

DLN APC Hyperhidrosis (Excessive Sweating) Guideline for Primary Care

Definitions	
Hyperhidrosis: excessive sweating. Primary axillary hyperhidrosis (PAHH): excessive underarm sweating without an identifiable cause.	
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1. Assess severity using the Hyperhidrosis Disease Severity Scale (HDSS)	
Mild–moderate HDSS 1–2	Sweating is not noticeable or is tolerable, with no impact or only occasional interference with daily activities.
Moderate–severe HDSS 3–4	Sweating is barely tolerable or intolerable and frequently or always interferes with daily activities.
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2. Is hyperhidrosis moderate–severe (HDSS 3–4)?	
No — HDSS 1–2: provide appropriate lifestyle and self-care advice; review if symptoms worsen or interfere more with daily activities. Yes — HDSS 3–4: assess for an identifiable cause that can be managed, including medicines, other diseases, and drug or alcohol use. See Hyperhidrosis CKS or Hyperhidrosis	
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3. Identifiable cause found? Identify potential triggers	
Yes: manage the underlying cause where possible, then reassess sweating severity and impact. No / symptoms persist: manage as primary hyperhidrosis and continue through the staged treatment pathway below.	
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4. Staged treatment pathway	
First line (OTC) if lifestyle advice insufficient	
Aluminium chloride hexahydrate 20% roll-on applicator	Apply ONCE daily at night to dry skin, wash off the following morning, reduce frequency as condition improves. If irritant reduce to 10 minutes before washing off and gradually increase as tolerated.
Review after 6 weeks . If response is inadequate or treatment is not tolerated, oral treatment with systemic anticholinergics can be considered.	
Second line (off label)	
Oxybutynin Immediate Release	2.5mg ONCE daily Titrate according to response and tolerability; maximum 10mg daily (two to four divided doses)
Third line (off label)	
Oxybutynin Modified Release	Initially 5mg ONCE daily, increased if required to a maximum dose of 10mg ONCE daily
OR (licensed)	
Propantheline Bromide	15mg three times daily at least 1 hour before meals and 30mg at night, maximum 120mg daily.
Review after 6 weeks . If response is inadequate after at least 6 weeks at the maximum tolerated dose of oxybutynin or propantheline, or treatment cannot be tolerated	
Fourth Line (PAHH only)	
Glycopyrronium Bromide 2.2 mg /pump actuation cream (£69.50 per tube)	TWO pump actuations per armpit, ONCE a day in the evening for 4 weeks, then twice weekly thereafter if symptoms allow One tube should last for the first month, thereafter one tube should last approximately 4 months (4 tubes per year for the first year, 3 tubes per year for subsequent treatment).
If the sweating is not controlled after glycopyrronium bromide treatment, consider referral to dermatology for consideration of botulinum toxin (if available)	

Further Information

- Glycopyrronium bromide (GPB) cream can be used as an option to treat severe primary axillary hyperhidrosis in adults, if lifestyle advice, topical aluminium-based antiperspirants and oral anticholinergics have not controlled underarm sweating, or are contraindicated or not tolerated as per NICE TA 1175.
- For further information on side effects, contra-indications, monitoring or cautions for all treatments, please see individual SmPCs via [Home - electronic medicines compendium \(emc\)](#)
- Information and sources of advice and support for patients are listed below:
 - The International Hyperhidrosis Society (website available at www.sweathelp.org) which is an independent, non-profit organization providing information resources for people affected by hyperhidrosis and for healthcare professionals.
 - The British Association of Dermatologists' information leaflet [Hyperhidrosis](#).
 - The NHS information leaflet [Excessive sweating \(hyperhidrosis\)](#).
 - Hyperhidrosis UK is a UK-based patient information and support website for people affected by hyperhidrosis. It provides educational resources, self-help information and signposting to treatment and support services, but is not a registered charity or healthcare provider. [\[hyperhidrosisuk.org\]](http://hyperhidrosisuk.org)

References

[1 Recommendations | Glycopyrronium bromide cream for treating severe primary axillary hyperhidrosis | Guidance | NICE](#)

[Assessment | Diagnosis | Hyperhidrosis | CKS | NICE](#)

[Causes | Background information | Hyperhidrosis | CKS | NICE](#)

[Axhidrox pump-pack 2.2 mg/pump actuation cream 2.2 mg/270 mg Cream POM - Summary of Product Characteristics \(SmPC\) - \(emc\) | 101983](#)

[Hyperhidrosis: oxybutynin](#)