

Psoriasis: Update on the disease and treatment costs

By Christine Clarke

Advocacy is simply about getting information on a given issue to those responsible for making decisions about that issue. It is also about informing and empowering patients and their families to influence and make change.

Despite many recent advances in our understanding of psoriasis, too many people still believe that the condition is merely a skin problem. However, the latest research from a landmark study conducted by Dr. Nehal N. Mehta and funded by the National Psoriasis Foundation in the U.S. provides further evidence that psoriasis is more than skin deep. Knowing this, we must now investigate the true cost of treating psoriasis and its known comorbidities.

Psoriasis: Inside and out of the body

As expected, images recorded in the Mehta study did show inflamed skin and blood vessels. But the researchers were surprised to also see inflammation in other organs and joints of patients with psoriasis, including the liver, joints, tendons and aorta—despite the study participants having no symptoms or obvious risk factors for diseases that affect those areas. In contrast, the study participants without

psoriasis did not show any increased inflammation in any of these locations.

This study, published in the *Archives of Dermatology*, provides further evidence that psoriasis and other inflammatory diseases are linked. This adds to a growing body of evidence that people with psoriasis are at a higher risk for heart, joint and liver disease, even when asymptomatic for these conditions.

In fact, findings presented at the World Psoriasis Conference in Stockholm this past June indicate that psoriasis patients are 1.5 times more likely than the general population to have cardiovascular disease, and have a five-fold increased risk of developing type 2 diabetes.


Costs of treating psoriasis and comorbidities

There is much talk about the high cost of treating psoriasis with new systemic treatments. But let's examine the cost of letting patients go untreated. Around one million people in Canada are diagnosed with psoriasis, with approximately 32 per cent having "moderate to severe" disease.

These patients have a higher occurrence of many other illnesses than the general population, including cardiovascular disease, diabetes, Crohn's disease and arthritis, to name just a few. The

direct cost of cardiovascular disease in Canada is more than \$12 billion and we know that psoriasis patients take up a minimum of \$120 million. The indirect costs are approximately twice that amount. And that's only cardiovascular disease. What about diabetes, the metabolic syndrome and the other many diseases that this population is more likely to have?

Elected governments think in fiscal years—they work with annual budgets. But effective psoriasis treatments, which also reduce the risk of additional serious diseases, save money over a long period of time. Short-term thinking drives our health-care costs up in the long run, and saddles patients with illnesses that might have been avoided. We need to let our governments know that we expect them to save money and save lives by covering more appropriate (and, yes, costlier) treatments now.

Please contact your MLA/MPP and let him or her know you think this is a problem. You will find pre-written letters on our website if you prefer. This is important. Please make your voice heard. www.canadianskin.ca/advocacy. 

Christine Clarke is a member of the Board of the CSPA and chairs the Advocacy Committee.

