

PSORIASIS

THE IMPACT OF DIFFERENT SEVERITY DEFINITIONS FOR PSORIASIS IN REAL-WORLD HEALTHCARE

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Introduction: Assessment of disease severity is an essential component of psoriasis management. Moderate-to-severe disease qualifies for systemic treatment. Measurement of psoriasis severity is generally based on the Psoriasis Area and Severity Index (PASI) and Dermatology Life Quality Index (DLQI). However, the definitions for severe psoriasis differ markedly.

Objective: To characterize patients with psoriasis in real-world care as patients with 'severe' or 'non-severe' disease according to PASI and DLQI, but related to different definitions.

Materials and Methods: Cross-sectional data of 3,274 patients (≥ 18 years old) with psoriasis from more than 200 dermatology offices and clinics across Germany were analyzed for disease severity based on PASI and DLQI. The proportions of patients with moderate-to-severe disease were determined accordingly. Patients with unknown status of systemic therapy were excluded from the analysis if this variable was necessary.

Results: Among the 3,274 patients (43.4% female, mean age 51.7), the mean disease duration was 21.4 years, 18.4% had psoriatic arthritis and 33.4% nail involvement. The proportion of patients meeting the European consensus criteria for moderate-to-severe psoriasis (PASI AND DLQI > 10) was 14.0%, although 45.3% achieved at least PASI OR DLQI > 10 . The consideration of all patients with systemic drugs as being 'moderate-to-severe' increased these proportions to 56.9% and 75.2%, respectively. If only PASI > 10



was used, the proportions of patients with moderate-to-severe disease were 35.3% and 69.3%, respectively.

Conclusions: The proportion of patients with psoriasis under dermatological care considered to have moderate-to-severe disease varies considerably according to how the latter is defined, leading to uncertainty and inequity of access to systemic therapy. We propose here an international standardization in order to guarantee a more reliable treatment and health planning.

