

REFUSING TO HIDE
THE INSIDER'S GUIDE TO PSORIASIS



There's nothing easy about living with psoriasis. The plaques can be painful and itchy – and you never really know when a flare-up will hit, so you can never fully prepare. The way you dress. How you relate to work mates. Even how you plan your holidays. Psoriasis symptoms can affect many decisions and aspects of your life – and sometimes take an emotional toll.

That's why this guide was created. In addition to providing an in-depth explanation of psoriasis, these pages contain useful tips and simple strategies that may help you feel more comfortable in your own skin – and deal better with your psoriasis. The expert advice you'll find here is from dermatologists, nurses, psychologists, and others with experience dealing with psoriasis. We hope you find it valuable – and that it helps you better understand your psoriasis.

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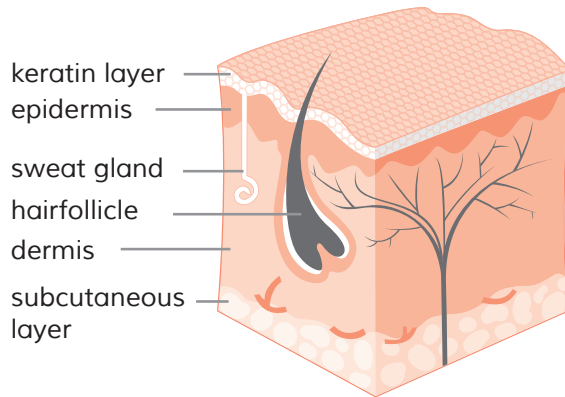
CHAPTER ONE: WHAT IS PSORIASIS?

BEGINNING TO UNDERSTAND

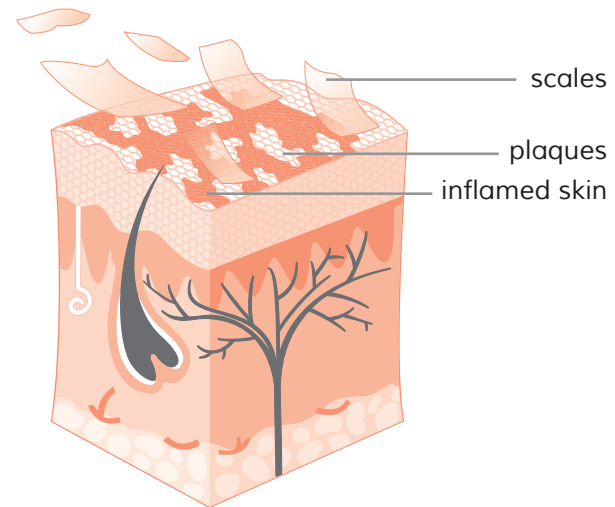
"I just walked out of the doctor's office and the diagnosis is still settling in. I have plaque psoriasis. However, I don't exactly understand how I got the disease or what is happening when a flare-up occurs."

Defining the disease. Psoriasis is an autoimmune disease. This means the body's immune system is mistakenly reacting to some of your own body's cells. Other examples you may be aware of are rheumatoid arthritis and lupus. In psoriasis, this results in accelerated skin cell growth. "Psoriasis is normal skin growing too fast," explains dermatologist Laurence Miller. Normal skin cells replace themselves every 28 to 30 days, but skin cells affected by psoriasis mature in a fraction of that time (about 3 to 4 days) and pile up instead of falling away on their own. The resulting buildup forms the silvery, scaly, red patches called plaque psoriasis.

HEALTHY SKIN



PSORIASIS



Q+A

Q: How severe is my psoriasis?

A: To start, you can use your handprint as a measurement device. Your handprint is about 1% of your body's surface. Your case is:¹

- mild if less than 10% of your body's surface (less than ten hand prints) is affected
- moderate to severe if more than 10% is affected

This is only a rough estimate, and severity will also be assessed on plaque characteristics (redness, hardened surface, peeling skin) as well as whether any difficult-to-treat areas are affected. This assessment is summarised as a Psoriasis Area and Severity Index (PASI) score. Ultimately, your doctor will calculate your PASI score, so be sure to ask them about it.

In some cases, psoriasis may affect less than 10% of your body regions but still be considered moderate to severe if it is having a large impact on your quality of life.¹ Make sure you tell your doctor how much your life is being affected by psoriasis.

Psoriasis can be further defined within five main types, including plaque, guttate, inverse, pustular, and erythrodermic. Here are the effects and symptoms of each type:

Plaque psoriasis is the most common form of psoriasis. It is characterised by raised, inflamed, red lesions covered by a silvery white scale. It is typically found on the elbows, knees, scalp, and lower back, but can be anywhere on the body. The lesions may be itchy, inflamed, painful, cracked or bleeding.



Plaque psoriasis

Guttate psoriasis appears as small, red, individual spots on the skin. It may occur after an acute infection such as strep throat. Guttate lesions usually appear on the trunk and limbs. These spots are not usually as thick as plaque lesions.



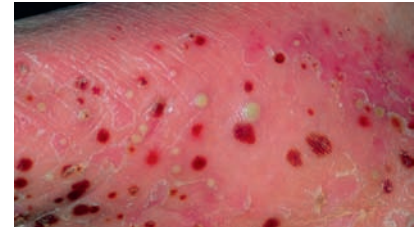
Guttate psoriasis

Inverse psoriasis is found in the armpits, groin, under the breasts, and in other skin folds around the genitals and the buttocks. This type of psoriasis appears as bright-red lesions that are smooth and shiny. Inverse psoriasis is subject to irritation from rubbing and sweating because of its location in skin folds and tender areas. It can be more troublesome in overweight people and those with deep skin folds.



Inverse psoriasis

Pustular psoriasis, primarily seen in adults, is characterised by white blisters of noninfectious pus (consisting of white blood cells) surrounded by red skin. Pustular psoriasis may be localised to certain areas of the body, such as the hands and feet, or covering most of the body. It begins with reddening of the skin followed by the formation of pustules and scaling.



