Getting beyond the surface of psoriasis

Posted by Pranav Sheth, University of Cincinnati August 20, 2008 09:49AM

Categories: Impact, Netwellness

Q. My husband was recently diagnosed with psoriasis. After talking to the doctor, I am still not exactly sure what it is. Would you be able to explain? The doctor also said there isn’t a cure. What are our options?

A. Psoriasis (pronounced sore-EYE-ah-sis) is a chronic immune skin condition that occurs both in men and women and in most races. It can occur at any age. Onset of psoriasis often occurs later in childhood or in young adulthood. It is believed to have a genetic basis; however, one does not have to have a family member with it to get it themselves.

Symptoms of psoriasis

Although it can present in various ways in the skin, the most common presentation (plaque psoriasis) is one of red thick scaling raised plaques on the elbows, knees, buttock and scalp. Other ways it can show up is as excessive dandruff, pus bumps on the skin surface, nail disease or full body redness.

It can occur anywhere on the body, including the scalp, face, torso, arms, legs, hands, feet, nails, buttock and genital areas, and can present as either a few plaques or can be scattered all over and involve large surfaces areas of the body. It may be asymptomatic, or may itch, burn, bleed (usually from scratching) or crack open.

Is it contagious?

Psoriasis is not contagious and cannot be spread to anyone by touch or other forms of contact. Because of its genetic nature, it can be passed down to a person’s social, mental or physical quality of life. Fortunately, the majority of patients have mild or limited involvement. About 20 to 30 percent may have moderate or severe involvement.

Is there a cure?

There is no cure for psoriasis. In most patients, it is chronic and persistent unless treated. At times, it may come and go without treatment, or sometimes can clear for years, but certain triggers can bring it back or make it worse. Some aggravating factors include stress, illness, poor diet, sleep, life style, infection (such as strep throat), and some medications. Like other chronic conditions such as diabetes, high blood pressure and heart disease, it needs chronic or intermittent chronic therapy to keep it suppressed. The sun, beach, certain climates, healthy lifestyles, bath soaks and moisturizers are some things that can reduce it.

Treatments

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This week's NetWellness column is written by Dr. Pranav Sheth, director of the Pсорiasis Clinic at the University of Cincinnati College of Medicine.

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There are four major forms of treatment a doctor can prescribe:

- Topical therapies.
- UV light (phototherapy or laser).
- Oral therapy.
- Injectable biologic therapies.

The therapies prescribed will depend on the severity of the psoriasis, the distribution on the body, convenience factors, other medical factors, insurance coverage, patient preference and experience of the physician. Mild psoriasis is often managed by primary care physicians or general dermatologists.

Optimal treatment of moderate to severe psoriasis requires the attention of physicians, preferably board certified dermatologists, experienced in all of the above options to best help manage this potentially life-long condition.

It is important to realize that not all therapies work for every patient and one may have to go through trials of different therapies before finding one that is effective, safe, and tolerable for the situation.

**Living with psoriasis**

Psoriasis is a very manageable and treatable skin condition. The more informed the patient and family are, the more productive will be encounter with the physician. In the long run, treatment satisfaction will come from being realistic, being informed, and working as a team with the doctor in finding the right treatments for the situation.