

Transcript Details

This is a transcript of an educational program accessible on the ReachMD network. Details about the program and additional media formats for the program are accessible by visiting:

<https://reachmd.com/programs/psoriasis-whats-beneath-surface/comparing-the-aad-and-npf-psoriasis-guidelines/10509/>

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Comparing the AAD and NPF Psoriasis Guidelines

Announcer:

This is ReachMD, and you're listening to Psoriasis: What's Beneath the Surface, sponsored by Lilly.

On this episode, Comparing the AAD and NPF Psoriasis Guidelines, we will hear from Dr. Matthew Keller Associate Professor and Director of the Jefferson Psoriasis Center at Jefferson University.

Dr. Matthew Keller:

The AAD guidelines are quite a bit older than the National Psoriasis Foundation guidelines that were put out a little bit more recently, and, when we think about psoriasis, we sort of break the guidelines down. It's psoriasis and then patients that also have psoriatic arthritis along with skin disease.

So both, obviously, are going to recommend topical therapy first. That's pretty much always the mainstay of treatment. And within topical therapy we have both the nonsteroid medicines like the calcineurin inhibitors, coal tar and a few of the old but still really good therapeutic interventions, and then you also, obviously, have vitamin D, and then you also have topical steroids, which are obviously the largest mainstay of treatment, ranging anywhere from mild things like hydrocortisone all the way up to super potent topical steroids. And then beyond that, obviously, the AAD guidelines speak very specifically about the use of light therapy, phototherapy. And then once we get beyond that, there's a

divergence, I think, not only within the guidelines themselves to an extent, but also within dermatologists in general, but I think both guidelines push toward the use of biologics a little earlier on. But I think the AAD guidelines, being a little older, still speak a lot about the utilization of things like methotrexate and to an extent cyclosporin and some of the other therapies. And it's not that that's missing from the National Psoriasis Foundation guidelines, but I think being newer—also knowing that patient compliance, safety, side effects, lab tests, all of those things—we've learned a lot since the last real AAD guidelines that came out in 2010 when it was fully restructured about the safety of those biologic medicines. So I think there has been a large push towards attempting to use—for those patients with severe psoriasis—using biologics more first-line than going through step therapy with methotrexate and other things like that.

But I think these guidelines are meant to kind of encompass the majority of circumstances that an everyday practicing dermatologist will come across to give them guidance and also to help us work with the insurance company to obtain the appropriate therapy for a patient.

Announcer:

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