Pustular psoriasis

Erythrodermic psoriasis is a particularly inflammatory form of psoriasis that affects most of the body surface. It is characterised by periodic, widespread, fiery redness of the skin and the shedding of scales in sheets, rather than smaller flakes. The reddening and shedding of the skin are often accompanied by severe itching and pain, heart rate increase, and fluctuating body temperature. People experiencing the symptoms of an erythrodermic psoriasis flare should go see a doctor immediately. Erythrodermic psoriasis causes protein and fluid loss that can lead to severe illness. The condition may also bring on infection, pneumonia, and congestive heart failure. People with severe cases of this condition often require hospitalisation.



Erythrodermic psoriasis

Consider environmental factors. While genetics play a role in psoriasis, scientists believe exposure to environmental triggers may propel the disease into action. Many people experience a worsening of their symptoms in the winter and improvement in the summer. Other triggers may include injury, stress, certain medicines, and some types of infections, like streptococcal infections.

Look to the family tree. The exact reason why some people develop psoriasis remains unclear, but evidence suggests genetics are involved. Prevalence of psoriasis varies between families and different populations. An estimated 2.5% of the Australian population have psoriasis.²

NOT JUST A SKIN CONDITION.

HOW MAY PSORIASIS AFFECT MY LIFE?

Psoriasis doesn't just affect the skin. Due to the long term and visual nature of psoriasis, it can have profound social, psychological and economic consequences for your life.

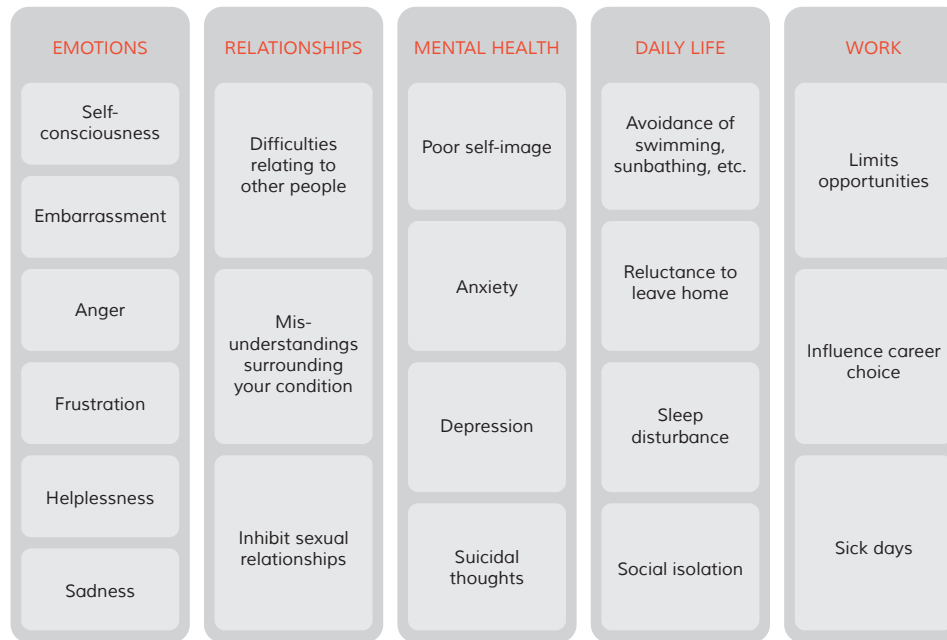
It's critical that you are aware of these potential problems, to help you prepare for and tackle them.

Psoriasis can potentially disrupt your:

- Social life
- Relationships, marriages and family life
- General health and well-being

Even if psoriasis only affects a small area of your body, or if your psoriasis has not been officially classified as severe, it may still have a significant negative impact on your quality of life. In fact, the impact of psoriasis on quality of life is reported to be comparable with that observed in other conditions such as diabetes and depression.

POSSIBLE CONSEQUENCES OF PSORIASIS



To help you cope with your psoriasis, talk to your doctor regularly about how the condition is affecting your life e.g. physically, emotionally, socially and/or sexually.

Your doctor may use questionnaires to measure the impact of your psoriasis on your quality of life. You can download an example questionnaire from Psoriasis Australia (www.psoriasisaustralia.org.au).

OTHER MEDICAL CONDITIONS

When you have psoriasis, you may be at risk for some other conditions such as:¹

- Cardiovascular disease
- Inflammatory bowel disease
- Lymphoma
- Metabolic disease
- Depression

These conditions can occur whether or not you have psoriasis, but it's always wise to talk to your doctor about your full medical history and what kind of lifestyle changes you can make to lower your chances of developing these and other health problems.

Psoriatic arthritis. Up to 30% of people with psoriasis develop psoriatic arthritis.³ Unfortunately, psoriatic arthritis (or PsA) isn't just something you see on the surface of your skin. PsA affects the joints at the ends of the fingers, as well as wrists, knees, and ankles. Other joints may become stiff, painful, and swollen too, but these are the most commonly-affected areas. The next chapter goes into greater depth about this condition.

CHAPTER TWO: PSORIASIS AND JOINT PAIN

IT COULD BE PSORIATIC ARTHRITIS (PsA)

“Now it’s not just the psoriasis symptoms I’m concerned about. Lately my joints have been hurting and feeling stiff. Is this just a consequence of getting older – or something more serious?”

PsA STATS

- PsA develops in up to 30% of patients with psoriasis³
- While PsA can occur at any time, symptoms of PsA typically don't appear until 10 years after psoriasis symptoms³
- This disease very often first occurs in people between the ages of 30–50⁴

When people think of arthritis, they usually think of osteoarthritis, which is generally associated with getting older – part of the “wear and tear” of life. PsA, though, is a completely different condition. As its name suggests, psoriatic arthritis is a form of arthritis that often affects people who have psoriasis. While both of these diseases may have common symptoms, such as pain, swelling, and stiffness of the joints, it's important to note the differences.

