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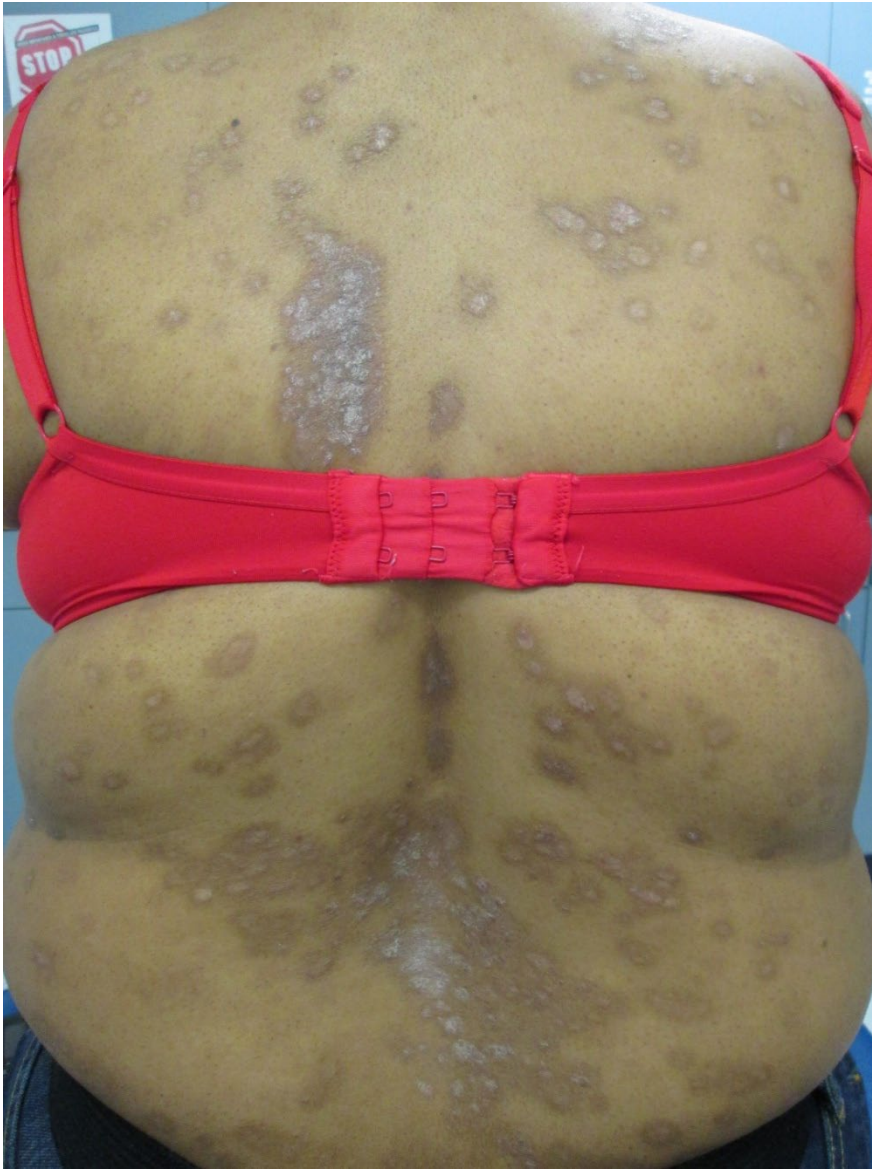
HYPERPIGMENTARY CHANGES

- TOPICAL STEROIDS
- VS
- NOVEL NON STEROIDALS

EARLY TREATMENT

- DOES IT PREVENT
HYPERPIGMENTATION ?

Improvement in psoriasis plaques and PIH with biologic therapy

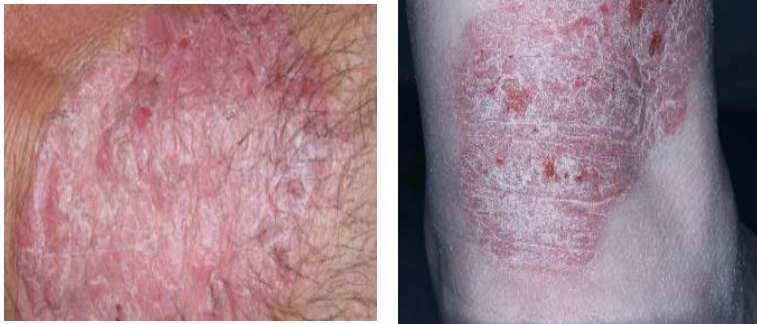


CULTURAL PREFERENCES

- HAIR PRODUCTS
- VEHICLES
- SCALP TREATMENTS

Challenges exist with managing different body areas involved in plaque psoriasis^{1,2}

