



PSORIASIS

A Disease Covered in Misunderstanding

THE TRUTH ABOUT PSORIASIS: MORE THAN SKIN DEEP

Psoriasis has long been a disease covered in misunderstanding. If you're like most people, you probably think of psoriasis as an unpleasant skin condition. In fact, it's a chronic immune system disorder.

If you or someone you know has psoriasis, it's important to know the facts. Knowledge gives you the power to better cope with psoriasis, take action and learn more about appropriate new treatment options.

WHAT IS PSORIASIS?¹

Psoriasis is a chronic immune system disorder that causes raised, red patches (also called lesions or plaques) with silvery white buildup of dead cells (called scales) to form on the skin. The immune system is mistakenly activated, which causes the body to produce new skin cells much more quickly than normal. A normal skin cell matures and falls off in 28 to 30 days. But a psoriatic skin cell takes only three to four days to mature and move to the surface. Instead of falling off (shedding), the cells pile up and form lesions. Psoriasis symptoms commonly appear on the scalp, knees, elbows and torso, but they can develop anywhere on the body.

IS ALL PSORIASIS ALIKE?¹

Psoriasis can range from mild to moderate to very severe. About 80 percent of those diagnosed with psoriasis have plaque psoriasis, making it the most common form of the disease.

WHO GETS PSORIASIS?^{1,2,3}

Psoriasis affects an estimated 125 million people worldwide, with nearly 25 percent of cases that are considered moderate to severe. In Ireland, this disease affects nearly 100,000 people. The disease occurs nearly equally in men and women, and across all socioeconomic groups. Psoriasis can occur in people of all ages, but typically appears between the ages of 15 and 35.

WHAT CAUSES PSORIASIS?¹

No one knows exactly what causes psoriasis. Emotional stress, injury to the skin, some types of infection and reactions to certain drugs can trigger psoriasis to flare up for the first time or aggravate existing psoriasis.

WHAT IS THE IMPACT OF PSORIASIS?¹

Psoriasis lesions may be itchy and painful, and can crack and bleed. Up to 30 percent of psoriasis patients can develop psoriatic arthritis, which combines the skin symptoms of psoriasis with joint inflammation similar to rheumatoid arthritis.

For the most part, people with psoriasis function normally. Sometimes people experience low self-esteem because of the psoriasis. Psoriasis is often misunderstood by the public, which can make social interactions difficult. This may lead to emotional reactions such as anxiety, anger, embarrassment and depression.

ARE THERE OTHER HEALTH CONCERNS ASSOCIATED WITH PSORIASIS?⁴

Psoriasis was previously thought to affect primarily the skin, however, our understanding of additional conditions that may be associated with this disease has grown significantly.

The incidence of cardiovascular disease markers – including obesity, diabetes, high blood pressure and high cholesterol – is increased in psoriasis patients.

TREATMENT^{1,5}

The first step on the road to treatment is to see a doctor who can diagnose psoriasis. Though there is no known cure, there are many treatments that can reduce symptoms of the disease. The approach to psoriasis treatment depends on the type, location and severity of your condition, as well as your age and medical history. Together, you and your doctor can find a treatment that works for you.

HOW IS PSORIASIS DIAGNOSED?¹

In order to diagnose psoriasis, a general practitioner or dermatologist (skin specialist) simply examines the affected skin.

He/she can also examine a piece of skin under the microscope (a procedure called a biopsy), but this is not usually necessary.

WHAT TREATMENTS ARE AVAILABLE FOR PSORIASIS?⁶

Current treatment options fall into three broad categories:

- Topical agents (creams and ointments applied to the skin)
- Phototherapy (exposing the skin to wavelengths of natural and artificial ultraviolet light)
- Systemic medications (taken by pill or injection) are prescription medications that affect the entire body, and are usually reserved for patients with moderate to severe psoriasis. Biologics are a type of systemic medication.

Doctors often take a “1-2-3 approach.” This approach begins with topical therapy, then moves to phototherapy and, eventually, systemic therapy, which includes biologics.

