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ŞCOALA DE STUDII DOCTORALE

Abstract of the doctoral thesis

Prevention and intervention in the psycho-dermatologic approach to psoriasis: the impact regarding prognosis and evolution

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Psoriasis is an inflammatory immune-mediated systemic condition, manifesting with multiple erythematous, scaly lesions. These manifestations can be controlled by means of topical or systemic therapeutic options, but psoriasis is a chronic disease, naturally evolving through remissions and flare-up stages.

A chronic diagnosis – in the patient's verbiage, incurable – generates a certain level of distress. This distress frequently serves as a trigger for new lesions or for the aggravation of existing lesions, closing a vicious circle in which the patient suffers discomfort and stigma due to psoriasis lesions, and in turn, psoriasis lesions worsen due to the systemic hormonal changes inherent to stress.

Medical practice has experienced, during recent times, a fundamental shift in paradigm: from paternalistic medicine, which aims to satisfy the doctor with regard to therapeutic progress, towards a patient-centered practice, in which medicine aims to improve the quality of life of the patient.

With this aim, we designed the projects included in the present doctoral thesis: improving the quality of life of patients with psoriasis cannot start without investigating the sources of distress and discomfort for these patients.

The main objective of the paper is the in-depth exploration of social integration, stigma and misinformation experienced by patients diagnosed with psoriasis. Thus, we investigated the socio-demographic differences, social interactions, correct information about the disease, coping mechanisms of patients with psoriasis, in relation to the distress and discrimination experienced in day to day life.

1st Study: The Implication of Misinformation and Stigma in Age-Related Quality of Life, Depression, and Coping Mechanisms of Adult Patients with Psoriasis

Stigma and lack of acceptance in society might have detrimental effects on the quality of life of patients with psoriasis, sometimes being comparable with other chronic diseases and conditions that affect the appearance of a patient, such as burns. Therefore, we surveyed our patients diagnosed with psoriasis to determine the implications of misinformation and stigma for their quality of life, depression, and coping strategies stratified by different age categories.

A cross-sectional study was designed for a sample size of a minimum of 45 patients considering a prevalence of psoriasis of 2–3% in the general population. The study participants (278 patients and 374 controls) were given both a paper-based unstandardized questionnaire and an online version of three standardized surveys. The cohort of patients was further split into three age groups to determine their age-related quality of life and coping mechanisms.

The proportion of patients with a history of depression and depressive symptoms among patients with psoriasis was significantly higher. Multiple discrepancies were observed between patients and controls regarding questions that targeted stigma and misinformation. On the Coping Orientation to Problems Experienced Inventory (COPE-60) questionnaire, older patients were more likely to use positive coping mechanisms such as engagement and problem-focused coping, while the young patients were using more emotion-focused coping mechanisms.

However, patients in the 30-50 age range group scored the highest on physical and mental health among all participants who filled the 12-Item Short Form Survey (SF-12) survey. The Dermatology Life Quality Index (DLQI) results showed significantly more patients answering "a lot and very much" concerning embarrassment and social activities, while sexual difficulties affected the older patients. The strongest correlations with depression were observed in the young patient group, who believed that psoriasis can cause skin cancer (rho = 0.418) and who had sexual difficulties (rho = 0.414) and embarrassment (rho = 0.359) as evaluated by the DLQI survey. In the 30- to 50-year-old group, the strongest correlations were with the feeling of being stigmatized (rho = 0.376), having sexual difficulties (rho = 0.367) and disengagement coping style (rho = 273).

While the respondents are reasonably well-informed regarding psoriasis, a degree of stigma remains, likely due to involuntary emotional responses such as repulsion and embarrassment. It is essential to establish initiatives aimed at educating the general public, raising awareness, and establishing a more tolerant social environment for psoriasis patients.

2nd Study: Single-plaque psoriasis: a single-clue diagnostic challenge

Psoriasis is a chronic, common immune inflammatory condition of the skin, affecting 2-3% of the population, with regional variability. Classically, psoriasis presents as one of the following types: plaque, guttate, inverse, pustular or erythrodermic psoriasis. Typically, the patient will present with several symmetric psoriatic plaques on typical areas of the body, leading the clinician towards the diagnosis of psoriasis.

The present case report series focuses on an atypical presentation of psoriasis noted in 2 patients who presented to our office with a single large, erythematous plaque located on the lower leg. Due to poor response to previous treatment, a biopsy was performed and upon analysis, revealed a diagnosis of psoriasis. The lesions showed significant improvement under local therapy.

In spite of significant research on such a common and seemingly well-understood dermatosis, the present case reports plead for further study with regards to atypical presentations of psoriasis.

3rd Study: Psoriasis-Related Stigma: Is There More to Uncover?

Psoriasis is a common, inflammatory immune-mediated dermatosis, occurring in patients of all ages, sexes, and races, associating significant comorbidities. One such comorbidity is represented by psychological disorders, which negatively influence the clinical course of the disease. The purpose of our study is to offer a first glimpse into the stigmatization of Romanian psoriasis patients, as well as their potential anxious or depressive manifestations.

The present study is based on an adapted questionnaire previously used to estimate stigmatizing attitudes in the general population, mirrored to reflect the patients' experience in social situations such as shaking hands, maintaining friendship, kissing, or intercourse. GAD7 and PHQ8 scales were used to screen for anxiety or depression traits in the same patients.

Our study group consisted of 12 psoriasis patients, with a mean age of 46.75 years. While few patients reported feeling discriminated against in social contexts, 16.66% presented with mild depressive symptoms recorded by PHQ8 and 24.99% presented mild anxiety manifestations according to their GAD7 scores.

In spite of the small sample group, our study outlines a tendency for depressive and anxious manifestations in patients with psoriasis.

General conclusions

In spite of the fact that psoriasis is a well-understood skin condition, atypical presentations pose a significant diagnostic challenge for the clinician. Biopsy followed by histopathological examination is essential to establish a correct diagnosis and avoid therapeutic failures.

The general population's level of information about psoriasis is satisfactory, but this knowledge does not directly and proportionally reduce the degree of stigma experienced by patients with psoriasis.

Even within a group of patients with minor forms of the disease, who do not report experiencing major social stigma, depressive or anxious manifestations are present in 16 and 25% of cases, respectively.

Originality of the thesis

This thesis provides an overview of the experience of patients diagnosed with psoriasis. These projects complement the pilot studies initiated by Boca et al and Nicolescu et al, which report the first findings related to the prevalence and social acceptance of psoriasis in Romania.

Distress, coping mechanisms and social stigmatization are common human experiences, reliant on objective factors, such as a skin lesion, and personal factors, namely an individual's predisposition to perceive the non-acceptance or reluctance of their peers.

The thesis brings forward data to complement the current knowledge base present in scientific literature: from atypical clinical cases to the detailed investigation of the stigmatization process and its effect on the mental state of patients diagnosed with psoriasis.