Journey to Recovery

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Teacher | 46 years old

Hyperhidrosis

I have had hyperhidrosis since I was young, when I would sweat profusely from my palms and feet. Even back then it caused problems in my daily life, like when I was 17 and sitting for my SPM examination. The paper would get wet as I wrote on it and that did not help my confidence.

I decided to seek treatment when my condition began to interfere with my job. I work with computers and papers a lot, typically grading exams and homework on a daily basis. This would affect the keyboard and get the papers wet, so they would tear or the words would become unreadable. I could not even hold whiteboard markers properly.

It was a constant source of anxiety as even my students would ask me about it. I never felt confident when I was in public because I had no control over the excessive amount of sweat. I could not wait around any longer to see if it would improve. That was when I decided that treatment was the only option.

I contacted people I knew with similar symptoms to know more and I researched my symptoms and the possible conditions. Other hospitals had given me anti-sweating treatment that alleviated the condition but never fixed it. My search led me to get treatment from specialists at IJN.

Last year in July, I had my Endoscopic Thoracic Sympathectomy (ETS) within a few short months of consultation. The malfunctioning nerves (thoracic ganglions 3 and 4) that caused my irregular sweating was lasered through a small incision under my arm. My stay at IJN lasted 3 days, including the operation and recuperation period at the hospital.

After the surgery, it took less than a month before I was ready to get back to work, and I have not sweat from my palms since. Also, while the doctor warned me that there was a remote possibility that other parts of my body – such as my back and knees – may start sweating, that did not happen.

Endoscopic Thoracic Sympathectomy

1. **The patient will go under general anaesthesia**
2. **Cardiothoracic surgeons aim to interrupt the transmission of nerve signals from the spinal column to the sweat glands**
3. **An endoscopic camera is inserted into the chest**
4. **The lung is temporarily collapsed so that surgeons can cut the nerve paths without air moving in and out during the surgery**
5. **After the nerve signals have been blocked, the lung is inflated again**
6. **The cuts are closed with stitches**
7. **A small drainage tube may be left in the patient's chest for a day**

Thanks to the procedure, I now feel better about being in public. My quality of life has improved, as well as my self-confidence and has made me more effecient I am at work.

My advice to anyone who is struggling with the same problem is to get help and support. Even though the situation may seem bleak, there is always a solution to any problem you have. You just need to find it through research and asking advice from experts who can guide you on your way.