

## RESEARCH LETTERS

## The Impact of Psoriasis on the Quality of Life of Patients in San Antonio, TX

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### ABSTRACT

**Background:** Psoriasis impacts 2% of the world's population. The disease affects the quality of life of patients by causing pain and depression. Little information is available regarding the impact of psoriasis on San Antonio patients.

**Objective:** This project obtained information from patients about how they are coping with psoriasis, impact on their quality of life, barriers to care, and support systems they have.

**Methods:** An IRB approved six question survey was administered to 50 patients who attended the VA, a psoriasis support group, and Haven for Hope homeless clinic.

**Results:** 40% of patients who completed the survey had been living with psoriasis for less than 5 years. 75% of patients in this group claimed they were severely depressed. The disease impacted them most psychologically and their greatest barrier to care was access to medications that "cured" their psoriasis. 60% of the patients were living with psoriasis for more than 5 years, and 81% claimed they were not depressed at all. Psoriasis impacted them most financially and their greatest barrier was the cost of care.

**Conclusion:** Acutely, psoriasis patients are impacted psychologically and are frustrated with their disease. Over time, they learn to live with their condition and are impacted by the economic aspects of care.

*To the Editor:* Psoriasis impacts 2%<sup>1</sup> of the world's population, including both men and women. The disease significantly affects the quality of life of patients by causing loss of self-confidence, anxiety, anger, and depression.<sup>2</sup> It also results in occupational and sexual dysfunction and impairment of psychosocial factors. The chronicity of the disease, lack of control, and feeling of hopelessness all contribute to the negative

impact of the disease on patients.<sup>3</sup> There is very little information available regarding the impact of psoriasis on the lives of patients living in San Antonio, TX. Additionally, the effect of the disease on the homeless population in this community hasn't been studied.

In order to address this problem, an Institutional Review Board (IRB) approved,

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six-question survey was administered to 50 patients who attended the Veteran's Affairs (VA) Dermatology Clinic (surveyed over the phone), psoriasis support group (surveyed in person), and Haven for Hope homeless clinic (provides dermatologic services to the uninsured and underinsured (surveyed in person)). There was a 100% response rate. The survey questions assessed how long patients had been living with psoriasis, their mood, how significantly psoriasis has impacted their life, what barriers to care they faced, and what type of support systems are available. The age range of participants was 39-72. The median age of participants was 54 and the IQR was 22. Twenty-six male patients and twenty-four female patients participated.

Forty percent of patients who completed the survey reported a duration of disease less than 5 years. Of those, seventy-five percent claimed that they were severely depressed (Table 1). The disease impacted them the most psychologically and their greatest barrier to care was access to effective medications that "cured" their psoriasis. Sixty percent of patients who completed the survey reported a duration of disease between 5-10 years. Of those, eighty-three percent claimed they were not depressed at all. Psoriasis impacted them most financially with the greatest barrier being cost of care. Patients at the VA Dermatology Clinic were impacted the most psychologically by the disease, rated social stigma and access to social support as their greatest barriers to care, and mentioned that their family was their greatest source of support. There were significantly higher rates of moderate to severe depression in this group compared to the other populations ( $p < 0.05$ ). Patients at the Haven for Hope clinic were impacted the most physically and psychologically by the disease, rated the cost of care and transportation as their greatest barriers to

care, and the Dermatologist as their greatest source of support. Patients in the Psoriasis Support Group were impacted the most socially by the disease, rated knowledge about the disease as their greatest barrier to care, and mentioned that the support group was their greatest source of support (Table 2, Figure 1). Patients in the support group were happier overall. They significantly rated lower levels on the scale for the impact of the disease on their life ( $p < 0.03$ ).

Psoriasis has greatly impacted the quality of life of patients in San Antonio, TX. Based on the survey data collected, more patients with a shorter duration of psoriasis report severe depression. This may be because patients with recently diagnosed psoriasis are overwhelmed by their disease and do not yet know how to manage it. Providing emotional support early in the disease from a Dermatologist, family and friends, and local support groups may help patients better cope with their feelings. Additionally, the study demonstrated that individual population groups are affected in different ways by psoriasis. Patients at the VA report social barriers, Haven for Hope patients report economic barriers, and members of the support group report educational barriers. It is important to note the needs of these patient groups so that the most optimal care can be provided to them. Going forward, interventions to address these needs including promoting social acceptance in the community, providing financial assistance to the uninsured, and educating the public about psoriasis will help improve overall care.

