





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RESULTS AND DISCUSSION

Table 1. Preoperative patient data (n=47)

Variable		Results	
BMI (kg/m2)		20±2,56	
Desien	Palm	26(55,3%)	
Region	Palm - axillary	21(44,7%)	
Time of onset	Childhood	40(85,1%)	
	Unknown	07(14,9%)	
HDSS score	1 - 2 point	0	
	3 point	57,4%	
	4 point	42,6%	

Table 2. Hyperhidrosis Disease Severity Scale (HDSS)

HDSS scores	How would you rate the severity of your sweating?	PFH severity
1	My sweating is never noticeable and never interferes with my daily activities	Mild
2	My sweating is tolerable but sometimes interferes with my daily activities	Moderate
3	My sweating is barely tolerable and frequently interferes with my daily activities	Severe
4	My sweating is intolerable and always interferes with my daily activities	Intolerable



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RESULTS AND DISCUSSION

Table 3. Operative characteristic

Variable		Results	
Pleural apical ligament		08 (17%)	
Resected ganglion		T3 <i>(55,3%),</i> T3-T4 <i>(44,7%)</i>	
Kurnt branch		05 (10,6%)	
Operation time(s) **		78 ± 40,76	
Intra-op complication	Punctured lung	0	
	Bleeding	0	

ismes







RESULTS AND DISCUSSION



Table 4. Postoperative outcomes



Variable		Т3	T3-T4	
Dry palm		100 %		
Dry axillary				
Horner 's syndrome		0		
Post-op pain***			4,2%(VAS: 5-6)	
			76,5% (VAS: 3-4)	
			19,3%(VAS:1-2)	
Duration of hospital		30 ± 11,4		
Compensatory sweating	Yes (14/47)	Back	01	01
		Chest	01	03
		Abdominal	0	01
		Anterior thigh	01	01
		Leg	0	01
		Thigh-leg	0	04
	Total		03/26 (11,5%)	11/21 (52,4%)
	No		70,2%	
Post-op HDSS score		1 point : 100%		





CONCLUSION



- Single port endoscopic thoracic sympathectomy:
 - ✓14 Fr port
 - ✓12 Fr endoscope intergrated laser fiber
 - ✓ Holmium Laser
 - → Fast Safe Minimally invasive Less trauma
- Axillary hyperhidrosis has a high risk of compensantory sweating after surgery.





THANK YOU!

