

10. Can Psoriasis be cured? Can Psoriasis recur?

- No. Psoriasis is treatable but not curable.
- Yes, Psoriasis can recur.

11. Can a person with Psoriasis marry?

- Yes. Psoriasis affected person can marry and have children.
- Psoriasis is not a contagious disease.

12. What are the life style modifications to be adopted by patients with Psoriasis?

- Weight reduction to ideal body weight.
- Physical exercise.
- Limiting alcohol intake.
- Quit smoking.
- Biofeedback and cognitive behaviour therapy for reduction of stress level.

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PSORIASIS

INDIAN ASSOCIATION OF DERMATOLOGISTS, VENEREOLOGISTS AND LEPROLOGISTS

- What is Psoriasis?
- How can one get Psoriasis?
- Is Psoriasis hereditary?
Is Psoriasis transmissible to family members or contacts?
- What factors can aggravate Psoriasis?
- How does Psoriasis manifest?
Which areas of body are affected by Psoriasis?
- What should one do if he/she gets Psoriasis?
- Are there any tests to confirm Psoriasis?
- Which diseases can be associated with Psoriasis?
- How can Psoriasis be treated?
- Can Psoriasis be cured?
Can Psoriasis recur?
- Can a person with Psoriasis marry?
- What are the life style modifications to be adopted by patients with Psoriasis?

1. What is Psoriasis?

- Psoriasis is a common, chronic skin disease which sometimes also involves nails and joints. It affects up to 2% of the world population.
- Psoriasis is not a life threatening disease but recurrences are common.
- Psoriasis is a disease which is treatable and can be effectively controlled but is not completely curable.



2. How can one get Psoriasis?

- The exact cause of Psoriasis is not known. It is a complex interplay between genetics and immunology.
- Genetic susceptibility and environmental factors are responsible for disease.
- Normally the epidermis or outer layer of skin is continuously replaced and it takes place within three and four weeks. There is increased turnover of skin cells in Psoriasis so that the skin cells are formed and shed within a week.

3. Is Psoriasis hereditary? Is Psoriasis transmissible to family members or contacts?

- Psoriasis is a multifactorial disease.
- It can be inherited, but the mechanisms are complex.
- It is not necessary that children of affected parents will develop Psoriasis but there is a higher chance of developing Psoriasis. If one parent is affected, then the chances of developing Psoriasis in the child is approximately 15% and chances are increased to 40 % if both parents are affected.
- Psoriasis is not an infectious disease and cannot be transmitted by contact.

4. What factors can aggravate Psoriasis?

- Many factors are known to aggravate Psoriasis.
- Infections - sore throat and HIV infection can trigger Psoriasis.
- Certain medications such as antihypertensive drugs (beta-blockers), anti-malarials (chloroquine), pain killers, medications for psychiatric illnesses (lithium) and withdrawal of systemic corticosteroids can aggravate Psoriasis.
- Physical trauma and mental stress can trigger Psoriasis.
- Cold climates and winters commonly aggravate Psoriasis in most cases, but some patients may have summer aggravation.
- Alcohol intake and smoking can aggravate the disease.
- Obesity and decreased physical activity are well known aggravating factors for Psoriasis as well as other co-existing diseases with Psoriasis.

5. How does Psoriasis manifest? Which areas of body are affected by Psoriasis?

- Psoriasis presents as well demarcated, elevated, scaly, reddish, itchy skin lesions mainly on outer aspects of upper & lower limbs, palms & soles and scalp.
- Trauma prone area of the bodies are commonly affected.
- Psoriasis may involve any site of the skin. Patients may have a single lesion or involvement of the whole body. Occasionally, patients may develop pus filled lesions.
- Nails are commonly involved in the form of small pits or abnormalities or total destruction of nail plates.
- Few patients may have joint involvement in the form of pain and swelling. Joints of hands are commonly involved.



6. What should one do if he/she gets Psoriasis?

- If one gets Psoriasis he/she must consult a dermatologist.
- Don't self- medicate or take treatments from untrained physicians.
- Improper or wrong treatments may make Psoriasis unstable.

7. Are there any tests to confirm Psoriasis?

- A dermatologist can easily confirm the diagnosis based on the appearance of skin lesions. No laboratory tests are usually needed for diagnosis.
- A skin biopsy or a small sample of the skin tissue may be needed to confirm the diagnosis in doubtful cases.
- Blood tests may be recommended to check out for co-existing diseases or when systemic medications are indicated.

8. Which diseases can be associated with Psoriasis?

- Psoriasis is associated with other diseases such as diabetes, hypertension, coronary artery disease and obesity.

9. How can Psoriasis be treated?

- Psoriasis can be treated by topical medicines, phototherapy and/or systemic drugs depending upon the severity of the disease.
- Regular use of moisturizers and managing the aggravating factors play an important role.
- Topical moisturizers, steroids, keratolytic agents, vitamin D analogues and immunomodulators are the chief treatment options in limited diseases. Tar based, ketoconazole and keratolytic based shampoos are helpful in scalp involvement.
- Phototherapy with PUVA, narrow band UVB or targeted therapies with excimer light or phototherapy are effective options.
- Systemic drugs such as methotrexate, acitretin, cyclosporin are recommended in severe cases and extensive disease.
- Biological agents such as etanercept, infliximab, adalimumab and secukinumab can be used in cases which are unresponsive or difficult to treat.
- All medications should be taken under the supervision of a dermatologist and proper follow up with maintenance treatment is mandatory.