

# LETTERS TO THE EDITOR

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## Expanding Insurance Coverage for Wound Supplies for Patients With Hidradenitis Suppurativa

### Dear Editor:

Hidradenitis suppurativa (HS) is a chronic autoinflammatory skin disease marked by painful or pruritic nodules, abscesses, and draining sinus tracts in intertriginous areas.<sup>1</sup> These lesions may emit odor, drain intermittently, and severely impair patients' quality of life.<sup>2</sup> Because of the disease's chronic and recurring nature, wound care for HS is an important component, but it may not be adequately managed in some patients.<sup>1,3</sup> One study reported 82.9% of patients desired more time discussing this topic with their dermatologists, and 33% reported they were not satisfied with their current wound care regimen.<sup>1</sup> Many patients report using items such as panty liners, menstrual pads, or tissues for wound care due to their convenience and affordability.<sup>3</sup> However, these do not provide optimal management and can cause irritation or lead to infection, potentially worsening morbidity.<sup>3</sup> Access to appropriate, site-specific dressings is essential for reducing pain, controlling odor and staining, preventing secondary infections, and ultimately improving quality of life.<sup>1,3,4</sup>

Effective wound care supplies vary based on the lesion type, depth, drainage level, and anatomical location. These supply needs may vary from patient to patient depending on their acute flare and/or chronic needs. For example, superficial wounds may be managed with plain absorptive dressings. However, tunneling or exudative lesions often require superabsorbent dressings to absorb fluids from draining lesions.<sup>4</sup> When managing intertriginous or friction-prone areas, the use of silicone-based adhesives or nonadherent contact layers must be considered to minimize pain and trauma to the area.<sup>4</sup> In a prospective study, patients with moderate-to-severe HS were provided a kit containing 3 types of United States Food and Drug Administration–cleared dressings: foam, hydrogel, and nonadhesive gelling fiber.<sup>5</sup> These patients reported that they previously could not use these items due to cost and limited

access. Within 2 weeks, the patients reported greater satisfaction, easier application, and reduced pain. Dermatology Life Quality Index (DLQI) scores improved from a median of 14 to 8, highlighting the tangible benefits of appropriate dressings and the impact they can have on quality of life.<sup>5</sup>

The financial burden of wound care presents a significant hurdle for patients and is often not communicated to providers. A study reported that 44% of participants were unable to afford adequate supplies and settled for suboptimal management with tissue and toilet paper, and 24.8% spent more than \$50 a month on supplies.<sup>3</sup> The severity of this burden was more likely to occur in Black participants who also presented with increased morbidity compared to White participants.<sup>3</sup> This highlights the need for increased clinical attention to these barriers to improve the quality of life and prevent disease progression for individuals with HS.

Dermatologists and other providers should feel empowered to engage in conversations about wound care and its financial impact on patients. By better understanding a patient's situation, dermatologists will be better positioned to advocate for their patients in obtaining insurance coverage as well as advocating for policies that expand care. Currently, only 16.1% of patients with HS receive insurance-covered wound supplies, indicating a significant unmet need for coverage.<sup>3</sup> In addition, dermatologists can improve patient education by discussing optimal wound supplies with patients and exploring insurance-covered options to navigate patient financial hardships.<sup>3</sup>

Adequate access for the management of chronic disease is a public health issue. More support is needed to mitigate the financial burden for patients and make care more affordable. Expanding insurance coverage for effective wound care dressings is a critical step toward equitable HS care and should be a shared priority among providers and policymakers.

With regard,  
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