CONDITION

Hidradenitis suppurativa

Hidradenitis suppurativa is a long-term inflammatory skin condition that causes painful lumps, drainage, tunnels, and scars in skin folds.

WHAT IT IS
Chronic inflammatory condition affecting hair follicles in skin folds

BODY SYSTEM
Skin and immune system

MAIN SYMPTOMS
Painful lumps, abscesses, draining tunnels, scars

WHAT CAUSES IT
Immune inflammation, blocked follicles, and inherited susceptibility

HOW IT IS DIAGNOSED
Symptom history and skin examination

MAIN TREATMENT
Skin care, medicines, procedures, and surgery

CAN IT BE CURED?
No - treatment can control inflammation and flares

IS IT AN EMERGENCY?
Sometimes - fever, severe illness, or rapidly spreading redness

LONG-TERM OUTLOOK
Flares may recur, but treatment can limit scarring

Overview

Hidradenitis suppurativa, often shortened to HS, is a long-term inflammatory skin condition. It causes tender lumps, abscesses, and tunnels under the skin. These changes usually develop where skin rubs together, such as the armpits, groin, buttocks, and under the breasts.

An abscess is a painful collection of inflamed fluid or pus. Tunnels, also called sinus tracts, are channels that form beneath the skin and may repeatedly drain. Over time, affected areas can develop thick or tight scars.

HS begins around hair follicles, which are small structures from which hairs grow. A follicle becomes blocked, breaks open, and triggers inflammation in nearby tissue. This is not simply an infection, although bacteria can sometimes infect damaged skin.

HS is not caused by poor hygiene, and it is not contagious. You cannot catch it through touching, sharing towels, sex, or close contact.

The condition often starts after puberty. Early recognition matters because controlling inflammation may reduce pain, drainage, tunnel formation, and permanent scarring. HS can also affect sleep, movement, work, relationships, and emotional well-being.

Symptoms

HS symptoms can range from occasional small lumps to widespread areas of persistent inflammation. Symptoms may settle for a time and then flare again.

Common features include:

Typical sites include the armpits, groin, inner thighs, buttocks, around the anus, under the breasts, and beneath folds of the abdomen. HS can affect one area or several areas on both sides of the body.

Some people notice flares around menstrual periods, during hot weather, or after friction and sweating. The pattern is not the same for everyone.

A single boil does not necessarily mean HS. HS is more likely when similar lumps return in characteristic skin folds, especially when they leave scars or form tunnels.

- Deep, painful lumps beneath the skin
- Abscesses that may break open and drain
- Tunnels connecting several inflamed areas
- Blackhead-like spots, sometimes appearing in pairs
- Thick, raised, or rope-like scars
- Itching, burning, swelling, or tenderness
- Drainage that may stain clothing or have an odor

Causes and risk factors

The exact cause of HS is not fully understood. It involves blockage and rupture of hair follicles followed by an abnormal inflammatory response. The immune system remains active in the area, which can damage nearby skin.

HS is not caused by dirt, inadequate washing, or a sexually transmitted infection.

Genes appear to play a part. Some people with HS have a close relative with the condition, but many do not. Having an affected relative does not mean you will certainly develop HS.

Factors linked with HS or more severe symptoms include:

These are risk factors, not proof of a cause. People of any body size can develop HS, and HS can occur in people who have never smoked. Symptoms are not a personal failure.

HS may occur alongside other inflammatory conditions, including inflammatory bowel disease and some forms of inflammatory arthritis. It is also associated with metabolic conditions such as diabetes. This does not mean that everyone with HS will develop these problems.

- A family history of HS
- Smoking
- Higher body weight
- Hormonal influences
- Repeated friction or pressure on affected skin

Diagnosis

There is no single blood test or scan that confirms HS. Diagnosis is usually based on your symptoms, where the skin changes occur, and whether they have returned over time.

A healthcare professional will examine the affected skin and ask about pain, drainage, scarring, previous lumps, and family history. Tell them if symptoms come and go, even if the skin looks calmer during the appointment. Photographs taken during a flare may help show the pattern.

A swab may be taken if there is concern about a bacterial infection. Blood tests can check for inflammation, anemia, diabetes, or other related health concerns, but they do not confirm HS.

Ultrasound is sometimes used to find tunnels or pockets of inflammation beneath the skin. A skin biopsy, which removes a small sample for testing, is rarely needed unless the appearance is unusual or another condition needs to be ruled out.

HS is often described as mild, moderate, or severe. Clinicians may also use staging systems based on the number of affected areas, abscesses, tunnels, and scars. This helps guide treatment and track changes.

Treatment and management

Treatment aims to reduce inflammation, ease pain, control drainage, prevent new tunnels and

scars, and improve daily life. The best approach depends on the affected sites, severity, previous treatments, and your preferences.

Gentle skin care can reduce irritation. This may include washing without vigorous scrubbing, avoiding tight clothing over sore areas, and using dressings that absorb drainage without sticking. A clinician or wound-care nurse can suggest suitable dressings.

Medicines may include:

Biologic medicines are injections that reduce selected immune signals involved in inflammation. They require medical assessment and monitoring because they affect immune function.

Procedures may be useful when a lump, tunnel, or scarred area keeps returning. Options include opening and removing the roof of a tunnel, laser treatments, or surgical removal of affected tissue. Simply draining an abscess may provide short-term pain relief, but the lump can return because the inflamed tissue remains.

Treatment is often more effective when it addresses both active inflammation and established tunnels. A dermatologist may work with surgeons, wound-care teams, pain specialists, or other clinicians.