Difficult-to-treat areas³



Sensitive areas¹



Intertriginous areas¹

Actual clinical trial patients at baseline



Plaque psoriasis in hidden areas is more common than you may think³

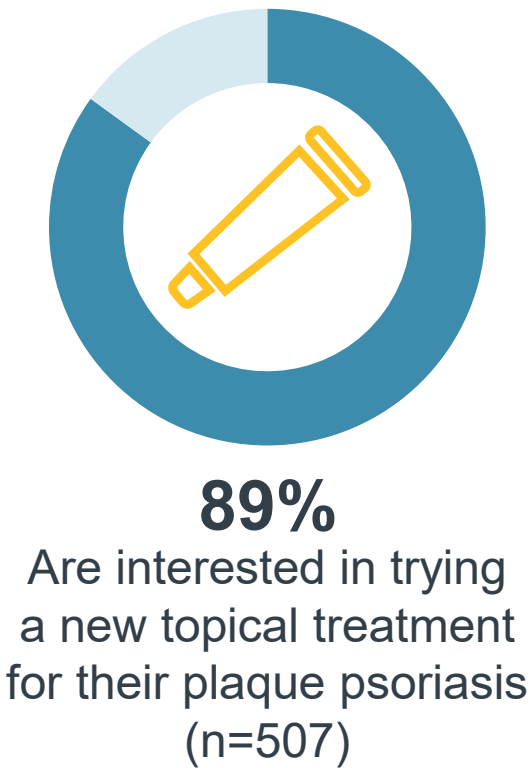
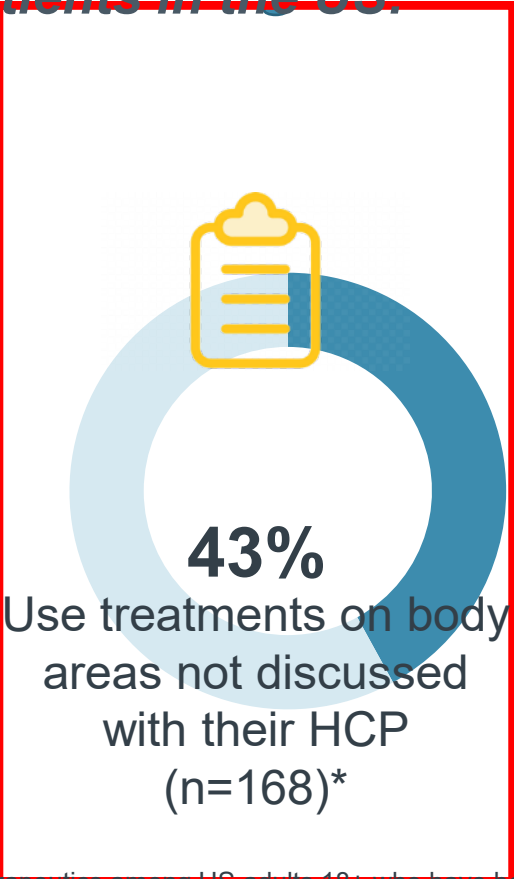
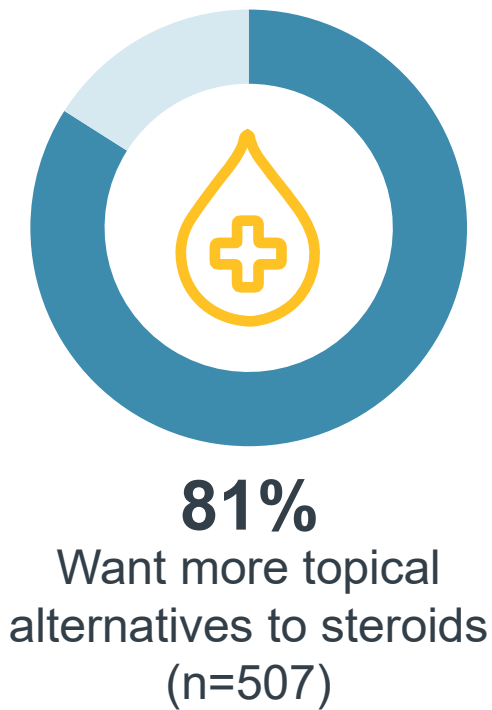
Up to 64% of patients may develop plaque psoriasis in intertriginous areas at some point throughout the course of their disease^{*4}

*This survey was conducted online by The Harris Poll on behalf of Arcutis Biotherapeutics among US adults 18+ who have been diagnosed with psoriasis by a healthcare provider. The survey was conducted in 2021, among 507 plaque psoriasis patients. Figures were weighted when necessary to bring the data into line with actual proportions in the population using a multi-step weighting process.

