

## INTRODUCTION

**H**idradenitis suppurativa (HS) is a prevalent and devastating inflammatory skin disease predominating in women and minorities. HS is characterized by painful recurrent abscesses, foul-smelling purulent drainage, sinus tract and fistula formation, and disfiguring scarring involving intertriginous body sites including the axillae, breasts, groin, and buttocks. Disease onset typically occurs in the second to fourth decades of life and is associated with significant impacts on physical and psychological well-being due to pain, shame, and isolation, leading to profound suffering and despair. HS is both clinically and biologically understudied and therefore poorly understood. As a result, no uniformly effective therapies exist for management, and until recently, there was a paucity of high-level evidence to support current treatments.

HS has historically been characterized as a rare, orphan disease. In recent years, however, the prevalence of HS has been estimated to be as high as 1%-4% in Western populations. Renewed interest in HS has directed studies aimed at understanding the burden of HS on quality of life, pathophysiologic mechanisms underlying HS, and potentially effective treatments for HS management. This work has guided the search for therapeutic options for HS, including adalimumab, which became the first drug approved by the US Food and Drug Administration for HS in 2015. Since this time, the field's collective interest in understanding HS epidemiology,

pathophysiology, patient-centered outcomes and therapeutic options has only continued to grow.

In this issue of *Seminars in Cutaneous Medicine and Surgery*, we focus on providing readers with a comprehensive understanding of the current state of knowledge, as well as major knowledge gaps, of HS. Well-known experts in the field provide up-to-date reviews on clinical characteristics, comorbidities, innovative treatment modalities, disease sequelae, and unmet needs in the field, thereby offering a broad and rigorous review of this debilitating inflammatory skin disease.

I would like to take this opportunity to thank all of the contributing authors and mentors for their dedication to the care of patients with complex medical dermatologic conditions. We are confident this series of manuscripts will be helpful and provide insight to dermatologists and other subspecialists who care for patients with HS.

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