

PSORIASIS

Journey to Stability

About Psoriatic Diseases

Psoriasis is a chronic inflammatory condition that affects the regeneration of skin cells.

More than one million Canadians are affected.

The negative impacts on people's quality of life, both physical and emotional, can be significant. There is no cure.

The most common form is plaque psoriasis, which affects approximately 90% of people with psoriasis. Up to 30% of people with psoriasis will develop psoriatic arthritis and 5-10% have functional disability from arthritis.

Having psoriasis may increase the risk of developing other chronic diseases, including heart attack, stroke, diabetes, cancer, depression, and liver disease.

Impacts on Patients

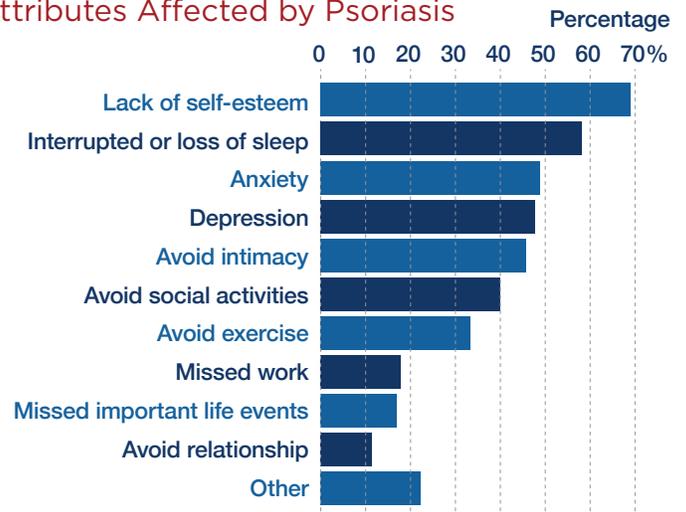
Most cases of psoriasis can eventually be controlled, and most people who have psoriasis can live normal lives. However, some people who have psoriasis are so self-conscious and embarrassed about their appearance that they become depressed and withdrawn.

The emotional impact of psoriasis on a person's life does not depend on the severity of the lesions. It is determined by how each person feels about the itchiness, pain and discomfort of psoriasis and the visibility of the lesions.

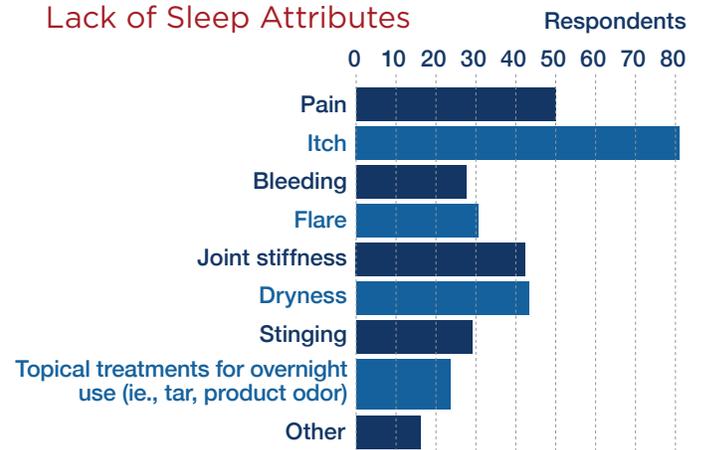
Psoriasis can impact every aspect of an individual's life, including their ability to work and maintain relationships. Many individuals suffer from low self-confidence, anxiety, depression, pain, itchiness and, as a result, sleep deprivation.

Mild	 <p><3% of the body.*</p> <p>Generally involves isolated patches on the knees, elbows, scalp, hands and feet.</p> <p> Typically little effect on the quality of life.</p>
Moderate	 <p>3-10% of the body.*</p> <p>Generally appears on the arms, torso, scalp and other regions.</p> <p>Often results in concern about others' reactions to visible lesions.</p> <p> Generally affects the quality of life.</p>
Severe	 <p>>10% of the body.*</p> <p>May affect large areas of skin.</p> <p>Psoriasis of the face and palms/soles may be considered as severe.</p> <p> Typically has a severe impact on the quality of life.</p>

