

ADCOCK INGRAM

PSORIASIS – Q&A DOCUMENT

What is psoriasis?

- Psoriasis is a common skin disease affecting 1 in 50 people.^{1a} It occurs equally in men and women and can appear at any age.^{1a} Psoriasis is a long-term condition which may come and go throughout your lifetime.^{1a}
- It is not infectious, and you cannot catch psoriasis from someone else.^{1a}
- Although psoriasis is a long-term condition there are many effective treatments available to keep it under good control.^{1a}
- Psoriasis can affect the nails and the joints as well as the skin.^{1a} Psoriatic arthritis produces swelling and stiffness in the joints or stiffness in the lower back and should be managed by a rheumatologist who works closely with your dermatologist and your GP.^{1a}
- Moderate to severe psoriasis is associated with an increased risk of anxiety, depression, and harmful use of alcohol.^{1a}
- Moderate to severe psoriasis increases the risk of heart disease and stroke and treatment of psoriasis may reduce this risk.^{1a}
- Psoriasis can also be associated with diabetes, obesity, venous thromboembolism, high cholesterol, and high blood pressure.^{1a} Psoriasis is also associated with inflammatory bowel disease and there is a small increased risk of skin cancer.^{1a}
- Psoriasis is hereditary and if you have a family member affected by it you are more likely to suffer from psoriasis.^{1b}

What are the symptoms of psoriasis?

- Psoriasis can be itchy and painful.^{1c} The scalp, lower legs and groin can be particularly itchy.^{1c} If psoriasis affects the hands and feet, painful fissures (cracks) can develop and these can affect use of the hands and walking.^{1c}
- Severe psoriasis on the body can also develop cracks which are painful and can bleed.^{1c}
- Psoriasis can affect the nails and lifting away of the nail from the finger can be painful.^{1c}

What are the psychosocial effects of psoriasis?

- Psoriasis can affect every facet of health-related issues, including a person's physical, psychological, social, sexual, and occupational well-being.^{2a} Generally, it has a greater impact on patients' psychosocial status than on their physical activities.^{2a}
- It is important to understand that psoriasis and other skin diseases are not merely 'cosmetic annoyances'.^{2a}
- The unsightly lesions and bleeding are a cause of embarrassment, shame, and reduced self-esteem, so patients might avoid going out and exclude themselves from social gatherings.^{3c}
- Psoriasis is commonly associated with depression, and there is a lot of ignorance and misinformation about the disease, causing patients to feel isolated, excluded, and stigmatised.^{3c} They may stay home from school and work as a result.^{3c}

How can psoriasis be treated?

- Treatment applied to the surface of your skin (topical treatment) is sufficient in most patients.^{1d} For people with more extensive or difficult to treat psoriasis, other forms of treatment and medication may be required.^{1d}
- A dual-combination, topical treatment with betamethasone and calcipotriol has been proven to be effective for scalp and body psoriasis.^{3d+e}

What are the benefits of dual-combination topical treatment with betamethasone and calcipotriol?

- Available for use on the skin and scalp, they are applied once daily.^{3d}
- Because it has distinct mechanisms of action, combining these two agents enhances the therapeutic efficacy.^{3d} This means the combination treatment is more effective than either ingredient alone.^{3d+e}
- The scalp preparation is a gel formulation, which is easier and more convenient to apply than a cream or an ointment.^{3d}
- Rapid and consistent effectiveness is associated with improved quality of life.^{3d}
- A 52-week study showed that with long-term treatment, the dual-compound product was well tolerated, with a lower incidence of adverse effects than calcipotriol monotherapy.^{3d}

How does lifestyle affect psoriasis?

- Adopting a healthy lifestyle can help.^{1e} a Healthy lifestyle means to eat a balanced diet, try to lose weight if you are overweight and exercise regularly.^{1e}
- Stop smoking.^{1e}
- If you drink excessive alcohol, reducing your intake might be helpful
- Reduce stress, where possible.^{1e}
- Take your medications as recommended by your General Practitioner (GP) or Dermatologist.^{1e}

Don't let psoriasis get you down. Ask your GP or Dermatologist about the dual-combination, topical gel or ointment from Adcock Ingram for treating scalp and body psoriasis from **#TopToToe**

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References

1. British Association of Dermatologists - Patient Information Leaflets (PILs). Psoriasis - An Overview. [29 Jun 2020]. Available from: www.bad.org.uk/for-the-public/patient-information-leaflets/psoriasis---anoverview/?showmore=1&returnlink=https%3a%2f%2fwww.bad.org.uk%2fpatient-information-leaflets#
2. van de Kerkhof PC. The impact of a two-compound product containing calcipotriol and betamethasone dipropionate (Daivobet/ Dovobet) on the quality of life in patients with psoriasis vulgaris: a randomized controlled trial. *Br J Dermatol.* 2004;151(3):663-668. doi:10.1111/j.1365-2133.2004.06134.x
3. 2. DeNovo Medica. Issues and Answers. Topical therapy for psoriasis. 2019;Apr:1-2.

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