

Table 1. Patient characteristics		
		Patients, n=49
Male gender		24 (49)
Age (years)		34 (11.7)
Age at onset		23.2 (11.3)
Delay in diagnosis (years)		3.94 (4.3) n=35
Patients referred for the first time		38 (77.5)
Previous surgical management:		
Abscess drainage		28 (57.1)
Excision of individual lesions		15 (26.5)
Total excision		8 (30.6)
Previous medical management ¹:		
Systemic antibiotics ²		14 (32.5)
Number of previous antibiotic regimens		1.2 (1) n=43
Family history of HS		16 (34) n=47
Number of anatomical sites involved ³		4.4
HS phenotype ^{4,5}	- axillary-mammary	24 (48.9)
	- follicular	13 (26.5)
	- gluteal	11 (22.4)
Hurley	-stage 1	11 (22.4)
	-stage 2	29 (59.1)
	-stage 3	9 (18.3)
Intermittent course		24 (53.3) n=45
Continuous course		21 (46.6) n=45
Modified Sartorius score		30.4 (17.6) n=45
Number of fistulas		1.2 (2.6) n=42
Number of abscesses and inflammatory nodules		4.3 (4.4) n=45
DLQI		13.4 (7.6) n=39
Data are expressed as mean (SD) and n (%) for continuous and categorical variables, respectively.		
1. Adalimumab is not reimbursed In France and thus its prescription is very limited.		
2. Induction treatment.		
3. The following areas were considered: axillary, mammary, gluteal, inter-gluteal cleft, inguinal.		
4. According to Canoui-Poitrine F, Le Thuaut A, Revuz J et al. Identification of three Hidradentitis suppurativa Phenotypes: latent class analysis of a cross-sectional study. <i>J Invest Dermatol</i> 2013 Jun; 133 (6):1506-11.		
5. One patient was diagnosed with PAPASH syndrome.		