

Psychological Aspects of Psoriasis

A) Stress and Psoriasis

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ABSTRACT

Objectives: To assess the impact of psychological stressful events upon onset and course of psoriasis and impact of psoriasis on patients' psychological condition. **Subjects and Methods:** Sixty psoriasis patients were selected among attendants of outpatients clinic, Dermatology and Venereology Department, Sohag university and 30 healthy age- and sex-matched subjects served as a control. **Results:** Exposure to stressors was significantly more among psoriasis patients (51.7%) than control subjects (26.7%). Exposure to stressors was significantly more among psoriasis patients with progressive psoriasis (64.5%) than those who had stationary course (35.5%). Prevalence of psychiatric disorders was significantly higher among psoriasis patients (70%) than control subjects (13.3%). Depression was the most prevalent psychiatric disorder (61.7%) followed by anxiety (48.3%) and somatoform disorders (13.3%). Prevalence of different psychiatric disorders is higher among patients with severe psoriasis than those with moderate or mild psoriasis. However, differences were not statistically significant. **Conclusions:** This study supports the opinion that psoriasis is a psychosomatic disease and that occurrence of stress before its onset is present in many cases. Patients with psoriasis may have higher levels of psychiatric disturbance than general population. Course of the disease may be affected by exposure to stressors. However, severity of the disease may have no effect upon prevalence of psychiatric disorders. **Recommendations:** Dermatologists should consider the patient as a "whole", rather than just what is visible on the skin. An empathic and supportive relationship should be kept with the patient. A Dermatology-psychiatric clinic must be established as it has proved to be a useful way of introducing dermatologists to the psychiatric aspects of their effects, and vice versa.

Introduction

Psychosomatic medicine is an area of scientific investigation concerned with the relation between psychological factors and physiological phenomena in general and disease pathogenesis in particular (Fortune et al, 1998). At least one third of the patients seen in dermatology clinics present with a complaint that involves a significant psychological component (Koo, 1998). Many psoriatic patients have said or felt that while psoriasis is a disease that does not kill you like cancer; it also does not let you live (Nickoloff, 1991). The importance of psychosomatic factors in dermatologic disorders is well recognized (Koo and Pham, 1992), it has been estimated that in at least one third of dermatology patients, effective management of the skin condition involves consideration of the associated emotional factors (Savin and Cotterill, 1992). Psoriasis is a chronic, intractable, hyperproliferative skin disease, characterized most commonly by coalescing erythematous dry plaques, covered by abundant grayish white scales (Lebwohl, 2003). It is a multifactorial

dermatitis presumed to be determined genetically, but environmental and psychological factors can trigger the onset or the exacerbation of the disease (Simonic et al., 2000). Also there is evidence that depression and anxiety disorders can be the cause of the disease (Szunanski and Kokoszka, 2001). Since psoriasis is a chronic problem and likely to recur throughout the patients' lives, helping the patient cope with the stress of living with a chronic skin disorder, can have a direct beneficial effect on the course of the disease (Gupta et al., 1989). This work aims to assess the possible impact of psychological stressful events upon the onset and course of psoriasis and the impact of psoriasis on patients' psychological condition.

Subjects & Methods

Sixty patients with psoriasis were selected among attendants of outpatients clinic, Dermatology and Venereology Department, Sohag university and 30 healthy age- and sex-matched subjects served as a control. An informed consent was