

Psoriasis

Living with this lifelong skin condition

Psoriasis is a disease that causes red, itchy, scaly and inflamed skin that cracks and bleeds. It is a condition without a cure that affects about 7.5 million Americans, according to the National Psoriasis Foundation. It has no known cause but has been linked to genetics (many patients have at least one family member with the condition). Psoriasis also can be caused by your body's reaction to infections, particularly strep throat.

Types of Disease

There are five types of psoriasis:

1. Plaque — the most common type, patients have large red, scaly areas, generally on the scalp, face, elbows, knees, hands, feet and genitals
2. Guttate — patients have small red, scaly spots that may connect over time
3. Inverse — patients' affected area is located in skin folds, armpits and groin
4. Pustular — in addition to red areas, patients' skin also has white blisters
5. Erythrodermic — patients' skin is red over large portions

Five to 10 percent of patients with psoriasis develop psoriatic arthritis, causing swollen, painful joints, especially in the hands and feet.

People with severe psoriasis also may be at higher risk for cancer, heart attack or depression, experts say. Talk to your healthcare provider about tests that can check for these conditions.

Negative reactions, or the looks on the faces of others when they see psoriasis on your skin, can be hard to deal with mentally and emotionally and make you feel depressed. Tell your healthcare provider if you are feeling this way to see what can be done to make you feel better.

Treatment Options

For many people, dealing with psoriasis is a lifelong struggle to manage the disease. Patients try many kinds of treatments, or combinations of treatments, until they find ones that work. However, over time, treatments often are changed to reduce

side effects or make sure you don't have so much of one type of medication that it no longer works very well for you. Treatment often depends on how bad your case is (symptoms can range from thick, scaly skin to inflamed, bleeding skin) and how much of your body is covered with psoriasis. The weakest drug is tried first before trying a stronger medication, which has more severe side effects.

Generally, treatments begin with mild therapies such as:

- topical corticosteroids that are creams rubbed on the skin;
- vitamin A- or D-based creams;
- coal tar ointment treatments; and
- light therapy either by some sunlight or UVA or UVB lights at a doctor's office NOT a tanning salon.

If these don't work well, you may need other medications that actually suppress your body's ability to fight infections because your immune system is working against you. These medications carry some risk of organ damage and birth defects for pregnant women and cannot be taken for long periods.

Further Efforts

Though there is no cure for psoriasis, your healthcare provider may be able to help you ease your symptoms with medications or phototherapy. You may even be asked to use a method called "occlusion," which means covering the medicated cream you put on your psoriasis with plastic or tape to keep it from rubbing off.

Taking care of the skin — keeping it moisturized and clean — may help keep symptoms from getting worse. Cuts, scrapes and burns often turn into psoriasis.

You also may be encouraged to try to find the "trigger" that sets off a flare-up, which could be stress, for example, or even a certain kind of food you shouldn't eat. In addition, cold weather, smoking and alcohol abuse are thought to worsen symptoms; heart or psychotropic medications such as antidepressants also can cause an increase in symptoms.

You can find more information on the Internet at www.psoriasis.org, www.ifpa-pso.org, www.WebMD.com or www.healthline.com.

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The purpose of this patient handout is to further explain or remind you about a medical condition. This handout is a general guide only. If you have specific questions, be sure to discuss them with your healthcare provider. The handout may be reproduced for distribution to patients.

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