Attributes Affected by Psoriasis



Lack of Sleep Attributes



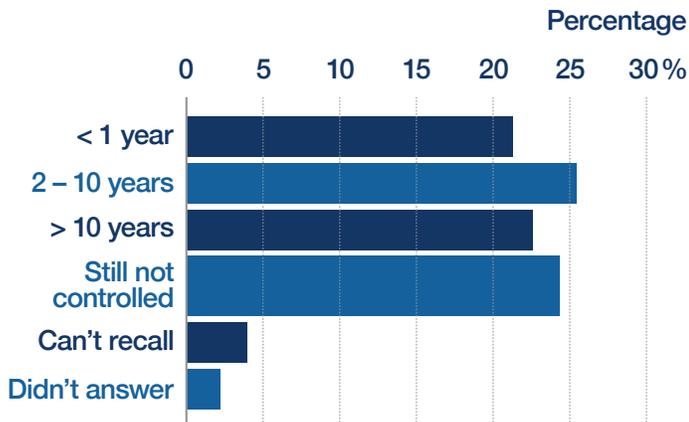
*To assess the area of involvement, consider that your palm covers about 1% of the skin's surface

The Journey to Stability

Stability was defined as an individual's personal comfort with the effectiveness of treatment, the degree of skin clearance, and quality of life.

In Canada, the journey to stability is often onerous and usually involves failing on several different medications before finding one that is effective. A considerable number of people surveyed have lived for 10+ years with uncontrolled psoriasis before finding a medication or treatment that controlled or managed their psoriasis.

Length of Time to Controlled/Stable



Choice matters. This is because many people living with psoriatic diseases experience medication fatigue, including medications failing to work after a period of time with the need to change to another, the inability to tolerate a medication or formulation and needing to change to another, and other challenges adhering to a given treatment (e.g. strong smell of a cream preventing sleep, medication side effects). What works for one person may not work for another.

The need to fail on different therapies in Canada before finally being able to access one that works can waste public funding. Multiple visits to multiple providers for an uncontrolled condition over a longer period of time costs more money than using a clinician's therapeutic judgment to shorten a person's journey to stability.

Treatment decisions are often difficult and emotional. When respondents changed medications because they weren't effective, the majority (65.32%) were negatively impacted.

Methods & Limitations

The Journey to Stability Survey was open from September 15 to November 8, 2017. Online surveys were completed by 286 English respondents, with the majority (96.5%) being adults living with psoriasis. The survey findings only represent the experiences of Canadians who responded. There was no accompanying educational material provided to respondents, so any limitations in their own knowledge (e.g. about new treatments like biologics or biosimilars) were not addressed. In addition, sample bias is possible as people dealing with issues related to their psoriasis may be more apt to respond to such a survey rather than people who have achieved greater control over their condition.

How well the respondents' psoriasis is currently controlled

When asked how well the respondents' psoriasis is currently controlled. Only about a third of respondents felt their condition was well controlled:



Knowledge of biologics and biosimilars was low among the people living with psoriasis surveyed, with the majority of respondents classifying themselves as knowing very little or only having some knowledge of this class of medications.

UV Therapy works for many people living with psoriasis, but its public coverage is shrinking across Canada.

Tele-dermatology works to extend access to dermatologists in rural and remote regions, but there isn't enough coverage across Canada.

Without education and without informed decision-making with their treating clinician, people who are stable after a lengthy and emotional journey reacted strongly to the possibility of being switched to another medication for non-medical reasons.

How You Can Help

- Support public formularies in their ability to offer a wide array of treatment options for people living with psoriatic diseases, including recommending formulary rules that support clinicians' therapeutic judgement.
- Support the expansion in access of UV Therapy and tele-health for people living with psoriatic diseases.
- Proactively move towards a Health Technology Management approach that meaningfully incorporates real-world evidence about psoriatic diseases' treatments, especially evidence associated with optimal health outcomes for people living with psoriatic diseases, so that better listing recommendations can be made over time, increasing access to a choice of effective therapies.
- Increase CADTH's meaningful patient engagement mechanisms. Work with CPN and CAPP to prototype means to streamline and improve how CADTH incorporates feedback from people with psoriasis and caregivers in the health technology assessment and management processes.