The “1-2-3 approach” evolved because treatments that work well at first may lose their effectiveness over time. Also, a treatment that works very well in one person may have little effect in another.

Thus, doctors often use a trial-and-error approach to find a treatment that works, and they may switch treatments periodically (for example, every 12 to 24 months) if a treatment does not work or if adverse reactions occur.⁷

TOPICS TO EXPLORE IN YOUR PSORIASIS SYMPTOM DIARY⁸

- OVERALL PERCEPTIONS OF YOUR CONDITION TODAY
- PSORIASIS FLARES (INCLUDING EXTENT AND SEVERITY OF THE FLARE)
- EVENTS LEADING UP TO THE FLARE (I.E., POTENTIAL TRIGGERS)
- PAIN IN JOINTS (INCLUDING TIME, DURATION AND ACTIVITIES IT FOLLOWS)
- TREATMENT RELATED SIDE EFFECTS

ALTERNATIVE AND COMPLEMENTARY THERAPIES⁹

As more people have become active partners in the treatment of their psoriasis, interest has grown in practices and products that may not be considered part of contemporary allopathic medicine. Check with your doctor before beginning any new treatment. Always make sure your doctor is aware of any natural or herbal product (including vitamins and supplements) you are using, as some may interact with prescription medications.

Always make sure that you discuss any alternative or complementary therapy with your doctor and be cautious of organisations claiming cures for Psoriasis.

WHAT ARE THE LATEST DEVELOPMENTS IN PSORIASIS?¹⁰

Biologic therapies are a systemic treatment option for people with moderate-to-severe cases of psoriasis.

They are different from other systemic medications because they are designed to block the disease in its development – in the immune system. Biologics interrupt the inflammatory cycle of psoriasis and improve symptoms for many people who take it.

TAKING ACTION^{8,11}

It's up to you to take responsibility for your condition by learning all you can and making the most of your doctor's visits. Remember, your relationship with your doctor is an ongoing partnership and good communication makes all the difference. Here are some tips:

- **Make a list of questions** to discuss with your doctor and bring it along to the visit.
- **Keep a diary** that tracks symptoms and effectiveness of treatment. Bring this diary to the visit so that you can refer to it as needed.
- **Acknowledge your feelings** – It's natural to experience sadness, anger and frustration when dealing with psoriasis. Learning to recognise and manage these feelings can be as important as treating the physical symptoms.
- **Manage stress** – Since stress can be a psoriasis trigger in some people, relaxation and stress reduction are important; they can also give you a feeling of control.¹²
- **Don't give up** – Psoriasis is chronic and can be unpredictable; however it can be managed. Don't give up on psoriasis control!
- **Seek support** – You may want to enlist encouragement from family members, friends, co-workers or patient groups.

- PERCEPTIONS OF YOUR CONDITION
 - EFFECTIVENESS OF CURRENT TREATMENT
 - TREATMENT SIDE EFFECTS
 - QUESTIONS ABOUT ADDITIONAL TREATMENT OPTIONS, INCLUDING BENEFITS AND RISKS OF THERAPIES
 - TREATMENTS WHICH BEST SUIT YOUR LIFESTYLE
 - LIFESTYLE HABITS THAT MAY AFFECT PSORIASIS (E.G., STRESS, SMOKING)
 - EMOTIONAL WELL BEING (E.G., FEELINGS OF DEPRESSION OR ISOLATION)
 - SUPPORT RESOURCES
 - WHAT TO EXPECT UNTIL NEXT VISIT
- * BRING A LIST OF YOUR CURRENT MEDICATIONS, INCLUDING VITAMINS AND SUPPLEMENTS
- ** UTILISE PSORIASIS SYMPTOM DIARY WHERE APPROPRIATE

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For further information on psoriasis, please visit

www.psoriasisuncovered.ie

Developed by Abbott, a global health care company focused on the discovery and development of innovative treatments for immunologic diseases