



PSORIASIS

TEN-YEAR EXPERIENCE IN MANAGEMENT OF PSORIASIS INPATIENTS IN A TERTIARY HOSPITAL IN CHINA

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Introduction: The management of psoriasis varies between countries.

Objective: To summarize the experience of management of psoriasis inpatients in China.

Patients and Methods: The medical records of all psoriasis inpatients from June 2007 to April 2018 in Peking University Third Hospital were reviewed.

Results: A total of 251 patients had 492 admissions. Males accounted for 68.1%. 13.5% of patients were complicated with metabolic syndrome, of which 10.4% was first detected after hospitalization. The median length of hospital stay was 9 days (1 day, 19 days). The median cost was ¥6802.97 (¥4329.92, ¥13820.26). Since the use of biologics in 2015, the length of hospital stay had been significantly shortened, but the cost of hospitalization had increased significantly. Fever occurred in 10.2% of admissions. IgE elevation was found 47.6% admissions, IgE level correlated significantly with ESR and CRP. The median IgE level was significantly higher in erythroderma type than non-erythroderma type, and in arthritis type than non-arthritis type. The most commonly used non-biologic systemic treatments were oxymatrine glucose injection (58.2%) and salvia miltiorrhiza injection (33.1%). Acitretin, methotrexate and cyclosporine were used in 33.1%, 4.2% and 2.1% admissions. The most commonly used biologics were infliximab (38.8%).

Conclusions: Biologics significantly changed inpatient hospital service pattern of psoriasis in the past decade. The relationship between psoriasis and metabolic syndrome was still unrecognized. IgE plays a role in the pathogenesis of psoriasis, especially erythroderma type and arthritis type.

