Reply to “Hidradenitis Suppurativa Influences Tattooing Practice in Women”

Rune Kjærsgaard Andersen Kasper Køhler Alsing

Department of Dermatology, Zealand University Hospital, Roskilde, Denmark

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Dear Editor

In the latest issue of *Dermatology*, Guillem et al. [1] presented a hidradenitis suppurativa (HS) cohort of 209 patients and explored how HS influenced body art practice (body piercings and tattoos). Ultimately, they concluded that HS led to an increase in tattooing in affected French women, as 44% of women in their cohort had one or more tattoos, as compared to the 9–24% of women reported in other French cohorts [2–4].

We read this article with great interest, as we believe it highlights interesting aspects of HS. The fact that 5% of the cohort abandoned the idea of getting a tattoo due to fear of infection, flare or scarring reveals yet another area where HS negatively impacts quality of life and/or opportunities of the afflicted. In contrast, the fact that 7% got a tattoo to hide HS scars, draw away the focus from HS lesions or regain control of pain and/or their bodies shows a heartening way where body art can help individuals cope with or ameliorate HS-related suffering.

In psoriasis, another chronic inflammatory skin condition, tattoos have been associated with a positive effect on body image [5]. Body art can be a way for some to show

individuality, physical endurance, and may even help some who have experienced traumatic experiences to overcome these and counter possible alienation/victimization [6, 7].

However, the conclusion that body art is more prominent amongst HS patients may be faulty. For one Guillem et al. [1] state that 65% of those with tattoos and 90% of those with body piercings had these performed/placed before disease onset. Secondly as they themselves note, tattooing is more prevalent in smokers and workers (as compared to managers) [1]. They however omit to state that in industrialized countries the tattoo prevalence is highest for those with low educational and socioeconomic status (SES) [8], and that across a multitude of cultures tattoo prevalence is greatest amongst the young (ages 25–34) [9]. This is relevant as HS is associated with a low SES [10, 11], a higher frequency of smoking [10–12] and as both mean and median ages of HS onset are reported as the early twenties [13, 14].

It is therefore conflicting that the HS cohort of Guillem et al. [1], with a mean age of 33 years, is mostly compared with studies that have been sampled to match the age, sex and profession quotas of the French population in gen-

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eral [2, 3]. One study conducted amongst French university students [4] shows a higher tattoo prevalence than seen in the French general public [2, 3]. The mean student age was 20–22 years, which is below the national average ages for time of first tattoo (24 and 26.5 years for men and women, respectively) [3]. This further cements the significance of age upon body art practice.

Age and SES are therefore potentially vital confounders for differences in body art prevalence, and their influences should therefore, as a bare minimum, be properly addressed. Thus, stating that HS in itself is associated with an increased prevalence of body art cannot yet be concluded. The study by Guillem et al. [1] does however present interesting preliminary findings that warrant further investigation.

Key Message

The higher prevalence of tattooing found amongst patients with hidradenitis suppurativa is likely not disease specific, but rather an expression of their lower age and socioeconomic status.

Disclosure Statement

The authors have no conflicts of interest to declare.

Author Contributions

R.K. Andersen and K.K. Alsing wrote the letter in unison.

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