

PSORIASIS
qa
&
BOOKLET



ABOUT
PSORIASIS

WHERE DOES THE WORD
“PSORIASIS” COME FROM?

WHAT CAUSES PSORIASIS?

IS PSORIASIS JUST A
SKIN CONDITION?

The word is derived from the Greek word “psora”, which means to itch.

The exact cause is unknown, but researchers agree that the immune system is mistakenly triggered, which causes inflammation and speeds up the growth of new skin cells and causes them to form in days versus weeks.

Not really. It’s a chronic immune disease that activates white blood cells, which causes inflammation and rapid skin cell growth. This produces excess skin cells, which pile up and form lesions.

WHAT PARTS OF THE BODY CAN
BE AFFECTED BY PSORIASIS?

WHAT ARE THE DIFFERENT
TYPES OF PSORIASIS AND
THEIR SYMPTOMS?

It can develop anywhere. The most common areas are the scalp, knees, elbows and torso; however, it may also appear on the nails, palms, soles, genitals, and very infrequently, on the face.

Plaque psoriasis:

Red, raised lesions of dead, flaky skin cells.

Guttate:

Small, red spots, usually found on the trunk, arms and legs.

Inverse:

Small, red lesions that may be smooth and shiny; found in skin folds.

Pustular:

White blisters surrounded by red areas.

Erythrodermic:

Widespread, fiery redness over large areas.



IS PSORIASIS LINKED
TO OTHER DISEASES?

IS PSORIASIS CONTAGIOUS?

ABOUT
PSORIASIS



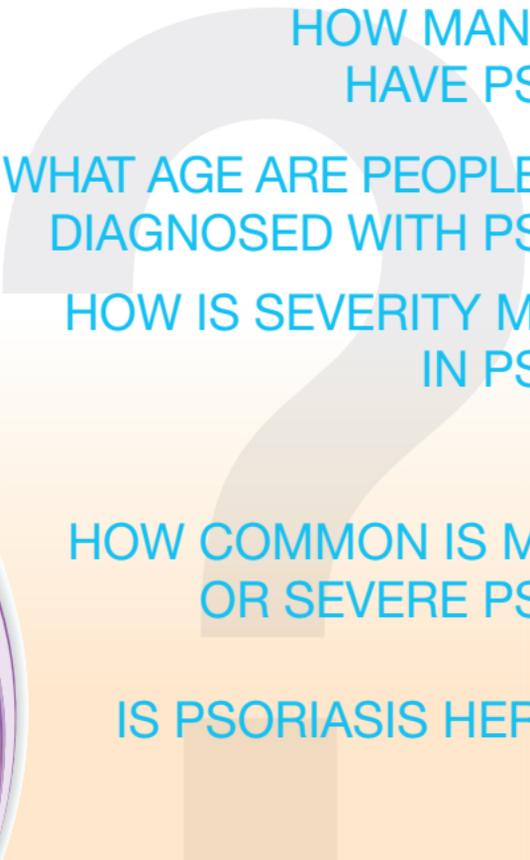
Yes. People with psoriasis are at an elevated risk of developing other chronic and serious health conditions related to inflammation, such as heart disease, inflammatory bowel disease, high blood pressure, and diabetes. Individuals with more severe cases of psoriasis have an increased incidence of psoriatic arthritis, cancer, depression, and obesity.

No, it's not.





PSORIASIS
BY THE
NUMBERS



HOW MANY PEOPLE
HAVE PSORIASIS?

AT WHAT AGE ARE PEOPLE USUALLY
DIAGNOSED WITH PSORIASIS?

HOW IS SEVERITY MEASURED
IN PSORIASIS?

HOW COMMON IS MODERATE
OR SEVERE PSORIASIS?

IS PSORIASIS HEREDITARY?



PSORIASIS BY THE NUMBERS

Nearly 1 million Canadians are affected by psoriasis.

Psoriasis often appears between the ages of 15 and 25, but it can develop at any age.

Psoriasis can be mild, moderate or severe. 3-10% of the body affected is considered to be moderate. More than 10% is considered severe. Talk to your doctor for more information.

About 25% of people with psoriasis have cases that are considered moderate, and about 10% have severe psoriasis.

There appears to be a link to a family history of psoriasis. About 1 out of 3 people with psoriasis report having a relative with the disease.



ABOUT
PSORIATIC
ARTHRITIS

WHAT IS PSORIATIC ARTHRITIS?

WHAT CAUSES
PSORIATIC ARTHRITIS?

WHAT ARE SOME SYMPTOMS
OF PSORIATIC ARTHRITIS?



ABOUT PSORIASIS ARTHRITIS

Psoriatic arthritis (PsA) is a form of arthritis that affects some people who have psoriasis. Most people develop psoriasis first; however, arthritis can sometimes develop before skin lesions appear. PsA causes joint pain and joint swelling.

