SYMPTOM

Absence of sweating

Absence of sweating means producing little or no sweat when your body would normally need cooling.

WHAT IT FEELS LIKE
Staying dry even when hot or exercising

WHERE IT IS FELT
One area or most of the body

MOST COMMON CAUSES
Dehydration, skin damage, medicine effects

WHEN IT IS URGENT
Dizziness, nausea, headache, or weakness while hot

USUALLY LASTS
From hours to ongoing, based on the cause

SEE A DOCTOR IF
New, widespread, persistent, or heat-limiting lack of sweat

Overview

Sweating helps control your body temperature. As sweat evaporates from your skin, it carries heat away. Producing no sweat is called anhidrosis . Producing less sweat than expected is called hypohidrosis .

Absence of sweating is a symptom, not a disease. It may affect one small patch of skin, several areas, or most of your body. A small affected area may cause no other problems because nearby skin can still sweat. Widespread loss of sweating can make it harder to stay cool during exercise, hot weather, or fever.

Some people only notice the change when their clothes or skin remain dry while everyone around them is sweating.

What it may feel or look like

The affected skin may stay dry during exercise or in a warm place. You may sweat normally in other areas. Sometimes those areas sweat more to make up for the areas that do not.

If your body cannot release enough heat, you may develop:

Dry skin by itself does not always mean sweating is absent. The amount you sweat can be affected by temperature, activity, humidity, fitness, fluid intake, and natural differences between people.

- Flushed or unusually warm skin
- Headache, thirst, or muscle cramps
- Weakness, nausea, or dizziness
- A fast heartbeat or rapid breathing
- Difficulty continuing exercise or working in heat

Common causes

Common causes include not drinking enough fluid, especially during heat or illness. Mild dehydration can reduce sweat production. Sweat may return after your fluid balance and temperature recover.

Damage or blockage of sweat glands can also affect a limited area. This may follow a burn, scar, radiation treatment, severe heat rash, or an inflammatory skin condition.

Some medicines reduce sweating by interfering with the nerve signals that activate sweat glands. These can include certain medicines for allergies, depression, mental health conditions, bladder symptoms, nausea, or muscle spasms. Do not stop a prescribed medicine on your own.

Less common causes include problems with the nerves that control automatic body functions, known as the autonomic nervous system. Diabetes, some autoimmune conditions, and other nerve disorders can affect these nerves. Rare inherited conditions may prevent sweat glands from developing or working normally.

A lack of sweating can also occur as part of a broader skin, metabolic, or neurological condition. The pattern, timing, and other symptoms help narrow down the cause.

When to seek medical care

Call emergency services now if heat exposure is followed by confusion, fainting, a seizure, severe difficulty walking, or loss of consciousness. These can be signs of heatstroke, which needs emergency treatment. A person with heatstroke may have dry or sweaty skin, so do not use sweating alone to judge the risk.

While waiting for help, move to a cool place, remove unnecessary clothing, and cool the skin with wet cloths or cool water. Do not give a drink to someone who is confused, unconscious, or unable to swallow safely.

Seek urgent same-day care if you cannot cool down or develop persistent dizziness, nausea, headache, weakness, cramps, or rapid breathing while hot. Stop activity, move into shade or air conditioning, and sip cool water if you are fully alert and can swallow. Get help if symptoms do not improve promptly.

Book a routine appointment if the change is new, widespread, persistent, or repeatedly limits exercise. You should also arrange an assessment if it began after starting a medicine or occurs with numbness, tingling, skin changes, unusual weakness, or problems controlling body temperature.

A small, stable patch over an old scar is usually less urgent if the rest of your body sweats normally.

How the cause is found

A healthcare professional will ask where you do and do not sweat, when the change began, and whether it occurs during heat or exercise. They may review your medicines, fluid intake, skin history, medical conditions, and family history.

The examination may include your skin, temperature, hydration, reflexes, sensation, and blood pressure. Depending on the pattern, blood tests may be used to look for conditions affecting nerves, metabolism, or inflammation.

Specialist sweat tests are sometimes needed. A thermoregulatory sweat test uses a powder that changes colour where sweat forms. Other tests can measure how sweat glands respond to nerve stimulation. A small skin sample, called a biopsy, may occasionally help assess sweat glands or nearby nerves.

Treatment and self-care

Treatment depends on what is reducing sweat production. It may involve correcting dehydration, treating a skin condition, or reviewing a medicine with the clinician who prescribed it. Nerve damage and scarred or absent sweat glands may cause longer-lasting symptoms.

Until the cause is clearer, reduce your risk of overheating:

Drink regularly during heat or exercise, but follow medical advice if you have been told to restrict fluids because of a heart, kidney, or liver condition.

Do not deliberately expose yourself to extreme heat to test whether you can sweat.

- Exercise during cooler parts of the day
- Choose air-conditioned or shaded places
- Wear loose, lightweight clothing
- Take regular cooling and water breaks
- Use a cool shower, damp cloth, or water mist
- Stop activity if you feel dizzy, weak, nauseated, or unusually hot

What to expect

Sweating may return when a temporary cause, such as dehydration or a medicine effect, is corrected. Recovery from a skin or nerve problem depends on the underlying condition and whether sweat glands remain intact.

A small affected area may remain unchanged without causing major difficulty. If large areas are involved, ongoing planning around exercise, work, travel, and hot weather may be needed.

Common questions

Can I have absent sweating in only one area?

Yes. Scars, burns, radiation, blocked glands, and some skin conditions can create dry patches while the rest of your body sweats normally.

Is absence of sweating the same as dehydration?

No. Dehydration can reduce sweating, but it is only one possible cause. Persistent or patchy loss of sweating may have another explanation.

Can I still exercise?

A small affected patch may not limit activity. If sweating is widely reduced or you have previously become unwell in heat, avoid strenuous activity in hot conditions until you have medical advice. Stop immediately if overheating symptoms begin.

Should I stop a medicine that may be responsible?

No. Speak with the prescriber or a pharmacist. They can check whether the medicine may

contribute and whether a safer adjustment is appropriate.

Sources

- MedlinePlus Medical Encyclopedia. Sweating - absent . U.S. National Library of Medicine
- Mayo Clinic. Anhidrosis: Symptoms and causes
- Centers for Disease Control and Prevention. Heat-related illnesses
- StatPearls Publishing. Anhidrosis . NCBI Bookshelf
- Cheshire WP, Fealey RD. Drug-induced hyperhidrosis and hypohidrosis: incidence, prevention and management . Drug Safety. 2008;31(2):109-126