



PSORIASIS

TOPICAL 0.25% DESOXIMETASONE SPRAY FOR TREATMENT-RESISTANT PSORIASIS

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Introduction: High-potency topical corticosteroids are highly effective in the treatment for mild-to-moderate chronic plaque psoriasis. However, many patients report that topical corticosteroid is ineffective or that it only worked temporarily, losing effectiveness over time. The mechanism underlying the lack or loss of activity is not well-characterized but may be due to poor adherence to treatment.

Objective: To evaluate changes at an individual level to determine the frequency with which individual patients with plaque psoriasis supposedly “resistant” to topical treatment will respond to topical corticosteroid treatment.

Materials and Methods: Twelve psoriasis patients who report previous failure to topical corticosteroids were treated with topical 0.25% desoximetasone spray and randomized to either twice daily phone call reminders or no phone call and were treated for 2 weeks. Pruritus Visual Analog Scale (VAS), Psoriasis Area and Severity Index (PASI), Total Lesion Severity Score (TLSS), and, Investigator Global Assessment (IGA) assessed disease severity.

Results: All twelve subjects (100%) had an improvement in their itching; 10 of 12 (83%) had improved PASI, 9 of 12 (75%) improved TLSS, and 7 of 12 (58%) improved IGA. The percent reduction in itching ranged from 67-100% and 50-86% with and without the phone call reminders, respectively. PASI improvement ranged from 18-63% and 0-55 % with and without the phone calls, respectively. No subject showed a worse score for itching, PASI, TLSS, or IGA.

Conclusion: Achieving good adherence is a major challenge in the treatment in psoriasis patients. Patients often overstate their use of treatment; overestimating use of medication may explain why patients with disease “resistant” to topical treatment can respond to topical treatment. While phone calls may have some benefit, patients in the phone call intervention group had only mild greater improvement in their disease severity. Employing interventions to increase a patient’s adherence may help outcomes of treatment-resistant patients.

