

Towards Value-Based Healthcare, Insights from Dermatology and Rheumatology

# PSORIASIS



## OVERVIEW

Psoriasis is a chronic (life-long), systemic disease which affects mainly the skin. It is an immune-mediated disease that causes inflammation in the body. Genetic susceptibility plays a role but is not essential. A family history of the disease is not uncommon.

It is characterized by increased uncontrolled proliferation of skin cells (keratinocytes). These cells pile up on the surface of the skin forming thick, scaly patches called plaques.

Psoriasis is not contagious or related to food.

It can arise at any age and is most common in the age group of 30-20 and 69-50.

The worldwide prevalence is about %2 but differs according to countries.

## TYPES OF PSORIASIS:

There are a few different forms of psoriasis, and some people may suffer from different types at different times.

#### **1. PLAQUE PSORIASIS:**

The most common form. About %80 to %90 of people have plaque psoriasis. It is usually asymptomatic but can be painful or itchy and usually affects the knees, elbows, trunk, scalp, behind the ears, navel, and between the buttocks.

#### 2. GUTTATE PSORIASIS:

It accounts for about %8 of psoriasis and appears more frequently in children and young adults. It can occur after bacterial throat infections (streptococcal infection).

#### 3. INVERSE PSORIASIS:

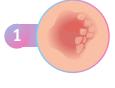
Bright red, smooth, shiny plaques can appear usually in the armpits, groin, beneath the breasts and between the buttocks.

#### 4. PUSTULAR PSORIASIS:

Very rare and causes tiny pustules either limited to palms and soles or generalized. It can be associated with fever and constitutional symptoms.

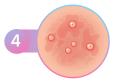
#### 5. ERYTHRODERMIC PSORIASIS:

It is a potentially life-threatening form of psoriasis and affects only %1 of psoriasis patients. It is characterized by bright erythema all over the body and can be associated with constitutional symptoms. It is one of dermatological emergencies.













# WHAT CAN TRIGGER FLARE-UPS:

Psoriasis triggers differ from person to person. Common triggers include:

- Stress
- Injury to skin (psoriasis tends to occur at site of trauma, Koebner phenomenon)
- Cold Weather and dryness
- Infections
- Some Medications like some blood pressure medications

# ASSOCIATED CONDITIONS & COMPLICATIONS:

The most well-recognized associated condition is psoriatic arthritis which occurs in 1 in 5.

In addition, psoriasis is associated with several comorbidities which include cardiovascular diseases, metabolic syndrome, inflammatory bowel disease, uveitis and has psychological burden.



## MANAGEMENT:

#### Lifestyle Modification:

Smoking cessation, avoiding alcoholic drinks and weight loss improve overall psoriasis and the response to treatment.

#### **Medical Therapy:**

Mild or moderate psoriasis can be adequately treated with topical corticosteroids (applied directly to the skin), vitamin D-analogues, excimer laser or phototherapy.

Patients that suffer from severe psoriasis, might require systemic drugs such as acitretin, methotrexate or biologic therapies.

