



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/frontlines-psoriasis/looking-beyond-the-skin-the-far-reaching-impacts-of-psoriasis/32436/

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Looking Beyond the Skin: The Far-Reaching Impacts of Psoriasis

Announcer:

Welcome to *On the Frontlines of Psoriasis* on ReachMD. On this episode, we'll learn about the far-reaching impacts of psoriasis with Dr. Philip J. Mease. He's the Director of Rheumatology Research at Providence Swedish Medical Center in Seattle and a Clinical Professor at the University of Washington. Here's Dr. Mease now.

Dr. Mease:

When we think of a patient with psoriasis, we mainly think of their awful skin lesions and the embarrassment of that and the discomfort of having these terrible skin lesions on many parts of their body and the impact that that has on their embarrassment at work, as teenagers not wanting to go to the swimming pool because people think they had some kind of infectious disease, and so on. We also know that psoriasis is a multidimensional disease, and many people can have psoriatic arthritis. About a third of patients with psoriasis have a musculoskeletal arthritis condition—that is, inflammation of joints, tendon attachments, and even the spine—and this can be a double whammy where not only do they have this disfiguring disease but impaired function and a lot of pain.

I think the take-home message from this is that it's important for clinicians and especially dermatologists who are taking care of psoriasis patients to not just focus on the skin disease alone; don't just to walk in the room and look at the skin, make your judgment, and either stick with your current medicine or advise switching medicines. Take into account the whole person. What's going on with their quality of life, their work, their close and intimate relationships, and their ability to function in the world? And so asking broader questions about the impact of psoriasis. Also, ask a few questions about musculoskeletal aspects to determine whether or not psoriatic arthritis may be present. For example, if the patient has good response to a therapy for skin disease but not so good response for the psoriatic arthritis or quality of life, then you might need to consider switching to get a more comprehensive control of the disease process. So I exhort clinicians to take a little extra time to really determine what matters to the patient that they're working with.

Announcer:

That was Dr. Philip J. Mease talking about how psoriasis can impact a patient's quality of life. To access this and other episodes in our series, visit *On the Frontlines of Psoriasis* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!