

Hidradenitis suppurativa

Recurrent trauma ie I &D with no abscess can worsen disease and surgical intervention generally offers the greatest likelihood of resolution to eliminate sinus tracts. Dermatologist can treat with laser or light therapy Wear loose light clothing and avoid excessive heat friction or shearing trauma. Avoid washing with loofah or brushes to prevent unnecessary skin trauma

Avoiding smoke. Weight management- BMI is 31.2 Metformin for overweight patients even if not diabetic consider taking Zinc 90 mg 1time a day since it has antiinflammatory and antiandrogenic properties. Vitamin D3 supplements has also been shown to be helpful. There is a hidradenitis society for support. treatment of fever and pain with motrin and Tylenol per bottle instructions.

Offer Topical Chlorhexidine 4% qd, topical clindamycin 1% BID topical resorcinol 15% bid and oral tetracycline 500mg bid doxycycline 100mg bid or minocycline 100mg bid x 2 months and if allergic clinda 300mg bid and rifampin 600mg qd for 10 wks but warnings about C difficile infection need to be included or Dapsone 50mg with warnings about hemolysis especially in G6PD deficiency

Or a combination of rifampin moxifloxin and metronidazole

Spirolactone 100mg qd shown to help by managing androgens

Prednisone to manage acute inflammation