Do not squeeze or pierce a lump yourself. This can increase pain, injure the skin, and introduce infection.

If smoking applies to you, stopping may improve overall health and may reduce HS activity. If weight is affecting skin friction or treatment options, supportive weight management may help some people. Care should remain respectful and should not delay effective HS treatment.

Medicines commonly used for this include adalimumab and bimekizumab . Which one suits you, if any, is a decision for you and your doctor.

- Treatments applied to the skin for limited disease
- Antibiotics like amoxicillin or doxycycline , often used for their anti-inflammatory effects
- Hormonal treatments for some people
- Biologic medicines that target specific parts of the immune system
- Pain relief suited to the type and severity of pain

Complications

Repeated inflammation can lead to permanent scars and interconnected tunnels. Scarring around a joint may tighten the skin and restrict movement.

Ongoing drainage can irritate nearby skin and make clothing, exercise, work, or intimacy difficult. Swelling caused by blocked lymph drainage can occur in severely affected areas.

Bacterial infection is not the usual cause of HS, but damaged skin can become infected. Rarely, infection can spread into surrounding tissue or the bloodstream.

Long-lasting severe HS, especially around the buttocks or anus, is linked with a rare type of skin cancer called squamous cell carcinoma. A sore, lump, or ulcer that changes, grows, bleeds, or does not heal should be examined.

Pain, odor, visible drainage, and unpredictable flares can affect mood and self-esteem. Depression and anxiety deserve treatment in their own right. Support for sexual health, work adjustments, and wound care may also be important.

Prevention

HS cannot currently be reliably prevented because its underlying cause is not fully known and inherited susceptibility cannot be changed.

You may be able to reduce irritation or some flares by limiting friction, choosing loose and breathable clothing, and avoiding shaving methods that injure affected skin. Smoking cessation and supportive weight management may help some people, but neither guarantees that HS will improve.

There is no single diet proven to prevent HS. Some people report personal food triggers, but evidence for restrictive diets is limited. Discuss major dietary changes with a qualified healthcare professional so that your nutritional needs are met.

Early treatment cannot guarantee prevention of progression, but controlling inflammation may reduce future skin damage.

Living with it and what to expect

HS usually follows a relapsing course. This means symptoms may improve, return, or move between periods of lower and higher activity. Not everyone develops extensive tunnels or scarring.

Existing scars may not disappear when inflammation settles. Tunnels often need a procedure as well as medicine. Treatment can still reduce new lesions, pain, drainage, and further damage.

Finding an effective plan may take time. Treatments sometimes need to be changed because symptoms continue, side effects occur, or a previously helpful medicine becomes less

effective. Regular follow-up is useful when you have repeated flares, persistent drainage, or immune-targeting treatment.

Practical measures can make daily life easier. Absorbent dressings, spare clothing, gentle adhesive removal, and plans for pain or drainage at work may help. A healthcare professional can provide documentation if workplace or school adjustments are needed.

HS does not affect fertility directly, but pain and affected skin can interfere with sex or intimacy. Hormonal changes may alter symptoms. If you are planning a pregnancy, pregnant, or breastfeeding, treatment should be reviewed because some medicines may need to change.

Many people with HS continue to work, exercise, have relationships, and take part in activities they value. The amount of support needed differs, and seeking help for pain or emotional distress is part of HS care.

When to get medical help

Arrange a routine appointment if you have painful lumps that keep returning in the armpits, groin, buttocks, under the breasts, or other skin folds. Also seek review if drainage, pain, or scarring is affecting sleep, movement, work, or relationships.

Contact your healthcare team sooner if a known HS area is worsening despite treatment, a wound will not heal, or you develop a new or changing growth in long-standing scarred skin.

Seek urgent same-day medical care if you have:

Call emergency services if you develop confusion, fainting, severe weakness, trouble breathing, or other signs of serious illness. These symptoms are not typical of an ordinary HS flare and may indicate a severe infection or another emergency.

- Fever with increasing warmth, swelling, or spreading redness
- Rapidly worsening pain or swelling
- Red streaks extending from an affected area
- Pus or drainage with feeling generally very unwell
- Difficulty passing urine or stool because of severe swelling or pain

Common questions

Is hidradenitis suppurativa contagious?

No. HS cannot spread through skin contact, sex, towels, toilet seats, or shared clothing.

Drainage may contain ordinary skin bacteria, so cover open areas and follow normal wound hygiene.

Is hidradenitis suppurativa caused by being unclean?

No. HS starts with inflammation around hair follicles and is not caused by poor hygiene. Harsh scrubbing can irritate the skin and will not remove the underlying condition.

Can hidradenitis suppurativa go away permanently?

There is currently no guaranteed cure. Some people have long periods with few or no symptoms, while others need ongoing treatment. Surgery can permanently remove disease from a treated area, but HS may appear elsewhere.

Should I pop an HS lump?

No. Squeezing or piercing it can worsen inflammation, damage the skin, and introduce infection. A very painful or swollen lump can be assessed for safe pain relief, treatment, or drainage.

What foods make hidradenitis suppurativa worse?

No food worsens HS in everyone. Research has not established one standard HS diet. A symptom diary may help identify a personal pattern, but avoid major restrictions without nutritional advice.

Can I shave if I have hidradenitis suppurativa?

Shaving can irritate active or scarred skin. Avoid shaving directly over inflamed areas. If hair removal triggers flares, discuss gentler methods or medically supervised laser hair reduction.

Sources

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