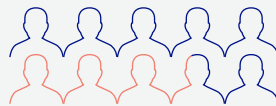


Hidradenitis suppurativa (HS) key facts

HS is a painful, chronic, recurring and potentially debilitating inflammatory skin disease.^{1,2} People living with HS can endure severe pain, leading to physical limitations and a diminished quality of life.^{1,2}



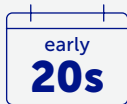
of people **affected by HS in most studied countries**.^{1,2}



Around **one-third of patients report a positive family history indicating a genetic pattern**.³



of late diagnosis HS cases had been **misdiagnosed**.⁴



The average age of onset for HS is in the **early 20s**.³



Data suggest that HS affects **three times as many women as men**.³



to an HS diagnosis.^{4,5*}
This delay in the diagnosis of HS can result in more severe disease and a higher number of concomitant systemic disorders.⁴

Causes of HS

HS is believed to be caused by a combination of **genetics, lifestyle** and the **activity of proinflammatory cytokines** that result in an inflammatory vicious circle.⁶

Lifestyle factors contribute to the development of HS.^{6,7}



Exercise⁶



Smoking⁶



Diet⁶



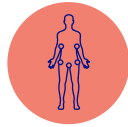
Genetics⁶

Unmet needs in HS



Unmet needs in HS include more **prompt diagnosis, greater awareness** and an **urgent need for new treatment options**.^{4,5,8-10}

The impact of HS



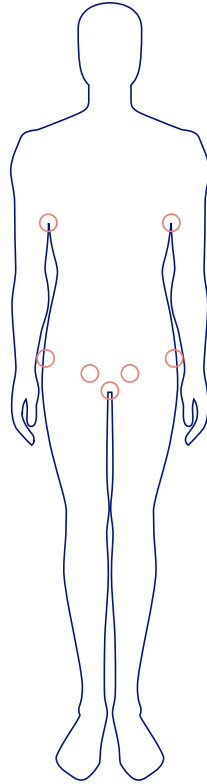
Nodules, abscesses and pus-discharging fistulas typically occur in armpits, groin and buttocks.^{3,6}



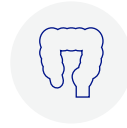
Severe pain around nodule sites.³



Discharge and scarring.^{3,6}



Many people living with HS experience mental health challenges, such as depression, anxiety and low self-esteem.^{3,4}



Several possible comorbidities have been associated with HS, including inflammatory bowel disease, cardiovascular disease and psychiatric diseases.^{3,4}



Relationships, education, and career can be affected by the burden of HS.²

UCB's commitment in HS

UCB aspires to make a difference to people's lives by addressing persistent unmet needs in immunologic disease populations. UCB believes early diagnosis and treatment are important to prevent debilitating consequences of HS and improving quality of life for patients. Therefore, we have partnered with a variety of patient advocacy networks to raise awareness on the impact of HS, while working to close gaps in knowledge, and care, of HS through our scientific innovation.

*Global Survey of Impact and Healthcare Needs (VOICE) Project, with responses from 1,299 participants from Europe (55.4 percent) North America (38.0 percent) and Asia, Australia, Africa and South America (6.6 percent).

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