1. Dopytalska K, et al. *Reumatologia*. 2018;56(6):392-398. 2. Merola JF, et al. *Dermatol Ther*. 2018;31(3):e12589. 3. Aldredge LM, et al. *J Dermatol Nurses Assoc*. 2018;10(4):189-197. 4. Data on File. Arcutis Biotherapeutics, Inc.

Recent patient survey highlights gaps in topical treatment options

A 2021 survey of plaque psoriasis patients in the US:



This survey was conducted online by The Harris Poll on behalf of Arcutis Biotherapeutics among US adults 18+ who have been diagnosed with psoriasis by a healthcare provider. The survey was conducted in 2021, among 507 plaque psoriasis patients. Figures were weighted when necessary to bring the data into line with actual proportions in the population using a multi-step weighting process.

*For subset of patients who use different treatments for different parts of their body.

HCP, healthcare provider.
Data on File. Arcutis Biotherapeutics, Inc.



Scalp Psoriasis Nuances to Treatment

- Select treatment regimen that is compatible with patient's hair care practices
 - Less frequent hair washing frequency in women of African descent (typically once per week to once every other week)
 - Daily hair washing, especially with most prescription shampoos, is often associated with increased hair dryness and breakage; it is also very time consuming for most women of African descent due to common styling practices

Clinical trial

A calcipotriene/betamethasone dipropionate two-compound scalp formulation in the treatment of scalp psoriasis in Hispanic/Latino and Black/African American patients: results of the randomized, 8-week, double-blind phase of a clinical trial

Stephen Tyring¹, MD, Natalia Mendoza¹, MD, Melanie Appell², MD, Adrian Bibby³, BSc, Richard Foster⁴, MSc, Tiffani Hamilton⁵, MD, and Mark Lee⁶, MD

- 177 Hispanic/Latino and Black/African American subjects
- Safe, effective, and well tolerated
- Vehicle (base of hydrogenated **castor oil**, PPG-11 stearyl ether, all-rac-alpha-tocopherol, butylhydroxytoluene, and **mineral oil**) compatible with Afro-textured hair and common hair styles in AA women



Non-Topical Treatment Options for Scalp Psoriasis



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Original Article

Secukinumab improves scalp pain, itching, scaling and quality of life in patients with moderate-to-severe scalp psoriasis

Steven R. Feldman, Lawrence Green, Alexa B. Kimball , Kimberly Siu, Yang Zhao, Vivian Herrera , Judit Nyirady & Andrew F. Alexis [...show less](#)

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Non-Topical Treatment Options for Scalp Psoriasis

Efficacy and safety of apremilast in patients with moderate to severe plaque psoriasis of the scalp: Results of a phase 3b, multicenter, randomized, placebo-controlled, double-blind study



Abby S. Van Voorhees, MD,^a Linda Stein Gold, MD,^b Mark Lebwohl, MD,^c Bruce Strober, MD,^{d,e}

Charles Lynde, MD,^f Stephen Tyring, MD,^g Ashley Cauthen, MD,^h Howard Sofen, MD,ⁱ

Zuoshun Zhang, PhD,^j Maria Paris, MD,^j and Yao Wang, MD^j

Norfolk, Virginia; West Bloomfield, Missouri; New York, New York, New Haven and Cromwell, Connecticut; Markham, Ontario, Canada; Houston, Texas; Ocala, Florida; Los Angeles, California; and Summit, New Jersey

• PSORIATIC ARTHRITIS

SKIN MANIFESTATIONS USUALLY PRECEDE JOINT SYMPTOMS BY ABOUT 10 YEARS IN PATIENTS WITH PSORIATIC ARTHRITIS¹⁻⁸

UP TO 30%
OF PSORIASIS PATIENTS
may actually have
psoriatic arthritis⁵⁻⁸



- Skin symptoms occur first in ~70% of patients^{1,3,4}
- Joint and skin symptoms occur together in ~15% of patients with psoriatic arthritis^{1,3,4}
- Joint symptoms occur first in ~15% of patients with psoriatic arthritis¹⁻⁴
- Diagnosis received ≥ 2 years from symptom onset in 29% of patients with psoriatic arthritis⁸

Approximately 50% of Psoriatic Arthritis (PsA) Patients Have Joint Damage^{*,1,2}

- Up to 30% of psoriasis patients may have PsA³⁻⁵



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Note: Images are not of the same patient. The image on the right is not a real x-ray and is for illustrative purpose only.

