

DIAGNOSING AND TREATING IIIRIA515 IN SKIN OF COLOR

Make sure you do not mistake signs of psoriasis in patients of color.

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ow often do you see psoriasis in skin of color? Do psoriasis patients of color get the same red patches that Caucasian patients do? Should patients of color undergo phototherapy? Seemal Desai, MD, secretary and treasurer of the Skin of Color Society, provided answers to these questions in a National Psoriasis Foundation webinar.

mon than it is in Caucasian patients, Dr Desai said.

According to a 2014 study in the Journal of the American Academy of Dermatology, prevalence of psoriasis among Caucasians in the United States is about 3.5%. But, Dr Desai said, according to the same study, prevalence in African Americans is almost 2%, and in ment you have prescribed, he recommends performing a skin biopsy to determine if what you are seeing is actually psoriasis.

3. THINK PURPLE, NOT RED.

Psoriasis in skin of color can look different than it does in Caucasian skin. For one thing, discoloration is likely to be more violaceous than red. On top of that, scaling is less prominent, and cutaneous involvement can be more widespread, Dr Desai said.

Familiarizing yourself with the distinct clinical features of psoriasis in skin of color can save time and resources, and lead to better health outcomes for your patients. "Proper diagnosis leads to proper treatment, and really, you've changed people's lives,"

Dr Desai said.

4. GET IN YOUR PATIENTS' HAIR.

Scalp psoriasis is common in patients of color, Dr Desai said. But treating it can be particularly tough. To make sure you come up with a treatment plan your patients will stick to, ask them about their hair.

For instance, said Dr Desai, daily washing with a medicated shampoo may not be a realistic option for African Americans. For those patients, a better treatment schedule might be washing once or twice a week. Make sure to ask about styling practices too, added Dr

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As a dermatologist in private practice in Plano, TX, Dr Desai often sees patients of color. With immigrant populations continuing to increase all over the country, most dermatologists will be able to say the same in the years to come, he said.

Distinct clinical features and treatment needs of psoriasis patients of color can make caring for this condition a challenge. Here are 5 tips from Dr Desai's webinar on diagnosing and treating psoriasis in skin of color.

1. DO NOT OVERLOOK PSORIASIS AS A POSSIBLE DIAGNOSIS.

Despite what you may think, psoriasis in people of color is no less comHispanics it is about 1.5%. "Psoriasis in darker skin types and in skin of color is out there, and it is being under-recognized." he said.

2. DO NOT MISTAKE THE SIGNS OF PSORIASIS FOR SOMETHING ELSE.

Lichen planus. Cutaneous lupus. Fungal infections. These are just some of the conditions that psoriasis in skin of color may be mistaken for, leading to frequent misdiagnosis.

Research shows that delaying proper diagnosis and treatment of psoriasis can lead to a worse prognosis long-term, said Dr Desai. If a patient is not improving on the treat-

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Desai. It may be necessary to advise your patients to stay away from chemical relaxers or other things that can lead to hair breakage.

5. KEEP IN MIND CULTURAL STIGMAS.

"There is social stigma associated with skin disease in skin of color patients," said Dr Desai. These stigmas may at times keep patients of color from seeking treatment for their psoriasis, he explained.

Some may feel embarrassed about their condition or may not want to get undressed for a thorough exam. "Be patient with the patient," Dr Desai advised. It may take 1 or 2 visits to establish rapport. Taking the time to show empathy with these patients will help build credibility and make it easier for you to deliver the best care possible.

NEED FOR MORE RESEARCH AND EDUCATION

One of the major challenges in effectively treating psoriasis in skin of color is the lack of research on how psoriasis impacts this patient population.

"What we know about skin of color in terms of psoriasis could fit on a page or 2. That's not the case with psoriasis in other ethnicities," said Amy Mc-Michael, MD, chair of dermatology at Wake Forest Baptist Medical Center in North Carolina. Last October, Dr McMichael spoke at a National Psoriasis Foundation-organized congressional briefing on psoriasis and skin of color."There is precious little research in skin of color," Dr McMichael said. "We need to make a really big dent in understanding why it's different, why it looks different, why it's sometimes harder to treat—or even if it really is harder to treat," she said.

The Congressional briefing highlighted the need for increased funding to expand research and training on psoriasis in skin of color. It also called for policy changes to improve access to care in this patient population.

This article originally appeared on The National Psoriasis Foundation website. To access the webinar, please visit https://cme.psoriasis.org/content/psoriasis-skin-colordemand-webinar

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2016 MEDICAL PROFESSIONAL AWARDS

The 2016 Medical Professionals Awards from the National Psoriasis Foundation (NPF) recognize clinicians who have made a significant impact on the psoriatic disease field through their efforts to cure psoriatic disease and improve the lives of those affected. A committee of NPF medical board and leadership team members selected the nominees, who were evaluated on specific criteria for each award, and their overall effort in improving the lives of those affected by psoriatic disease.

Alice Gottlieb, MD, PhD, chairwoman of the department of dermatology at Tufts Medical Center and an internationally recognized educator in the field of psoriatic disease, received The Outstanding Educator in Psoriatic Disease award. She was chosen for her significant, long-term national or international contributions to psoriatic disease education, according to NPF. Dr Gottlieb is a board-certified dermatologist and rheumatologist who has educated dermatologists and rheumatologists around the world. She has given presentations at nearly 300 dermatology and rheumatology conferences in Europe, Asia, and the United States. She has served several terms on the NPF Medical Board and the founding of IDEOM, the International Dermatology Outcomes Measures organization, which, in conjunction with NPF, has been instrumental in leading efforts to develop outcome measures in psoriasis. Dr Gottlieb's research efforts have led to some of the most important outcomes in psoriatic disease, including the role of lymphocytes in the development of psoriasis, which has led to the development of modern biologic therapy, NPF noted.

Jerry Bagel, MD, director of the Psoriasis Treatment Center of Central New Jersey, was awarded The Outstanding Physician-Clinician award. He is involved in the clinical care of patients with psoriasis or psoriatic arthritis and frequently shares his expertise with other health care professionals. Dr Bagel has written more than 50 articles and conducted many clinical trials, many of which are related to psoriasis. In addition, he developed the NPF President's Council, a group of over 100 medical professionals who support the Foundation's research and advocacy efforts. He has also led Team NPF events, including chairing the inaugural cycle event in 2015.

Wilson Liao, MD, associate professor of dermatology at the University of California-San Francisco School of Medicine, was named The NPF Health Professional Volunteer of the Year. He has supported NPF since he was a medical student at Harvard University. In his career, he has played an active role in the Northern California Division of the Foundation. Dr Liao has served as honorary medical chair for the Walk to Cure Psoriasis, physician advisor for the division, patient education speaker, and honorary medical chair for the Commit to Cure Gala honoring John Koo, MD. He has raised over \$20,000 as a Top Walker in the Team NPF Walk in San Francisco. In addition, Dr Liao runs a monthly free Dermatology Clinic at University of California—San Francisco.

Abby Jacobson, PA-C, a physician assistant in practice at Family Dermatology in Reading, PA, and assistant professor at Thomas Jefferson University, was awarded The Outstanding Allied Health award. Ms Jacobson was the first physician assistant nominated to the NPF Medical Board and is a member of the Emeritus Board. She is also a past president of the Society of Dermatology Physician Assistants and has been involved in leadership roles at both the local and national levels. Ms Jacobson is recognized as a leader in the allied health field, often sharing her expertise with other providers through speaking engagements.