INTRODUCTION

Despite the widespread prevalence of hyperhidrosis and its impact on quality of life, this condition is often managed suboptimally. The goal of this study was to assess nurse practitioners’ (NPs) and physician assistants’ (PAs) current knowledge, skills, competence, and practice barriers regarding treatment of hyperhidrosis to obtain a snapshot of continuing medical education (CME) needs.1

METHODS

A 26-question CME clinical practice assessment survey consisting of multiple-choice knowledge and case-based questions was made available online to NPs and PAs in the United States without monetary compensation or charge. Questions evaluated knowledge, skills, attitudes, and competence regarding hyperhidrosis prevalence, pathophysiology, diagnosis, and current and emerging treatments.

The survey launched on a website dedicated to continuous professional development on March 8, 2018, and data were collected until April 18, 2018. Respondent confidentiality was maintained and responses were de-identified and aggregated prior to analysis.

RESULTS

437 NPs and 105 PAs completed all questions in the survey during the study period. The key findings include (Figure 1):

- Awareness of prevalence of hyperhidrosis: 45% of NPs and 49% of PAs were aware of the prevalence of hyperhidrosis in the United States, and 45% of NPs and 44% of PAs were aware of the age groups most frequently affected by hyperhidrosis (Figure 1; Figure 2A).
- Patient communication regarding hyperhidrosis: Only 18% of NPs and 14% of PAs reported being very confident in addressing the possibility of hyperhidrosis with patients when presented with a patient case. In addition, only 25% of NPs and 32% of PAs correctly identified the frequency of patients discussing hyperhidrosis with a healthcare professional (Figure 1; Figure 2B).
- Pathophysiology of hyperhidrosis: 47% of NPs and 60% of PAs correctly identified 50% of sweat glands that are pathways originating in the central nervous system (CNS) in individuals with primary focal hyperhidrosis (Figure 1; Figure 2C).
- Diagnosis of hyperhidrosis: 40% of NPs and 51% of PAs were able to correctly identify endocrine disorders that may be associated with secondary hyperhidrosis (Figure 1; Figure 2D).
- Current management of hyperhidrosis: 7% of NPs and 73% of PAs were correctly able to identify first-line treatments for primary focal hyperhidrosis. However, when presented with a patient case scenario, only 47% of NPs, on average, and 44% of PAs, on average, were able to correctly select appropriate treatments for hyperhidrosis (Figure 1; Figure 2E).
- Emerging treatments for hyperhidrosis: 47% of NPs, on average, and 48% of PAs, on average, were aware of the clinical data on emerging treatments for hyperhidrosis (Figure 1; Figure 2F).
- The top 3 barriers reported by NPs and PAs managing hyperhidrosis were lack of time (34%; 43%), lack of safety and effective treatment (23%; 19%), and belief that hyperhidrosis is mostly cosmetic and therefore it is underestimated the prevalence (27%; 28%) (Figure 3).