

NAIL DISORDERS

CLINICAL AND SEROLOGICAL CHARACTERISTICS OF NAIL PSORIASIS IN INDIAN PATIENTS: A CROSS-SECTIONAL STUDY

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Background: Nail involvement in psoriasis is common with a lifetime incidence of 80-90%. It may reflect severity of cutaneous involvement and predict joint disease. Yet it remains, poorly studied especially in Indian psoriatics.

Objective: This study was undertaken to evaluate clinical and serological profile of nail involvement in psoriasis and to assess quality of life impairment associated with it in Indian patients.

Materials and Methods: Patients with nail psoriasis were assessed for severity of cutaneous disease (PASI score) and nail disease (NAPSI score). The impairment in quality of life attributable to nail disease was scored with NPQ10 score. All patients were assessed for joint disease, and tested for inflammatory and serological markers including erythrocyte sedimentation rate, C-reactive protein, rheumatoid factor and anti-cyclic citrullinated peptide antibodies.

Results: In study cohort (n=38) 9 had concomitant psoriatic arthritis. The mean PASI was 14.4 ± 9.6 (range = 0.4-34). Most commonly recorded psoriatic nail changes were pitting (97.4%), onycholysis (94.7%) and subungual hyperkeratosis (89.5%). The mean NAPSI was 83.2 ± 40.1 (range 5-156) and mean NPQ10 score was 1.1 ± 0.4 . ESR and CRP were raised in 57.9% and 39.5% patients, respectively; rheumatoid factor was positive in 5/38 (13.2%) and anti-CCP antibody was raised in 4/38 (10.5%) patients.

Limitations: Small sample size and lack of a control group.

Conclusions: In Indian patients with nail psoriasis, severity of nail involvement was poorly correlated with that of cutaneous disease. Impact of nail disease on patient's quality of life was found to be minimal, suggesting need for a quality of life questionnaire suited to the Indian population. Serological markers were overall raised, more so in patients with concomitant arthritis.