First and foremost, PsA (like psoriasis) is an autoimmune disease and osteoarthritis is generally not. The exact cause of PsA isn't fully known, but when you have it, your immune system mistakenly attacks healthy cells and tissue as if it were fighting an infection; this leads to inflammation and pain in your joints. In a recent survey of Australians, 28% of respondents reported also having PsA.⁵

Chronic joint inflammation, damage and even disability can occur in late stages of the disease. So if you notice any of the following warning signs, talk to your doctor as soon as possible. Early diagnosis and management aim to give you the best possible prognosis with this condition.

POSSIBLE SYMPTOMS OF PsA:

- Swollen fingers and toes
- Joint stiffness that lasts more than 30 to 40 minutes in the morning, after physical activities, or after long periods of inactivity such as sleep, car trips or air travel
- Changes to nails (discoloration, pitting, or separation from the nail bed)
- Back pain (lower back, upper back, or neck)
- Tender, painful, throbbing, or swollen joints
- Tenderness, pain, or swelling around the tendons
- Reduced range of motion
- General fatigue

DIAGNOSING PsA:

There is no single test used to diagnose PsA. Your doctor will talk to you about your symptoms, carry out a physical examination, and may refer you for further examination and investigations. If PsA is suspected, laboratory tests and X-rays can help eliminate other types of arthritis and confirm the diagnosis.

WHAT ARE THE CAUSES OF PsA?

Genes, the immune system, and environmental factors are all believed to play roles in the occurrence of PsA. While there's currently no cure, there are a number of treatment options available, as well as plenty of support.

CHAPTER THREE: THE RIGHT CARE FOR ME

FINDING THE RIGHT DOCTOR

"I have a lot of questions and concerns about my psoriasis, but frankly – the process of finding the right doctor is a little overwhelming. Is there a way to really know which doctor would be right for me?"

QUICK TIP

“As a patient, you have to take responsibility to make sure your doctor is aware of your psoriasis and remind her of your psoriasis,” according to Dr Francesca Fusco, an assistant clinical professor of dermatology.

The right kind of doctor. When it comes to a chronic disease like psoriasis, your relationship with your healthcare provider is not to be taken lightly. You’ll want to find one who can partner with you in helping to manage your psoriasis. Dermatologists specialise in skin and skin conditions and are often very knowledgeable about psoriasis. If you don’t already have one, consider asking your GP if a referral to a dermatologist would be appropriate for you. When you’re under the care of a dermatologist for your psoriasis, your GP would still help you with other health issues or refer you to other healthcare professionals if needed.

If you need to choose a dermatologist, speak with the office staff. “Patients always have the right to inquire about a doctor’s experience in treating any condition,” says Dr Jennifer Linder, a clinical professor of dermatology. When booking appointments, consider asking the receptionist how long the doctor has been treating psoriasis patients or how many psoriasis patients the doctor sees per week, which could help you assess the doctor’s experience in treating your condition.

The right dermatologist for you. Not all dermatologists are the same. Some have a lot more experience with psoriasis than others. It's important to be treated by someone who really understands psoriasis and psoriatic arthritis. It's also important that you see a doctor you have a good rapport with, so that you feel comfortable to be honest about your symptoms and ask questions along the way.

You'll want to find a dermatologist who is familiar with psoriasis treatments. It's important to know that from the start, so don't be shy about asking. Sometimes the right specialist for you is a little farther away than you had planned on travelling. The peace of mind you will get in knowing you've found someone who's a good match for you may be worth going the extra distance.

QUICK TIP

Good questions to ask. If you need to choose a dermatologist, it helps to know what to ask. Here are some questions you may find helpful:

- **How many other psoriasis patients do you treat each month?**
For example, there are around 400 dermatologists in Australia. This means there are ~1,500 people with psoriasis per dermatologist. Remember though, not everyone is diagnosed or seeing a dermatologist.
- **What types of psoriasis treatments do you usually use?**
The more you know about your treatment options and what to expect, the more empowered you are to work with your dermatologist to control your psoriasis. It may be worth asking about the success rate of the treatments your dermatologist is suggesting.
- **Here's how my psoriasis is affecting me. What would you recommend?**
Along your psoriasis journey, your dermatologist will want to know what treatments you've tried in the past, how effective they've been, the extent of your psoriasis, what impact it is having on your life and how much responsibility you will take for your treatment, among other information.

You should continue to ask questions even after you have chosen your dermatologist. Some more useful questions are:

- What lifestyle habits may be affecting my psoriasis?
- What are the different treatment options available and what are the benefits and side effects of each?
- Why have you chosen this particular treatment for me?
- Can I use other medications while I am taking this treatment?
- How long will it take to see results?
- How will you monitor my progress on this treatment?
- What will happen if I stop using this treatment?
- What resources are available to me to help me to learn about psoriasis?
- What can I do to help me to cope with the psychological consequences of my psoriasis?
- What can I do to help me to be more comfortable with intimacy in my relationship?
- When will my next visit be and what can I expect?

If you already have a dermatologist, but feel as if you're being rushed, or that what you're being told is no longer helpful to you, it's okay to seek out a second opinion from another dermatologist. It's your body; you have every right to feel as if you're getting the right care.

The right conversation: getting the most out of your dermatologist visits. Even after you've found a dermatologist to partner with, you may find that you're not communicating together as well as you could be. One survey showed that the average office visit between dermatologists and their patients is a mere 9 to 12 minutes, so if you sometimes feel rushed, it's understandable.

When it comes to something as personal as psoriasis, you may also find it difficult to be completely frank about your situation with your doctor. It may be comforting to know that the more honest you can be about your condition, and the ways that it affects you, the closer you can get to finding the help that you need. By taking an active role with your dermatologist, you're much more likely to have productive conversations.

