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PSORIASIS

DEVELOPMENT OF THE 'PSO SLEEPY-Q' AND THE 'PSA SLEEPY-Q': TWO QUESTIONNAIRES TO CHARACTERIZE SLEEP IN PATIENTS WITH PSORIATIC DISEASE

L Perez-chada⁽¹⁾ - E Klerman⁽²⁾ - J Li⁽³⁾ - D Perez-chada⁽⁴⁾ - A Gottlieb⁽⁵⁾ - J Merola⁽³⁾

Department Of Dermatology, Brigham And Women's Hospital, Harvard Medical School, Boston, United States⁽¹⁾ - Department Of Medicine And Neurology, Division Of Sleep And Circadian Disorders, Brigham And Women's Hospital, Harvard Medical School, Boston, United States⁽²⁾ - Department Of Dermatology, Brigham And Women's Hospital, Harvard Medical School, Boston, United States⁽³⁾ - Department Of Medicine, Division Of Pulmonology, Austral University Hospital, Pilar-buenos Aires, Argentina⁽⁴⁾ - Department Of Dermatology, New York Medical College At Metropolitan Hospital, New York, United States⁽⁵⁾

Background: Substantial evidence suggests that psoriasis (PsO) and psoriatic arthritis (PsA) are related to sleep disturbances. Validated, disease-specific instruments are needed to understand these complex relationships and, ultimately, improve quality of care of our patients.

Objective: To develop and establish the content validity of two patient-derived, patient-reported sleep outcome measures for psoriatic disease: the 'PsO Sleepy-Q' and 'PsA Sleepy-Q'.

Materials and Methods: A literature review and semi-structured interviews with patients were conducted to elicit sleep domains. Patients, dermatologists, rheumatologists and sleep experts rated these domains in order of importance. Preliminary versions of the instruments were drafted based on the ratings. Finally, we conducted cognitive debriefing interviews with patients.

Results: Sixteen patients with psoriasis and 14 patients with PsA participated in the interviews (mean age 50.8, 50% were female). The rating exercise was completed by 22 patients with psoriasis, 20 patients with PsA and 45 international physicians. Sleep maintenance, adequacy, quantity and quality were the most affected sleep features. Itch, skin and joint pain, stiffness, taking care of psoriatic lesions before bedtime, worsening of psoriatic symptoms at night, feeling uncomfortable in bed due to PsA and sleep apnea were the most significant causes of sleep disturbance. Finally, patients referred that disturbed sleep may increase psoriatic symptoms as well as fatigue, cognitive impairment and









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psychological stress. Based on these findings, 18 and 24 items were generated for the 'PsO Sleepy-Q' and the 'PsA Sleepy-Q', respectively. Items were refined during cognitive interviews with 20 patients to ensure they were comprehensive and relevant.

Conclusions: This study establishes the content validity of the 'PsA Sleepy-Q' and 'PsO Sleepy-Q'. These instruments may help clinicians improve the quality of sleep of their patients as well as they may serve as an end-point in clinical trials. Next steps involve psychometric testing to define their validity, reliability and responsiveness.



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