

In response: looking for a standardized approach in the surgical treatment of hyperhidrosis

Tetsuya Sakai¹ · Kumiko Hida¹

Received: 7 July 2015 / Accepted: 14 July 2015 / Published online: 9 August 2015
© Springer-Verlag Berlin Heidelberg 2015

We thank Dr. Nachira and colleagues for their interest and comments on our paper [1].

First, our study employed only three evaluation scales: the degree of palmar sweating, the degree of compensatory sweating, and patient satisfaction. Although these scales were graded by patients who underwent endoscopic thoracic sympathectomy (ETS) to evaluate the postoperative efficacy of ETS, we did not use these evaluation scales preoperatively because it was a retrospective study. In addition, the evaluation scales may not have been sufficient to properly evaluate ETS efficacy because, as you pointed out, they consisted of a few questionnaires.

In contrast, the standardized pre- and postoperative questionnaire by De Campos et al. [2] recommended by the International Society on Sympathetic Surgery (ISSS) and Society of Thoracic Surgeons (STS) General Thoracic Task Force [3] consists of 20 questions divided into five domains including function, sociability, personality, emotion, and social circumstances. We agree that this evaluation scale reflects quality-of-life improvements in patients who undergo ETS for palmar hyperhidrosis and should be used to devise a common international evidence-based clinical practice in the future.

Second, in our patients, the sympathetic chain was either transected completely or clamped with a clip at the T3 level. We referred to the third thoracic vertebrae as T3. As you pointed out, the ISSS and STS committees' consensus [3] is to use a rib-oriented nomenclature; therefore, we agree that "R3" is more appropriate than "T3".

Finally, we thank Dr. Nachira and colleagues again for their helpful comments.

Compliance with ethical standards

Conflicts of interest None.

References

1. Hida K, Sakai T, Hayashi M, Tamagawa T, Abe Y (2015) Sympathectomy for palmar hyperhidrosis: the cutting versus clamping methods. *Clin Auton Res*. (**Epub ahead of print**)
2. De Campos JR, Kauffman P, Werebe EC, Andrade Filho LO, Kusniek S, Wolosker N, Jatene FB (2003) Quality of life, before and after thoracic sympathectomy: report on 378 operated patients. *Ann Thorac Surg* 76:886–891
3. Cerfolio RJ, de Campos JR, Bryant AS, Connery CP, Miller DL, DeCamp MM, McKenna RJ, Krasna MJ (2011) The Society of Thoracic Surgeons expert consensus for the surgical treatment of hyperhidrosis. *Ann Thorac Surg* 91:1642–1648

✉ Tetsuya Sakai
tscat@fb3.so-net.ne.jp

¹ Nagasaki University School of Medicine, Nagasaki, Japan