Points To Remember About Psoriasis

- Psoriasis is an autoimmune disease that causes red, scaly skin.
- It is caused by genes, meaning it runs in families, but some outside factors can make it worse or trigger flares.
- Psoriasis can be hard to diagnose because it can look like other skin diseases.
- Your doctor may recommend creams, ultraviolet light therapy, prescription medications, shots, or some combination of these treatments.
- You may have to try a couple of different treatments before finding one that helps you.
- Joining a support group helps some people with psoriasis cope with the disease.

Overview of Psoriasis

Psoriasis is a chronic autoimmune disease that causes skin cells to reproduce faster than normal. This causes patches of skin to become scaly and inflamed.

Psoriasis is chronic, meaning it is a long-lasting disease. Certain treatments can improve your skin and help prevent flares, however. Your skin can become resistant to treatments over time, so you may need to switch treatments periodically.

If you have psoriasis, you are more likely to get some other conditions, including:

- Psoriatic arthritis, a condition that causes joint pain and swelling.
- Cardiovascular problems, which affect the heart and blood circulation system.
- Obesity.
- High blood pressure.
- Diabetes.

Who Gets Psoriasis?

Anyone can get psoriasis, but it is more common in adults. Certain genes have been linked to the disease, so you are more likely to have psoriasis if one of your family members has it.
Types of Psoriasis

There are several different types of psoriasis. Here are a few examples:

- **Plaque psoriasis**, which causes patches of skin that are red at the base and covered by silvery scales.
- **Guttate psoriasis**, which causes small, drop-shaped lesions on your trunk, limbs and scalp. This type of psoriasis is most often triggered by upper respiratory infections, such as strep throat.
- **Pustular psoriasis**, which causes pus-filled blisters. Flares can be caused by medications, infections, stress, or certain chemicals.
- **Inverse psoriasis**, which causes smooth, red patches in folds of skin near the genitals, under the breasts or in the armpits. Rubbing and sweating can make this type of psoriasis worse.
- **Erythrodermic psoriasis**, which causes red and scaly skin over much of your body. This can be a reaction to a bad sunburn or taking certain medications, such as corticosteroids. It can also happen if you have a different type of psoriasis that is not well controlled. This type of psoriasis can be very serious, so if you have it, you should see a doctor immediately.

Symptoms of Psoriasis

Psoriasis usually causes patches of thick, red skin with silvery scales that itch or feel sore. These patches can show up anywhere on your body, but they usually occur on the elbows, knees, legs, scalp, lower back, face, palms, and soles of feet. They can also show up on your fingernails and toenails, genitals, and inside your mouth.

If you have psoriasis, you may find that there are times when your skin gets worse, called flares, and then gets better.

Causes of Psoriasis

Psoriasis is an autoimmune disease, which means that your body’s immune system starts overacting and causing problems. If you have psoriasis, a type of white blood cells called the T cells become so active that they trigger other immune system responses, including swelling and fast turnover of skin cells.
Your skin cells grow deep in the skin and rise slowly to the surface. This is called cell turnover, and it usually takes about a month. If you have psoriasis, though, cell turnover can take only a few days. Your skin cells rise too fast and pile up on the surface, causing your skin to look red and scaly.

Many people with psoriasis have a family history of the disease, and researchers have found some genes linked to psoriasis.

Some things that may cause a flare include:

- Infections.
- Stress.
- Changes in the weather that dry out your skin.
- Certain medicines.
- Trauma to the skin, such as cuts, scratches or sunburns.

**Diagnosis of Psoriasis**

Psoriasis can be difficult to diagnose, because it often looks like other skin diseases. Your doctor may take a small skin sample to examine under a microscope.

**Treatment of Psoriasis**

There are several different types of treatment for psoriasis. Your doctor will work with you to decide on the best treatment for you, taking into consideration the type of psoriasis you have, where it is on your body, which treatment helps the most, and the possible side effects of medications.

People respond differently to treatment, so you may have to try a few different types of treatment before finding one that helps you. Your skin can also become resistant to treatment over time, especially if you are using corticosteroids, so you may have to switch treatments after a while.