WAYS TO IMPROVE THE DIALOGUE

BE HONEST:

- **Let your dermatologist know exactly how psoriasis is affecting you.** He or she is a dermatologist, not a mind reader. By giving some real-life details about situations where psoriasis gets in your way, they can understand your condition a lot better. And that can make it easier to find a treatment plan that's right for you. A broad list of topics that you may want to discuss (some of which you may not have thought of) can be found at myspsoriasis.com.au
- **If your psoriasis isn't getting better, speak up.** You don't have to settle for the status quo. If you're not seeing any improvement in your condition, or you're not completely satisfied with the treatment plan, this is the time to talk about it

BE PROACTIVE:

- **Ask for the first appointment of the day.** The office is likely to be less busy and the doctor may not be so rushed
- **Write down questions ahead of time.** Bring a list with you, so you won't forget your concerns when you get there
- **Keep track of your symptoms.** It will help you remember and help your doctor understand. Be as specific in your details as you can
- **Set and share goals with your doctor.** This way you're working as a team – together. Some example goals are achieving a PASI score <10, feeling comfortable to wear short sleeves and reducing the number of work sick days due to psoriasis flare-ups
- **Know your options ahead of time.** The next chapter will go over these, but you can also find more helpful information on reliable websites such as www.mypsoriasis.com.au and www.psoriasisaustralia.org.au. It's a good idea to do your homework before your appointment, so that you can discuss the pros and cons of each treatment option during your visit
- **Keep your eyes and ears open.** If you see an article about something new for psoriasis, share it with your doctor. The more you're able to discuss various aspects of this disease together, the closer you can get to the right treatment plan for you

BE EMPOWERED:

Remember: you have options. If you feel like you're always being rushed or not getting the answers you need, maybe it's time to find a new dermatologist

BE OPEN TO ADDITIONAL HELP:

You may need to rely on several doctors with various specialties to address all aspects of your health. A dermatologist has in-depth knowledge of the relationship between diseases and the skin

A psychologist can help with emotional aspects of your condition. It may also be a good idea to see a rheumatologist if you have joint pain – since people with psoriasis are more at risk for psoriatic arthritis. Your GP or dermatologist can advise if this may benefit you.

CHAPTER FOUR: MY TREATMENT OPTIONS

“There are so many options out there: creams, pills, shampoos, light therapy, and injectables. Help! How do I know I’m getting the right treatment to manage my disease?”

Examine your options. While there's no cure for psoriasis, there are many treatments or combinations of treatments your doctor can recommend to aid you in managing the situation and help your skin look and feel better. Then give the treatment time to work: "Usually, one should give any therapy two to three months before evaluating if it is helpful," says Dr Linder. Bear in mind, though, that not all treatments work for everyone. If you're not seeing results after those few months, talk to your doctor about it – so that you can find the treatment that's right for you. Treatments that work well at first may lose their effectiveness over time. You may have to try a few of these treatments before you are eligible for other ones.

TOPICALS

Treatments applied directly to the plaques on the skin are called topicals.

The different types of topical treatments are:

- vitamin D analogues
- coal tar preparations
- topical steroids
- dithranol
- vitamin A analogues

Corticosteroid treatments, which come in creams, ointments, gels, shampoos, or lotions, work to reduce inflammation. Topical vitamin D creams contain vitamin D3 and affect the growth of skin cells.

Some topical treatments are available over the counter, but most need a doctor's prescription. This is generally the first step in the treatment pathway.

LIGHT THERAPY

Using controlled narrow-band ultraviolet B (UVB) rays, or ultraviolet A (UVA) rays in conjunction with a drug called psoralen (PUVA), you receive doses of light in a light therapy booth, or a “light box.” The rays slow the growth of skin cells in the psoriasis patches. Under this treatment, you will typically need to attend the light therapy centre two or three times a week for several weeks. It is usually recommended that you are not exposed to more than 250 treatments of PUVA or 300 treatments of narrow-band UVB over your life.

Your psoriasis may not respond or may stop responding to topical treatments and/or light therapy, in which case, systemic medications may be prescribed.

SYSTEMICS

Available in the form of an oral or injected medication, systemic medications work from inside the body, rather than outside, and are prescribed by a doctor. This form of treatment is generally reserved for people with moderate to severe psoriasis, psoriatic arthritis, or psoriasis that affects the hands, feet or nails. Some of these medications have potentially severe side effects, and so they are only used for brief periods or alternated with other forms of treatment.

BIOLOGICS

One newer type of systemic treatment are the biologics. Rather than being chemically-based, they are made of protein. They also differ from other systemic treatments in that they target specific parts of the immune system. They are given by injection or infusion. You will have to have tried other treatments including other systemic treatments before you may be eligible for biologic treatment.

QUICK TIP

It's always a good idea to discuss your current medicines, including any over-the-counter products, with a new doctor to avoid drug reactions. Also, talking with your doctor about the medicines you are taking can help ensure your treatment regimen is on course.

Ask your doctor. As you look at treatment options, one consideration you'll likely have is cost. The good news: there are many treatment options that are covered by the Government's Pharmaceutical Benefits Scheme (PBS). Some medications have specific criteria to be eligible for the subsidised price, so check with your doctor or pharmacist if you are unsure whether your treatment is covered.

BEYOND SHAME AND BLAME

When a treatment doesn't work out as well as we'd hoped, we often blame ourselves. We reason, "If only I'd done so and so..." If you're not seeing results from your treatment, it simply may be time to explore a new option – and possibly even a new dermatologist.

CHAPTER FIVE: DOING MY BEST

WHEN I EXERCISE

"I just started running in a nearby park because I know exercise is key to staying in shape. However, I found that sweat makes my psoriasis itch. Plus, new plaques sometimes pop up when there's skin friction during workouts – on my arms, knees, and lower back. How can I focus on staying fit when working out aggravates my psoriasis?"

Q+A

Q: Why should I exercise?

