Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/dermconsult/sleep-psoriasis-management/56532/

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The Role of Sleep in Psoriasis Management

Announcer:
Welcome to *DermConsult* on ReachMD. Today, we'll hear from Dr. Tina Bhutani, who's a board-certified dermatologist at Synergy Dermatology in San Francisco, a fellow of the American Academy of Dermatology, and an Associate Clinical Professor at USF Dermatology. She'll be discussing the link between psoriasis and sleep health. Here she is now.

Dr. Bhutani:
The relationship between psoriasis and sleep… I don't think we talked about this a lot in the past, but we're learning that there are some really large associations there.

So first of all, psoriasis—tending to be an itchy, uncomfortable disease—is sometimes waking people up in the middle of the night. That's when itch tends to be the most prominent, in the middle of the night. And so patients end up having very fragmented sleep due to the symptoms that are on their skin. And unfortunately, there's lots of studies to show that chronic sleep disturbance or chronic fragmented sleep can lead to other problems down the line: cardiovascular disease, diabetes, patients tend to be more obese. And unfortunately, these are the same comorbidities that we see with psoriasis. So you already have a baseline increased risk of these diseases, then you add sleep disturbance into the mix, and now you're compounding that risk even more.

So, I really like to ask the question of patients of how they're sleeping at night. Or an even better question is, when you wake up in the morning, are you feeling well rested? Because they might not know they're waking up in the middle of the night, but if you ask them that question, that can help to lead you in the right direction.

The other thing we know about sleep and psoriasis is there is also a high prevalence of comorbid obstructive sleep apnea. So patients with psoriasis are more likely to have sleep apnea than patients without psoriasis. And if that's the case, we really want to try to flag that so that these patients can get sleep studies and they can get CPAP machines.

I ask about the symptoms of sleep apnea, and I try to teach patients what we call sleep hygiene, or aspects of sleep hygiene, which means things like not looking at screens right before bed, taking a little break before they go to bed, taking a break from screens and any kind of light sources, making sure that they're not doing other things in their bed. So if your brain gets trained to turn itself on when it gets in bed rather than turn itself off, that can be a problem. So no laptops, no work. Don't do anything else in your bed other than trying to sleep. Also, keep the room nice and cool, make sure that there are no lights or visible lights available. Blackout shades can be really helpful.

And then also just prioritizing sleep. So I tell people, sleep shouldn't be something that happens at the end of the day when everything else is done. We should stop doing what we're doing in order to get the adequate amount of sleep. And really, the American Academy of Sleep Medicine recommends, at minimum, at least seven hours of sleep per night. And then some people might need more. Some people need more like eight or nine hours. So definitely listen to your body when it comes to sleep health.

Announcer:
That was Dr. Tina Bhutani talking about the connection between psoriasis and sleep. To access this and other episodes in our series, visit *DermConsult* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!