Your doctor may recommend that you try one of these or a combination of them:

- Topical treatment, using creams or ointments such as corticosteroids, vitamin D3, retinoids, coal tar, or anthralin.
- Light therapy, or phototherapy, which involves having a doctor shine an ultraviolet light on your skin or getting more sunlight. It’s important for a doctor to administer the therapy, since too much ultraviolet light can cause skin damage, increase your risk of skin cancer and make your symptoms worse.
• Systemic treatment, which can include taking prescription medicines or getting injections of medicine. These treatments can have serious side effects, so it’s important to talk with your doctor and keep your appointments to monitor your condition. Here are a few medicines used to treat psoriasis.
  ○ Retinoids are compounds with properties similar to vitamin A. They may help some people with severe psoriasis who do not respond to other treatments. They can also cause birth defects, however.
  ○ Cyclosporine, which suppresses the immune system to slow down cell turnover. It can also impair kidney function or cause high blood pressure, so patients should be monitored by a doctor.
  ○ Methotrexate also suppresses the immune system to slow down cell turnover. It can be taken as a pill or by injection. It can also cause liver damage and decrease the production of blood cells and platelets, so patients should be monitored by a doctor.
  ○ PDE4 Inhibitors. Taken orally, phosphodiesterase 4 (PDE4) inhibitors target molecules inside immune cells to suppress the rapid turnover of skin cells and inflammation.
  ○ Biologic-response modifiers are injections made from proteins produced by living cells. They suppress the immune system processes that cause the overproduction of skin cells and inflammation. Because they suppress the immune system, they increase the risk of infection and may interfere with patients taking vaccines. They have also been associated with some other diseases, so it’s important for a doctor to monitor patients taking biologics.

Who Treats Psoriasis?

Diagnosing and treating psoriasis is a team effort involving you and several types of health care professionals. These may include:

• Dermatologists, who treat skin problems.
• Internists, who specialize in the diagnosis and medical treatment of adults.

Living With Psoriasis

Psoriasis can cause significant discomfort and interfere with basic functions, including work and sleep. Medical care can be expensive. Also, the scaly patches of skin can make some people feel self-conscious about their appearance, which can lead to depression.

Treatment can help reduce the symptoms of psoriasis, however. Besides going to your doctor regularly, here are some things you can try to help manage your symptoms:

• Keeping your skin well moisturized. Some bath solutions and lubricants may help soothe your skin.
• Staying healthy overall.
• Joining support groups or counseling to help you realize you are not alone in dealing with psoriasis and to share ideas for coping with the disease.

Research Progress Related to Psoriasis

Researchers are continuing to study what causes psoriasis, treatments and other conditions associated with the disease.

• Some researchers are studying how skin cells form in healthy skin. Others are looking at what causes lesions in the skin. If we understand these mechanisms better, we may be able to develop better treatments.
• Genes play a role in determining who gets psoriasis, so researchers are trying to figure out which genes are associated with the disease and how it is inherited in families.
• Some researchers are looking at the nervous system to determine what causes pain and itching in psoriasis.
• Other researchers are looking for ways to calm down the immune system by blocking the activity of T cells or proteins that promote inflammation.
• Psoriasis patients may be at a greater risk of cardiovascular problems, and researchers are trying to figure out why.

For More Info

U.S. Food and Drug Administration
Toll free: 888-INFO-FDA (888-463-6332)
Website: https://www.fda.gov

For additional information on specific medications, visit Drugs@FDA at https://www.accessdata.fda.gov/scripts/cder/daf. Drugs@FDA is a searchable catalog of FDA-approved drug products.

Centers for Disease Control and Prevention, National Center for Health Statistics
Website: https://www.cdc.gov/nchs

American Academy of Dermatology
Website: http://www.aad.org
National Psoriasis Foundation
Website: http://www.psoriasis.org

If you need more information about available resources in your language or other languages, please visit our webpages below or contact the NIAMS Information Clearinghouse at NIAMSInfo@mail.nih.gov.

- Asian Language Health Information
- Spanish Language Health Information