

CLINICAL PRACTICE GUIDELINES

JUNE 2013

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MANAGEMENT OF PSORIASIS VULGARIS



Ministry of Health Malaysia



Dermatological Society of Malaysia



Academy of Medicine Malaysia

Psoriatic Arthritis (PsA)

Clinical Practice Guidelines Management of Psoriasis Development Group

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Learning Objectives

- To highlight that joint inflammation (psoriatic arthritis) may occur with psoriasis
- To know the clinical features favouring PsA
- To know the clinical patterns of PsA

Symptoms and Signs

Inflammatory joint symptoms and signs include :

- Pain
- Early morning stiffness more than 30 minutes
- Swelling
- Inflammatory spinal pain
- Peripheral joint deformity
- Dactylitis
- Enthesitis



Clinical Features

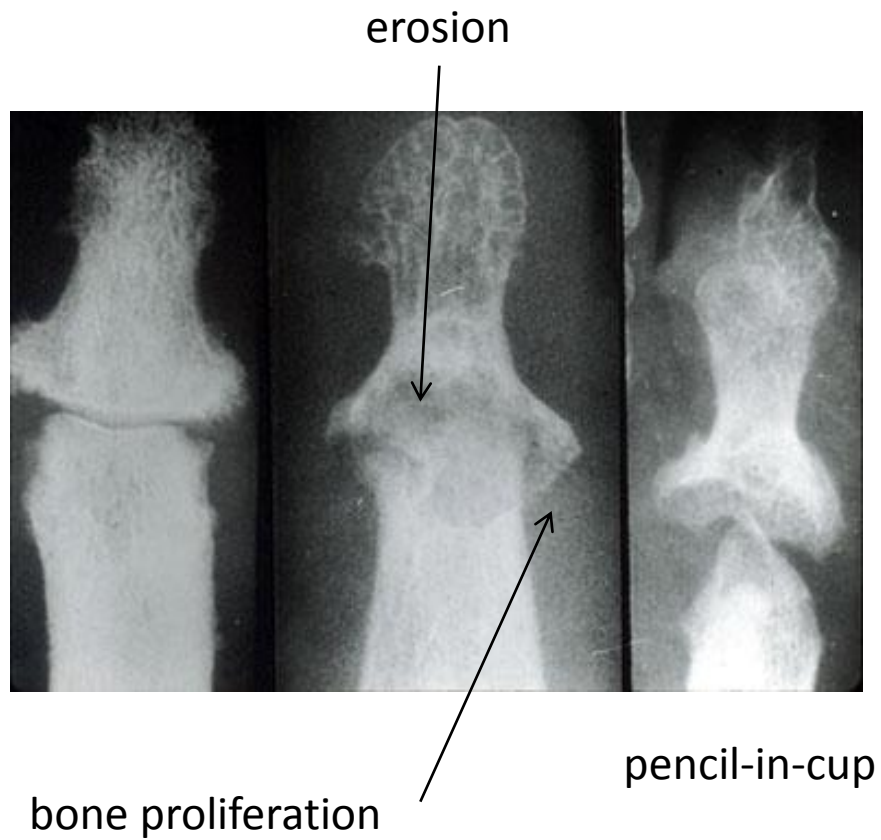
- Personal or family history of psoriasis (past or present)
- Distal interphalangeal joint (DIPJ) arthritis and asymmetrical distribution of the involved peripheral joints
- Dactylitis, enthesitis or axial skeletal involvement (past or present)
- Extra-articular manifestation (uveitis)

Investigations

- There are no laboratory investigations to confirm diagnosis of PsA
 - ESR and CRP may be helpful
 - Rheumatoid factor and anti-cyclic citrullinated peptides are usually absent
- Radiographs of hands, wrists, feet and symptomatic sites may aid diagnosis

Radiographs

- Usually normal in early disease
- Characteristic lesions include :
 - joint erosions and joint space narrowing
 - bony proliferation
 - osteolysis including 'pencil in cup' deformity and acro-osteolysis
 - ankylosis and spondylitis





Asymmetrical
syndesmophytes

Clinical Patterns

- DIPJ arthritis
- Asymmetrical oligoarthritis (less than 5 joints involvement)
- Symmetrical polyarthritis (similar to rheumatoid arthritis)
- Arthritis mutilans (deforming and destructive arthritis)
- Spondyloarthritis (including sacroiliitis and spondylitis)

Moll and Wright



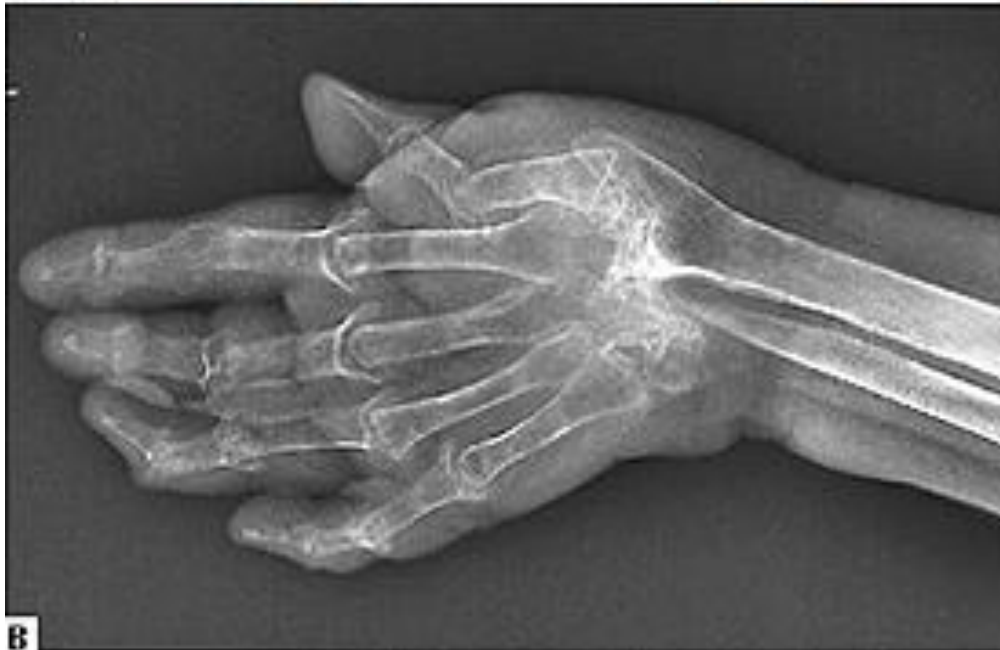
DIP joint
arthritis



Oligoarthritis



Symmetrical Polyarthritides (RA-like)



Arthritis
Mutilans

TAKE HOME MESSAGES

- Early detection of PsA is important to prevent deformities
- Regular assessment for PsA is important
- Diagnosis of PsA should be based on both clinical and radiological findings

RECOMMENDATION

- Regular assessment for early arthritis should be performed at least annually by looking for relevant signs and symptoms (Grade C)
- • Significant early morning joint stiffness lasting $>1/2$ hour
- • Joint swelling or dactylitis.
- • Spinal pain with significant early morning stiffness.