A: Whether or not you have psoriasis, taking care of your health is always a good idea. Just check with your doctor first before starting any activity program. Then find something you like to do that will nurture you mentally and make you feel good physically, whether it's dancing or even chair yoga.

Dress smart. "Areas where the skin is irritated and chafed can develop more psoriasis," says Dr Abby S. Van Voorhees, Associate Professor of Dermatology and Director of a psoriasis and phototherapy treatment centre. Protect yourself by wearing clothing that minimises skin rubbing against skin, the floor, or equipment. For example, wear long pants to yoga class and put on gloves during tennis, cycling, and weight lifting. Cotton liners worn inside your gloves may also provide an extra barrier against damage and chafing.

Step out. You don't need a gym membership to boost your fitness. In addition to simply putting on a pair of good shoes and running or walking in your neighborhood, you can also head to state parks for trail hikes. Community centres may also offer outdoor programs you can sign up for. And another bonus to exercising in the great outdoors: You can make new friends as you get fit in running or cycling clubs.

ON MY PLATE

I'm hoping that if I avoid certain foods that aggravate my psoriasis and eat more of other foods, I may get rid of it.

Know what to avoid. No matter how well or poorly you eat, diet cannot cause or cure psoriasis. Some foods may aggravate the condition, according to Dr Francesca Fusco, Assistant Clinical Professor of Dermatology. Also, alcohol consumption and cigarette smoking may make psoriasis more difficult to treat, says Dr Charles Crutchfield III, Associate Professor of Dermatology.

Eat with know-how. While no diet can cure psoriasis, maintaining a well-balanced diet can help you stay healthy. For guidance on your food choices, check out eatforhealth.gov.au. Of course, always talk to your doctor before making changes to your diet.

PERSONAL STRATEGIES

HEALTHY SUBSTITUTIONS.

Making small changes to your diet can make a big difference in your overall health. Take the first step: next time, instead of reaching for a biscuit, why not choose a crisp apple or a bunch of juicy grapes?

CHAPTER SIX: MY SUPPORT NETWORK

SHARING ON MY TERMS

"I have known for a while that "something" is wrong with my skin, and my doctor officially diagnosed me with psoriasis. I'm not sure how to tell my friends that I have psoriasis without causing them to worry about my health. I also wonder how to discuss my condition with them. My friends may not understand, and I sense they'll be uncomfortable or afraid to talk openly about it."

Q+A

Q: Sometimes I feel my family would rather I “cover up” when I’m out in public, but I’m fine wearing shorts and short sleeves. What should I say to them?

A: Remind them that psoriasis is not contagious and educate them about psoriasis.

Be prepared when you share. Before you discuss psoriasis with your friends or family, do plenty of research about the condition, suggests Dr Shelley Diamond, a psychologist who has led psoriasis support groups. Those around you will have many questions about the condition, and you’ll set a calm tone by being knowledgeable and reassuring. Have some brochures about the disease – perhaps from Psoriasis Australia (www.psoriasisaustralia.org.au) – to share.

Confide in a special family member. Some people in your family may feel uncomfortable discussing your psoriasis with you, Dr Diamond says. But it’s important to share your feelings with someone in your family. Since there is a known genetic connection associated with psoriasis, find out if anyone in your family has it. If there is, reach out, and share perspectives and ideas on how to cope. Understand that psoriasis will never change their love for you.

DEFINING MY OWN IMAGE

When we take family photos, my mum arranges us so my siblings and cousins are strategically placed to hide my psoriasis patches. We never talk about it, but I sense she's embarrassed about my condition.

My personal role models. Your family may be overprotective. Maybe they'll even try to steer you away from going after the career you've always wanted or urge you to be wary of dating. Although they may be trying to protect you, they quite simply may not know that the world is full of successful, happy people with psoriasis. Be sure to seek out people with psoriasis who have careers and marriages, so you can balance your family's worries with real-life examples, Dr Diamond suggests.

EXPERT ADVICE

COMMUNICATION.

Some people do believe appearances are important, says Dr Diamond. If you sense others believe there's something "wrong" with your appearance, explain that it hurts to feel they care more about your looks than who you are. Remind them that psoriasis is an immune disease that is not contagious (not something you contracted as an infection or from not taking care of yourself).

BY THE NUMBERS

500,000.

More than 500,000 Australians have psoriasis.² If your family thinks that your opportunities are limited because of psoriasis, remind them how many others have the condition. That means a lot of people are living their lives despite psoriasis, and you can be one of them!

OUTSIDE OPINIONS HELP

No matter what life has thrown at me, I feel like I'm self-sufficient enough to find solutions without asking for help. But psoriasis seems like a bigger challenge than I've tackled before. There's so much I need to know and so much to deal with. Who can I look to for help and support as I learn to cope with psoriasis?

Seek support groups. Find a psoriasis support group in your area or visit online chat groups and message boards, suggests Melodie Young, a dermatology nurse practitioner specialising in psoriasis. Check out the Psoriasis Australia webpage (www.psoriasisaustralia.org.au). Once you find a group that you like, get all the information you can – ask others what they do to manage their disease.

CHAPTER SEVEN: SKINTIMACY

MY NEW PARTNER AND PSORIASIS

"I recently started dating someone new. She knows I have a skin condition because I always wear long sleeves, even during the summer. I'd like to explain my psoriasis to her, but I don't know where to start. How should I prepare myself?"

PERSONAL STRATEGIES

DEFINING YOURSELF

Psoriasis is not something to be ashamed of. It's part of your body chemistry. It defines you no more than whether you are a blonde or a brunette.

Review possible questions. Before you tell her about your condition, think of specific questions she might ask about your psoriasis. Questions such as "Will it get worse?" and "Is it contagious?" are likely to come up.

Be thorough. When responding to questions, offer quick but thorough answers. Explain that psoriasis is an immune system disease where the skin reproduces at a rapid rate, but that it isn't contagious. Explain that certain triggers such as stress (or others that may be specific to you) may worsen your condition.

