

Psoriasis handout

Psoriasis is a chronic, inflammatory disease of the skin associated with familial involvement in about 40% of the cases. It affects about 2-3 % of the European population and occurs in both sexes at any age but most frequently in the second-third decade. The two most significant groups can be defined as follows:

Type I.: early onset (between the ages 12-16), it usually correlates with more severe disease

Type II: occurs in the middle ages, easier to treat, rare relapse

The clinical features of psoriasis vary greatly from patient to patient. In the development of the clinical picture genetic and environmental factors play a key role.

Due to the unexplained nature of the pathological process and the uncertainty of the selective therapeutic targets, the final therapy of the disease has not been solved yet. Thus patients need periodic therapy led by dermatologist (in case of joint side-effects rheumatologist) through their life and continuous skin care. Except the mildest cases patients need clinical therapy as well once a year. The possible therapies vary from ointments through different light-therapy to systematic drugs and lately to biological treatments. During the therapy planning many different views should be taken into consideration: age, anticipatory side-effects, type of illness, combinations of therapy modalities are more effective and cause less side-effect than monotherapy.

Spa-therapy is among the oldest treatments. Bath cleans the skin, removes the rest of the ointments. It can be used to take away scales of the skin, adding antiseptic additive can treat inflammations and can be hydrating. After baths the drug concentration of the ointments and the cumulative dose ultraviolet light can be reduced.