Psoriatic Arthritis

What is Psoriatic Arthritis?

Psoriatic arthritis is a chronic, immune-mediated disease that impacts the joints and skin. Typically affected areas include fingers, hip, pelvis, knees, ankles and toes. The burden of psoriatic arthritis on patients extends beyond joint pain and fatigue, and can lead to significant psychological distress.

Symptoms

Many patients with psoriatic arthritis experience disease flares, or periods of increased inflammation and disease activity. Symptoms vary, but may include:

- Joint pain
- Skin rashes or lesions
- Eye inflammation
- Stiffness
- Fatigue
- Swollen fingers or toes
- Tendon or ligament pain

Proactivity is crucial in managing symptoms – early recognition, diagnosis and treatment of psoriatic arthritis may help reduce pain and prevent long-term joint damage.

Prevalence

Psoriatic arthritis affects approximately 20% of patients diagnosed with psoriasis, increasing to about 25% for patients with moderate to severe psoriasis. Typical onset of psoriatic arthritis occurs 7–12 years after the initial presence of psoriasis.

Both men and women are affected equally, and diagnoses are usually made between the ages of 30 and 55.

Diagnosis & Treatment

Diagnosis of psoriatic arthritis is difficult, due to symptoms that mirror other immune-mediated diseases.

Typically, patients are referred to a rheumatologist, who might run tests such as:

- Physical exam
- X-ray
- Blood test

There are treatment options available that can help manage symptoms of psoriatic arthritis, including:

- Anti-inflammatory treatments
- Corticosteroids
- Topical treatments
- Disease-modifying antirheumatic drugs (DMARDs)
- Biologics

However, there remains an unmet need for additional treatment options that decrease the rate of flares and increase rates of remission.