Maintain perspective. Your psoriasis is likely more noticeable to you than to your date, says Dr Ted Grossbart, a psychologist and author of *Skin Deep: A Mind/Body Program for Healthy Skin*. He calls such a scenario the "bad haircut effect," which refers to situations that lead you to dwell on an aspect of your looks others notice very little.

COPE THROUGH LOVE

I find it hard to talk to my wife about my psoriasis. How should I approach it more comfortably?

Be open and direct. Often, the stress of keeping feelings bottled up can worsen psoriasis symptoms, says Dr Grossbart. Make a pact to share feelings openly and honestly.

Relax together. Relaxation techniques like yoga can lower stress in some people. When you do these activities with your spouse, you may enjoy them more, Dr Grossbart says.

Identify emotional triggers. Some people have fared better when they could identify the stressful events that triggered outbreaks. Keep track of triggering situations so you can learn to deal with them more constructively.

EXPERT ADVICE

TIMING.

Communication is key. "Flare-ups can be painful or uncomfortable," Dr Grossbart says. "You may want to delay getting personal until an outbreak passes." Have discussions with your partner to help him or her understand your disease.

CHAPTER EIGHT: STEPPING OUTSIDE, STANDING TALL

WHEN A STRANGER STARES

"I can often tell when someone is wondering: Is your skin condition contagious? At the supermarket, as I hold out my money to the checkout operator, she gingerly takes it from my hand. I know she wants to ask. Should I say anything, and if so, what?"

BY THE NUMBERS

83%.

If you find yourself frequently hiding your psoriasis due to what people may think, you are not alone. In an Australian survey, 83% of respondents reported hiding their condition from the general public, 65% from work colleagues, 58% from friends and 49% from employers.⁵ Nearly half the respondents believed the general public perceives psoriasis as contagious.⁵

Respond fast. If you're in a situation where someone is concerned they might "catch" psoriasis, it's always appropriate to let them know that your condition is not contagious, says Dr Vickie Dowling, a psychologist who has psoriasis. Keep in mind that people may think it's contagious out of ignorance, not spite.

Be brief. Prepare a 10-second go-to statement that describes what you want to say. This will make you feel more happy and confident in social situations. Dr Dowling recommends saying something like, "I have psoriasis; it's not contagious. My skin reproduces at a much more rapid rate than yours does."

Set boundaries. When you're in a situation where you don't feel like talking, be assertive in protecting your privacy. It's certainly okay to do so. But also remember that hiding your psoriasis can cause you to feel isolated.

KID TALK

My niece asked me to come to her school and talk about my job on career day. When walking through the halls, a child asked, "What happened to your skin?" She didn't know better, but what's the proper response?

KIDS SAY THE DARNDDEST THINGS.

"Kids have radar for any imperfection of the skin. They zero in on it, and they know no boundaries," says Dr Richard Fried, a dermatologist and psychologist. Kids ask about moles, hairlines, and any other skin issues, so you weren't singled out just because of your psoriasis. Remind yourself that psoriasis doesn't limit your ability to be an excellent parent or teacher.

Keep it simple. Kids don't need a deep explanation about the immune-system cells and chemicals involved in psoriasis, says Dr Fried.

Be happy. "Say, 'I have extra-happy skin. You can't catch it, and I didn't catch it from anybody,'" Dr Fried says. Explain to the child that most people's skin cells last for 30 days, but your skin cells are so "happy" that they jump off after only a few days.

QUICK TIP

Surround yourself with things that make you feel good, like fresh flowers or pictures of family or friends. This will brighten your environment and give your colleagues something to focus on when they stop by your office.

Q+A

Q: How do I deal with a person who says intentionally hurtful comments?

A: If people intended for their comments to hurt rather than express curiosity, consider their words a gift. You now know to screen them out of your life, which will leave you more room for kind, caring people.

WHEN I'M IN A CROWD

In the stands at a footy game, I look around and wish I could feel as carefree as everyone else seems to be.

Take notes. The next time you're out, take note of how often you get an unwelcome response from a stranger, such as staring or nosy comments, suggests Dr Stephen Rapp, a psychologist, who has studied the social effects of psoriasis. His patients often come back and say, "It doesn't happen as often as I assumed it did," he says.

Be your own coach. Make a serious effort to replace negative thoughts with more realistic ones, Dr Rapp suggests. Remind yourself that people aren't paying as much attention to you as you may think they are.

PERSONAL STRATEGIES

NEW PERSPECTIVE.

If you need help becoming more comfortable in public settings, consider seeing a psychologist. He or she can show you that it's not just the events in life that determine how you feel. It's how you interpret these events. In the same social situation, one person with psoriasis may be relaxed while another is uncomfortable.

CHAPTER NINE: I'M WORKING IT

MY PROFESSIONAL APPEARANCE

"After courting a potential client for weeks, it was time for an in-person meeting to seal the deal. Although I'm outgoing and know my business, I'm worried that my appearance might hurt my relationship with the new client. As the saying goes, you never get a second chance at a first impression."

Q+A

Q: My hands and nails are most affected. How can I skip the handshake in business settings without seeming awkward?

A: It's no different than if you had a cut on your hand. As the other person goes in for the shake, say, "I'm sorry, I have a sore on my hand." If it's a client you see frequently, let him or her know that you have psoriasis and typically don't shake hands during a flare-up.

Focus on the client. "Asking the client about herself right off the bat creates a comfortable environment," says Dr Fred Mael, a psychologist and workplace manners expert. "It makes it easier to mention the psoriasis later and move on with your meeting."

Be casual. "Wait until you're having lunch or coffee with the client to bring it up instead of when sitting around other people," says Dr Mitchell Marks, a psychologist and business management professor. The more informal you are, the more informal they will be with their response.

Rise above. "While first impressions are largely based on appearances, all that changes as you start to interact," says Dr Stephen Rapp.

CO-WORKER COMMUNICATION

After one of my worst flare-ups, I was pretty sure a co-worker was gossiping about me. Was I being too self-conscious? What, if anything, should I do?

