How common is psoriasis?
Psoriasis is a skin condition that changes the appearance of some areas of skin. If you have psoriasis, much can be done to help you manage your condition. Psoriasis affects about half a million Australians (2-3% of the population). Men and women are equally affected.

Psoriasis is often first recognised between the ages of 15-30 years and 50-60, but can occur at any age. It is a long-term (chronic) condition requiring ongoing care.

What causes psoriasis?

The immune system
Psoriasis is an inflammatory reaction of the body's immune system that causes visible changes on the outside of the body. Key parts of the immune system are your bone marrow, lymph nodes, thymus and spleen that work together to defend against disease and infection.

In psoriasis, unusual functioning of the immune system makes skin to grow and shed faster than normal. This leads to red, raised, scaly and sometimes crusty skin in affected areas.

Normal skin renewes itself every 21-28 days, but with psoriasis this process takes approximately 4 days. The left side of the next illustration shows that skin has many layers. The bottom layer produces new skin that rises up through the other layers, until it reaches the surface. As old skin cells die and shed, new skin cells replace them.

What does plaque psoriasis look like?
Psoriasis can be mild, moderate or severe and may look different from one person to the next. Some people have only a few plaques, while others have many covering most of their bodies.

Of people with psoriasis approximately:
• 27% experience a mild condition and symptoms including itchiness and dry skin.
• 65% experience a moderate condition
• a minority experience a severe form.

Plaques vary in size and appear as thick, red, dry areas of skin with clear borders often covered in a silvery-grey scale.

Triggers include:
• some infections
• some medications
• withdrawal from systemic corticosteroids
• physical trauma and
• stress.

Other factors thought to worsen psoriasis include excessive alcohol consumption and smoking.
Where do psoriasis plaques develop?
Plaque psoriasis can occur on almost any part of the body. The diagram below outlines how likely it is for different parts of your body to be affected.

Darker areas are more often affected by plaque psoriasis than lighter areas.
Adapted from Van Voorhees et al. 2009

How is psoriasis treated?
A range of treatment options are available to reduce the symptoms of psoriasis. Treatment can include medicines, phototherapy (ultraviolet light), lifestyle assessment and nutrition. Consideration should also be given to other ailments and psychological needs (because psoriasis is more than a skin condition).

Most people with mild to moderate plaque psoriasis can be well managed by a General Practitioner (GP). However, some people need to see a dermatologist as well.

You need a prescription for some treatments and others you can buy without one. Not every medicine will be suitable for every patient. Your doctor will talk to you about the best options for your needs.

Every treatment can produce side effects but that doesn’t mean every person will experience these side effects.

Topical treatments
Topical treatments (gels, creams, lotions, foams and ointments) are generally used to manage mild to moderate psoriasis.

- **Corticosteroids** have anti-inflammatory properties relieving redness, swelling, itching and irritation of the skin. They are available in different strengths. Corticosteroids are not the same as steroids used to build muscles.

- **Vitamin D derivatives** – Vitamin D derivatives are similar to Vitamin D and work in psoriasis by slowing the skin’s rapid growth rate. These Vitamin D derivatives are different to the Vitamin D you may take as a supplement for Vitamin D deficiency which can occur when the body does not get sufficient exposure to sunlight.

- **Vitamin D derivative and a corticosteroid** – Two medicines described previously that are combined into one single ointment or lipid gel that work together to provide two different types of actions.

- **Vitamin A derivatives (retinoids)** – Vitamin A derivatives or retinoids are also thought to slow down the rate of skin growth. Pregnant or breastfeeding women and those wanting to become pregnant should not use Vitamin A derivatives.

- **Tars.** Formulations of coal tar have been used for many years and are available in various products, however it is not clearly understood exactly how the tar works and what ingredients in the tar are most important.

- **Salicylic acid** is used as an ingredient in some treatments to temporarily reduce the scaly appearance of the skin. By removing the outer scale with this ingredient it may make it easier for other treatments to penetrate into the skin.

- **Tar with salicylic acid** – a combination of tar and salicylic acid in one therapy.

- **Other topical treatments** are also available, including some that are limited to use in a doctor’s surgery.

Phototherapy requires specialised medical equipment to administer carefully measured doses of ultraviolet B (UVB) light.

Physical impacts
For some people the physical appearance of the skin is the worst aspect of having psoriasis, but for others itching is the most common complaint. Both of these can lead to physical symptoms of pain and irritation and can also cause significant stress, anxiety, depression and other psychological concerns.

Psoriasis can affect day-to-day activities of people. The degree to which psoriasis affects an individual’s feelings is not always related to how severe the disease is – the impact varies between people and circumstances.

Some other diseases – diabetes, high blood pressure and high cholesterol – are more likely to occur in people with psoriasis. Having psoriasis does not mean you will definitely get another disease, but tell your doctor if anyone in your family has any of these conditions.

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Psoriasis is not something to be ashamed of. The impact psoriasis has on appearance and socialisation affects men and women equally and is almost always more than just skin deep. You might sometimes be embarrassed or lack confidence and avoid wearing clothing you would otherwise like to wear. People manage these aspects of their condition in different ways.

Speaking with a psychologist can help so have a chat to your doctor if you feel you would benefit from talking to someone. See ‘Where to find help’ later in this leaflet for other sources of help and information.

You may prefer not to talk about your condition, if so, learning about psoriasis can still help you later if you decide to discuss it. Acquaintances, colleagues and friends may be more understanding and empathetic than you might think.

Handy hints
As time passes, you’ll discover what can help and what to avoid, but here are some hints to get you started.
- Avoid triggers such as drugs, alcohol, smoking and any foods you notice cause flare ups.
- Minimise stress – you might like to try yoga, meditation or other relaxation exercises to reduce stress.
- Follow instructions given by your doctor and pharmacist about how and when to use medicines.
- Moisturise – moisturiser is needed so your skin does not dry out, especially in cooler months.
- A little sunshine can help. A little can help and too much can burn the skin and cause psoriasis to flare up, so be careful.
- Be sun smart – don’t forget to ‘slip-slop-slap’ and limit time in the sun. It’s best to avoid the hottest part of the day between 10am and 3pm.
- Take short, warm showers – long, hot showers may dry your skin.
- Avoid colds and flu – infections can exacerbate psoriasis. Wash your hands regularly.
- Keep active and exercise.
- Find shampoos and beauty products that suit you – ask your doctor or pharmacist to recommend medicated and non-medicated options.
- Use the hairdryer on low – keep temperature low and keep it at least 30cm from your head.
- Tell your hairdresser about your psoriasis so they will more gently wash and style your hair.

Where to find help
An understanding doctor
Find a doctor who is supportive and understanding of the physical and emotional impacts of psoriasis. Don’t be embarrassed to talk about your concerns, ask questions and mention any new symptoms. Some other diseases are genetically related to psoriasis and your doctor will want to know about anything you notice so they can address your needs or concerns.

Psoriasis Australia
Psoriasis Australia is a not-for-profit organisation that provides information and support. It can be comforting to talk to people who have similar experiences. You can connect with others who have psoriasis by getting in touch with a local Psoriasis Australia support group.

Psoriasis Australia strives to assist people with psoriasis, or those wanting to know about psoriasis, by providing beneficial information and support enabling educated decisions to be made on treatment choices and lifestyle changes.

www.facebook.com/pages/Psoriasis-Australia
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References: