



## DERMATOSUCTION FOR AXILLARY SWEATING

Excessive sweating of the axillae is problematic for many people, particularly for those who do not respond well to usual remedies such as antiperspirants roll-ons and sprays. Although thoracic sympathectomy (involving the surgical cutting of nerves through chest wall incisions) may be successful, it is a relatively invasive and potentially hazardous procedure. Botox injections can work but offer only about 6 months temporary relief and are associated with "sympathetic" compensatory sweating at a different site like the shoulders or back.

Axillary sweat glands consist of eccrine and apocrine glands that are stimulated by sympathetic nerve impulses. These glands are generally situated just under the skin. Initially the area to be treated may be determined by the application of iodine and cornstarch to map out the sweat glands.

At this clinic "dermatosuction" is performed under local anaesthesia. This involves several small incisions under local anaesthesia. Then a small cannula is inserted through the incisions infiltrating a saline anaesthetic solution under the skin. A superficial suction of the under surface of the skin is performed in several directions to remove as many sweat glands as possible. This technique generally produces an 80-90% improvement in axillary sweating although the maximum benefit is seen after 8 months.

**A successful outcome is where the patient can return to controlling axillary sweating with conventional antiperspirants. Please be aware that despite our best efforts treatment failures can occur that may require further treatment sessions or even referral for other more aggressive treatment strategies. Should further treatments prove necessary, additional fees will apply.**

## POSSIBLE SIDE EFFECTS

- Rebound sweating-this generally decreases over several months.
- The need for 2nd procedure is uncommon but may be necessary to improve the outcome. Please note that the long term result of any procedure cannot be certain and any further treatments would naturally incur another treatment fee.
- Bleeding/bruising/haematoma
- Pain
- Infection
- Seroma (spongy fluid collection)
- Damage to underlying nerves-numbness
- Skin necrosis or breakdown that could theoretically require skin grafting

However it should be appreciated that this procedure has been performed by trained medical practitioners under local anaesthesia for several years now and has been proven to be a safe and effective procedure.