Go to a third party. “Before you act, chat with a close colleague,” Dr Marks says. “If you’re stressed out about what other people are saying, talking about it is one of the best ways to deal with the stress. Talking is like roleplaying. Your friend can coach you on what to say to gossiping co-workers.”

Express yourself. “Holding it in doesn’t help,” Dr Marks says. “Your best tool is information, so explain the condition when you confront your co-worker.” Before you talk with your co-worker, figure out how you’ll start your discussion and have some talking points in mind.

QUICK TIP

Old thinking: You get very hurt when people talk about your appearance, and you don’t know how to soften the blow.

New attitude: Don’t take it personally. When humans see something they think might be contagious, they pull back. That’s a normal response. Their response isn’t about you.

PERSONAL STRATEGIES

BE UPBEAT AND POSITIVE.

Have a positive attitude when discussing psoriasis. This will encourage people to relax about your ability to manage it. You can help your colleagues to understand the impact of psoriasis on your life and that you won't let it stop you from working.

Handle concerns quickly. "Ask yourself, 'What does this person need to hear?'" Dr Mael says. "Then give the shortest possible answer." One example: It's just a skin disorder called psoriasis. It's not contagious. I'm taking care of it. It hasn't prevented me from succeeding in other positions and won't affect my performance here.

Focus on what's relevant. "Don't mention it if it's not visible," Dr Rapp says. "Otherwise, it's like telling your prospective employer that you have hypertension or migraines – it's unnecessary."

COMFORTABLE IN MY WORK SPACE

Last week, I was stressed out because I had a big project due. When I arrived at work, others sat at their desks and started chipping away at work, but it took me longer to get settled. I was more focused on the pain from my flare-ups than on my work.

Take a break. When pain is at its worst, take it easy. Make a list of what absolutely needs to get done, finish those items, and then be sure to take a break.

Rearrange for reach. Move objects you use most often – such as staplers, pens, and the phone – closer to you. Reducing reaching and lifting also minimises chafing and discomfort.

BY THE NUMBERS

4.

How many questions you should have tucked in the back of your head so you'll be able to readily ask about others' lives. This shifts the focus away from you. Such funny or surprising questions could be "Where do you think the friendliest people are?" or "What's your theme song and why?"

CHAPTER TEN: I'M TRAVELLING IN STYLE

MY ON-THE-GO PREPARATIONS

"In a few weeks, I have to attend an annual convention and give a speech. The presentation is stressful enough, but it's compounded when I get a flare-up. What kinds of things can I do to prepare and make my trip smoother?"

PERSONAL STRATEGIES

OVERSEAS TRAVEL.

Check with foreign consulates to review their security regulations about medicines. Also, it's a good idea to have a letter from your doctor with details of your medicines with you, in case you need more medicine while travelling. Be sure to note the medication strengths and names, which often vary in other countries.

FLIGHT STATUS

I have a trip coming up in the near future, but I'm worried my psoriasis medicines will be confiscated by airline security or lost in checked luggage.

Follow the rules. Prescription medicine is exempt from the Australian Government liquid, aerosol and gel quantity limits for carry-on luggage. Ensure your medicines are ready for inspection and that the name on your medicine label matches your boarding pass.

Keep your prescription handy. Prior to travel, contact the embassy, high commission or consulate of the country you are visiting to make sure the medicine is legal there. Keep a letter from your doctor detailing what the medicine is, how much you will be taking and that the medicine is for your own personal use, on hand in case you need it to get through security or if you lose your medicine. If your medicine is subsidised under the Pharmaceutical Benefits Scheme (PBS), you will only be allowed to take the amount of medication you need. Consider the storage conditions required for the medicine, such as refrigeration. You may need a cooler bag with ice packs. It is also important to leave any medicines in their original packaging.

MY TIME TO RELAX

While it seems like a wonderful idea to pamper myself at the spa, I'm concerned about aggravating my psoriasis. What do I need to know?

Be choosy. Some spas offer salt scrubs, but they can be harsh, says Dr Amy Wechsler, a dermatologist and psychiatrist. If it hurts, it may worsen your psoriasis. Ask for fragrance-free or hypoallergenic products.

Dip with caution. Pools or hot tubs may help soften and clear crusty, hard areas and flaking. However, pool chemicals can pull moisture out of your skin and cause irritation. Also, the heat from hot tubs can increase itching and irritation. Shower as soon as possible after a dip, using soap and shampoo.

BY THE NUMBERS

10-2.

The time of the day to avoid sunning without sunscreen is between 10 am and 2 pm. Use an SPF 30 or higher and reapply every 2 hours. Remember, some psoriasis treatments may make your skin more sun-sensitive.

MY SUNNY GETAWAY

Our family is thinking about a luxury beach getaway. I'd like to have a relaxing time and avoid flare-ups. What should I know before travelling?

Enjoy the sun. In the right situation, sunning can help psoriasis. But since too much sun can be dangerous, it's important to be sun smart: use a high factor sunscreen and limit your exposure by wearing protective clothing and shades. "UVA and UVB rays are outstanding for psoriasis," says Dr Wechsler. Work with your doctor to determine how long you should be in the sun.

Seek shade. If you're prone to scalp psoriasis, the pressure of a hatband may traumatise the skin and bring it on, Dr Wechsler says. Use a beach umbrella instead.

CHAPTER ELEVEN: MIRROR, MIRROR

FASHIONABLY SMART

"I open my closet for something to wear, but everything seems like it's from the 1990s. I need clothes that feel good against my skin, don't irritate my psoriasis, and look fashionable too. Time to go shopping. As I browse the clothes racks, a salesperson walks up to me and asks, 'What kind of fabrics do you have in mind?'"

Q+A

Q: What type of clothing patterns can best hide plaques?

A: Choose multicoloured clothing and patterns such as herringbones and stripes. Avoid dark, solid colours, which do not hide flakes as well, says Alice Speight, Director of a college of cosmetology.