Many studies have been completed in the past in other regions of the United States regarding the impact of psoriasis on the quality of life of patients. One notable study was conducted in 1998 by the National Psoriasis Foundation<sup>4</sup>. They reported that

79% of patients mentioned that the disease had a negative impact on their life. Particularly, the condition affected them emotionally and patients felt embarrassed when people viewed their psoriasis. They also stated that socially there were various misconceptions about the disease leading to social stigma. Another study was completed in 1997<sup>5</sup> to determine the economic impact of psoriasis and its association with psoriasis severity. They found that patients with more severe psoriasis have higher expenses. As a result, patients with severe psoriasis have a lower quality of life due to the financial implications associated with the disease.

A study was completed in 2002<sup>6</sup> that determined the health effects of psoriasis on patients. They found that psoriasis patients had a lower levels of self-confidence and experienced difficulties with social functioning compared to individuals without chronic disease. Additionally, a study was completed in 2004<sup>7</sup> that described certain characteristics that impact the quality of life of psoriasis patients. They found that patients with extensive skin involvement had a lower quality of life compared to other patients. Additionally, young patients and female patients had significant reductions in their quality of life. In 2015,<sup>8</sup> a study was completed to determine the impact of disease burden on the quality of life of psoriasis patients. They found that patients with severe psoriasis have lower levels of quality of life and overall health.

Although many years have passed since the studies described, it is interesting to see that patients are continuing to face similar issues with their condition. Psoriasis is a condition that affects patients on multiple levels- not just physically, but also emotionally, socially, and financially. Our study is unique because we were able to compare the impact of

psoriasis amongst various population groups- veteran patients, the homeless population, and psoriasis support group members. We were able to identify the barriers to care and sources of support associated with these groups. Additionally, we were able to determine that patients with a shorter duration of psoriasis have more severe forms of depression compared to patients with a longer duration of psoriasis. This finding has not been reported in other studies before and would be interesting to explore further. Previous studies have reported that more severe forms of psoriasis are correlated with lower levels of quality of life. Although our study did not stratify patients according to their level of psoriasis, this would be interesting to study in the future. The qualitative and quantitative data that we have collected will be important to keep in mind when caring for patients in San Antonio, TX but also in other communities in the country.

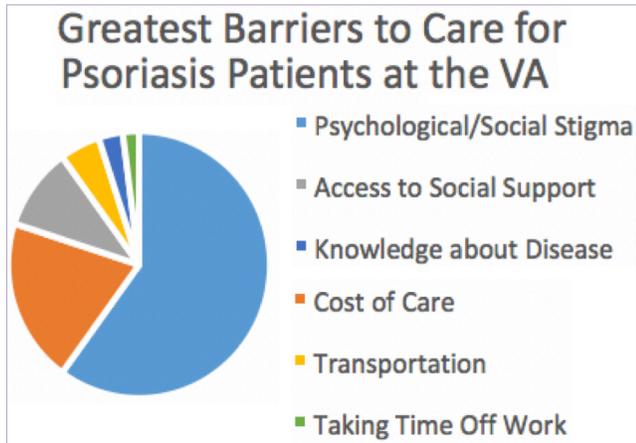
**Table 1.** The Effect of Psoriasis Duration on the Mood of Patients

Psoriasis Duration	Depression status			
	None (n=26)	Mild (n=3)	Moderate (n=4)	Severe (n=17)
<5 years	1	2	2	15
5-10 years	25	1	2	2

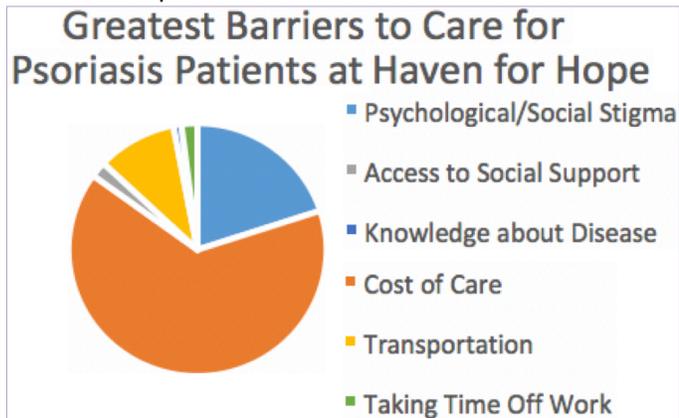
**Table 2.** The Impact of Psoriasis on Different Population Groups

	VA Dermatology Clinic	Haven for Hope Homeless Clinic	Psoriasis Support Group
<b>Greatest Impact</b>	Psychological	Physical and Psychological	Social stigma
<b>Barriers to Care</b>	Social stigma	Cost of care and transportation	Knowledge/ understanding of disease
<b>Sources of Support</b>	Family	Dermatologist	Support group

**Figure 1.** Barriers to Care for Psoriasis Patients at the VA



**Figure 2.** Barriers to Care for Psoriasis Patients at Haven for Hope Clinic



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