The immune system plays an important role. PsA is linked to psoriasis of the skin; for most people, joint disease appears approximately 10 years after the onset of skin disease.

Tender swollen joints, back pain, morning stiffness, and general fatigue. Also look for nail changes – for example, a nail that separates from the nail bed and/or becomes pitted and mimics fungal infections. Ask your doctor for more information.

HOW MANY PSORIASIS PATIENTS
ALSO HAVE PSORIATIC ARTHRITIS?

I HAVE PSORIASIS IN THE
AREA OF AN OLD SCAR.
IS THIS COMMON?

PsA has been diagnosed in up to 30% of people who have psoriasis.

Yes. Psoriasis very often appears where the skin has previously been injured.



ABOUT
PSORIATIC
ARTHRITIS

IS THERE A CURE FOR PSORIASIS?

WHAT ARE THE TREATMENT
OPTIONS FOR PSORIASIS?

No, there is no cure for psoriasis, but there are a number of treatment options.

Treatment options are specific for each individual. Your health care professional will recommend a treatment based on the location and severity of your symptoms and the impact of the disease on your quality of life. There may also be other treatment considerations. The goal is to find a treatment that works the best for you with the fewest side effects. You can discuss treatment options, considerations and goals with your health care professional.

Some treatments target **localized disease** (less than 5% body surface involvement), while others target **widespread disease** (greater than 5% body surface involvement, and/or vulnerable areas such as the face, genitals, palms, soles, nails or scalp).

WHAT ARE DIFFERENT TYPES OF
TREATMENTS FOR PSORIASIS?



WHAT IF I AM NOT SATISFIED
WITH MY TREATMENT?

- **Topical** (applied to the skin)
 - Mild to moderate psoriasis
- **Phototherapy** (skin exposed to light, usually ultraviolet)
 - Moderate to severe psoriasis
- **Systemic** (taken orally, by injection or infusion)
 - Moderate to severe psoriasis

Finding the treatment that will give you the most relief from your psoriasis may take time. No single treatment works for everyone and it is not unusual to try several approaches before finding the one that is right for you. It is important to discuss with your doctor your different treatment options.

HOW WILL MY DOCTOR ASSESS
WHETHER OR NOT MY TREATMENT
IS WORKING FOR ME?

CAN STRESS TRIGGER A
PSORIASIS FLARE-UP?

WILL EATING OR AVOIDING CERTAIN
FOODS HELP MY PSORIASIS?

WHAT TYPE OF MATERIAL IS BEST
FOR PEOPLE WITH PSORIASIS TO
WEAR NEXT TO THEIR SKIN?

Your doctor will use the Psoriasis Area and Severity Index (PASI) and the Dermatology Life Quality Index (DLQI) to determine how well your psoriasis responds to the treatment.

Stress can cause psoriasis to flare up for the first time, or aggravate existing psoriasis, so try and find ways to reduce stress.

No. There is no universal diet that has been shown to make psoriasis predictably better or worse.

Cotton is less likely than other fabrics to irritate the skin or cause overheating.

WHO CAN I TALK TO ABOUT
MY PSORIASIS?

IS PSORIASIS NATIONALLY
RECOGNIZED?

ARE THERE SUPPORT
GROUPS FOR PEOPLE
WITH PSORIASIS?



PSORIASIS
TREATMENT &
SUPPORT

You can talk to a dermatologist, a doctor who specializes in skin diseases. To consult a dermatologist, you must ask your family doctor or a general practitioner for a reference.

Yes, it is!
October is Psoriasis Awareness Month.

Of course! There are two national associations for people with psoriasis: the Canadian Psoriasis Network and the Canadian Association of Psoriasis Patients. To find out more, visit their Websites at www.CanadianPsoriasisNetwork.com and www.canadianpsoriasis.ca.



TOPICS TO DISCUSS WITH YOUR DOCTOR

- How has your psoriasis changed since the last doctor visit?
- How often does psoriasis affect what you choose to wear?
- How often do you treat your psoriasis?
- On a daily basis, how much time does your psoriasis condition impact your daily routine?
- How often do you feel embarrassed because of your psoriasis?

PSORIASIS
TREATMENT &
SUPPORT

PSORIASIS RESOURCES

Helpful Canadian Websites

Canadian Psoriasis Network
www.CanadianPsoriasisNetwork.com

Canadian Association of Psoriasis Patients
www.canadianpsoriasis.ca

Canadian Skin Patient Alliance
www.skinpatientalliance.ca

Alliance québécoise du psoriasis (French only)
www.psoriasisquebec.org

Canadian Dermatology Association
www.dermatology.ca/skin-hair-nails/skin/psoriasis

Helpful International Websites

National Psoriasis Foundation
www.psoriasis.org

MedicineNet.com
www.medicinenet.com/psoriasis/article.htm

Mayo Clinic
www.mayoclinic.com/health/psoriasis/DS00193

MedlinePlus
www.nlm.nih.gov/medlineplus/psoriasis.html



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