Choose soft fabrics. “Clothing made from soft cotton feels soothing to your skin and doesn’t chafe,” says Dr Abby S. Van Voorhees, Associate Professor of Dermatology and Director of a psoriasis and light therapy treatment centre . Scratchy fabrics, such as some synthetics and wool, have knotty weaves that can irritate plaques.

Remember to breathe. Because perspiration can aggravate psoriasis symptoms, look for fabrics that “breathe” to allow evaporation, Dr Van Voorhees says. Look for new, breathable clothing that can be soft but also washable and moisture-wicking.

SALON TIME

It's time for some salon pampering, so I scheduled an appointment at a high-end salon for a haircut, manicure, and pedicure. I wanted to describe a new, carefree hairstyle, but didn't know what to tell the hairstylist. What should I say?

Think about length. Although having psoriasis shouldn't dictate the length of your hair, shorter hair may make it easier to apply topical medicines to your scalp, says Dr Steven R. Feldman, Professor of dermatology, pathology, and public health sciences. "Using topical scalp treatments requires separating sections of hair to reveal the scalp to apply the medication, so shorter may help."

PERSONAL STRATEGIES

SHAMPOOS.

Some over-the-counter shampoos are designed for people with psoriasis, such as those containing tar or salicylic acid.

PERSONAL STRATEGIES

PUMP CONTAINERS.

To keep your fingers out of make-up containers, look for products with pumps. If you don't have a pump dispenser, you can apply make-up with cosmetic sponges instead of your fingers.

Comb differently. To reduce flaking onto your clothing and avoid skin irritation, don't press against your scalp when you style your hair. Use a soft-bristle brush instead of a comb. Start combing about an inch from your scalp. Mention this tip to your hairstylist as well. He or she will appreciate knowing how to better serve you – and possibly others with psoriasis.

Go easy. "It's possible to develop psoriasis in another area if you traumatise the skin," says Dr Feldman.

Check for mineral ingredients. New, powdered mineral make-up feels light on the skin, covers well, and is applied with large brushes, which are better for your skin, says Alice Speight, Director of a cosmetology college. "You could also consider having a make-up artist apply airbrush make-up for a special occasion. It wears well and looks good in photographs."

APPLYING MAKE-UP

I'm supposed to be in a wedding party this weekend, and I'm just getting over a flare-up on my arm. I still have some obvious flaking. I want to look my best, so what kind of make-up will help?

Choose sensitive skin products. Look for "products made for sensitive skin, which tend to treat your skin more gently," says Dr Van Voorhees. You may also want to try make-up specially designed to hide blemishes. Ask your doctor for advice on skin products.

BY THE NUMBERS

24.

Hours to wait after a patch test to see if you're sensitive to a skin product. If you don't know whether you're sensitive to a product, do a patch test on a small area of your skin: Apply a dab of the product to your inner arm or behind an ear. Check the area a day later for redness or irritation.

CHAPTER TWELVE: COMFORTABLE IN MY OWN SKIN

PSYCHING MYSELF UP

“As soon as I had my first psoriasis flare-up, my personality began to change. I used to be outgoing – a real social butterfly. Now I’m sometimes withdrawn and introverted. What can I do to keep this condition from getting the best of me?”

PERSONAL STRATEGIES

POSITIVE THINKING.

Maybe you have an inner voice that tells you how bad or ugly you feel or overemphasises the importance of how others look at you. Instead, change the tune of that inner voice by running through a list of your good qualities and of all the people who like you.

Don't compare. You may feel like you have the short end of the stick if you compare yourself with people who don't have psoriasis, says Dr Julie Nelligan, who is affiliated with a centre for psoriasis and psoriatic arthritis. "But no matter how people may look at you, they're dealing with their own insecurities, too, even if you can't see them."

Be nice to me day. We live in a busy culture and are often so preoccupied that we forget to care for ourselves. Consequently, we don't eat well, don't buy ourselves nice things, and have problems taking time off to relax and do things we enjoy, says Dr Nelligan. But when you take care of yourself, you're reminded that you're worth it. So go shopping, take a walk at lunch, read a good book, or enjoy a hobby.

WHEN STRESS HAPPENS

Ever since my psoriasis diagnosis, I've either become so worked up with worry or so sad that I spend the whole day on the couch. I need help, but where do I start?

Try self-help. While there's no definitive proof that exercise helps alleviate psoriasis, many people with the condition believe that as stress increases, their psoriasis gets worse. By reducing stress through exercise, psoriasis may get better. To deal with stress, learn relaxation exercises, such as deep breathing, progressive muscle relaxation, and yoga, says Dr Nelligan. Engaging in fun activities and improving your diet can also help you feel better, although that is easier said than done.

Seek a professional. Talk with your doctor about how to best manage stress. If you feel depressed and it's interfering with your life, seek help from a mental health professional.

QUICK TIP

Create a journal in which you focus on the positive. Create lists of moments, things, and people that you're grateful for having in your life. You may find that your list and notes will fill many pages.

Q+A

Q: How can I think more positively about my psoriasis?

A: When you think back on some difficult situation you've lived through, you'll remember that you've gotten through all of them. Focus on your past successes to see you through.

ON THE PLUS SIDE

I used to feel more in control of my life. Now that I have psoriasis, I've been preoccupied by it. If I want to go to the beach, I talk myself out of it by thinking everyone will see my skin. What can I do to break this pattern?

De-stress by moving on. A positive mental attitude buffers you from stress, which can trigger a psoriasis flare-up. "Instead of thinking about how bad a problem is, look for solutions and keep moving forward," says Dr Nelligan. "A good outlook can also help you make and keep friendships because all of us tend to be more attracted to positive people."

"Don't believe what your eyes are telling you. All they show is limitation. Look with your understanding, find out what you already know, and you'll see the way to fly." – **Richard Bach**

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from experts who know how to help.