1. Kane D, et al. *Rheumatology*. 2003;42:1460-1468. 2. Torre Alonso JC, et al. *Br J Rheumatol*. 1991;30:245-250. 3. NPF. About Psoriatic Arthritis. <https://www.psoriasis.org/about-psoriatic-arthritis>. Accessed March 25, 2016. 4. Prey S, et al. *J Eur Acad Dermatol Venereol*. 2010;24(Suppl 2):31-35. 5. Zachariae H, et al. *Acta Derm Venereol*. 2002;82:108-1136. 6. Mease P, et al. *J Am Acad Dermatol*. 2005;52:1-19. 7. Mease PJ. *Ann Rheum Dis*. 2001;60(Suppl 3):iii37-iii40. 8. Tankosic T, et al. In: Welter R, et al. *Psoriasis and Associated Arthropathy*. Waltham, Mass: Decision Resources, Inc. 2001:53-54. 9. Gladman DD. In: Isenberg DA, et al. *Oxford Textbook of Rheumatology*. 3rd ed. New York, NY: Oxford University Press. 2004:766-778.

PSA IS CORRELATED TO LARGE BSA

MYTH

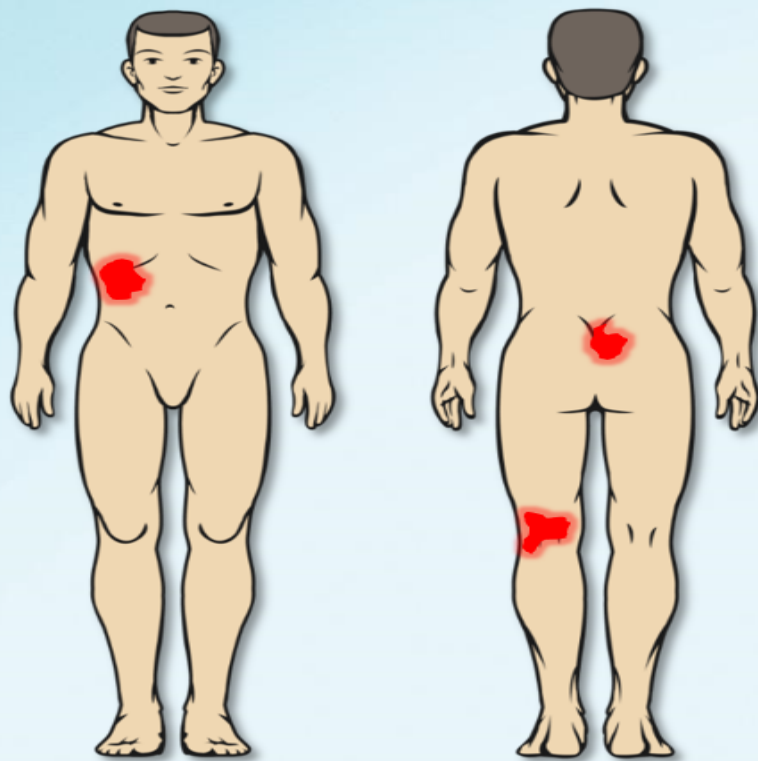
Or

TRUTH



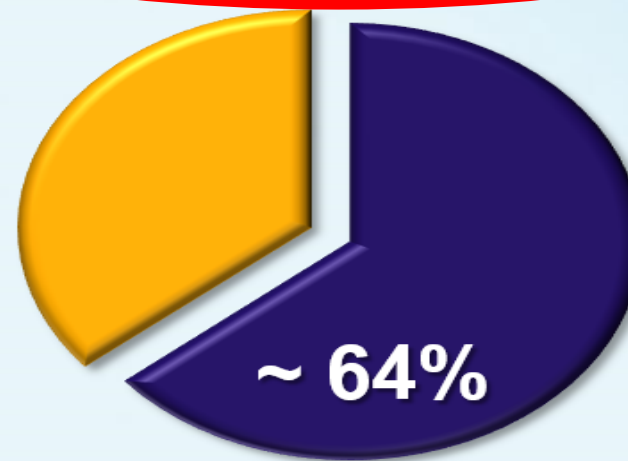


BSA Is Only Part of the Story in PsA



1% BSA is approximately the size of the palm, including the fingers¹

Q. What percent BSA involvement do you typically see in patients with PsA in your office?



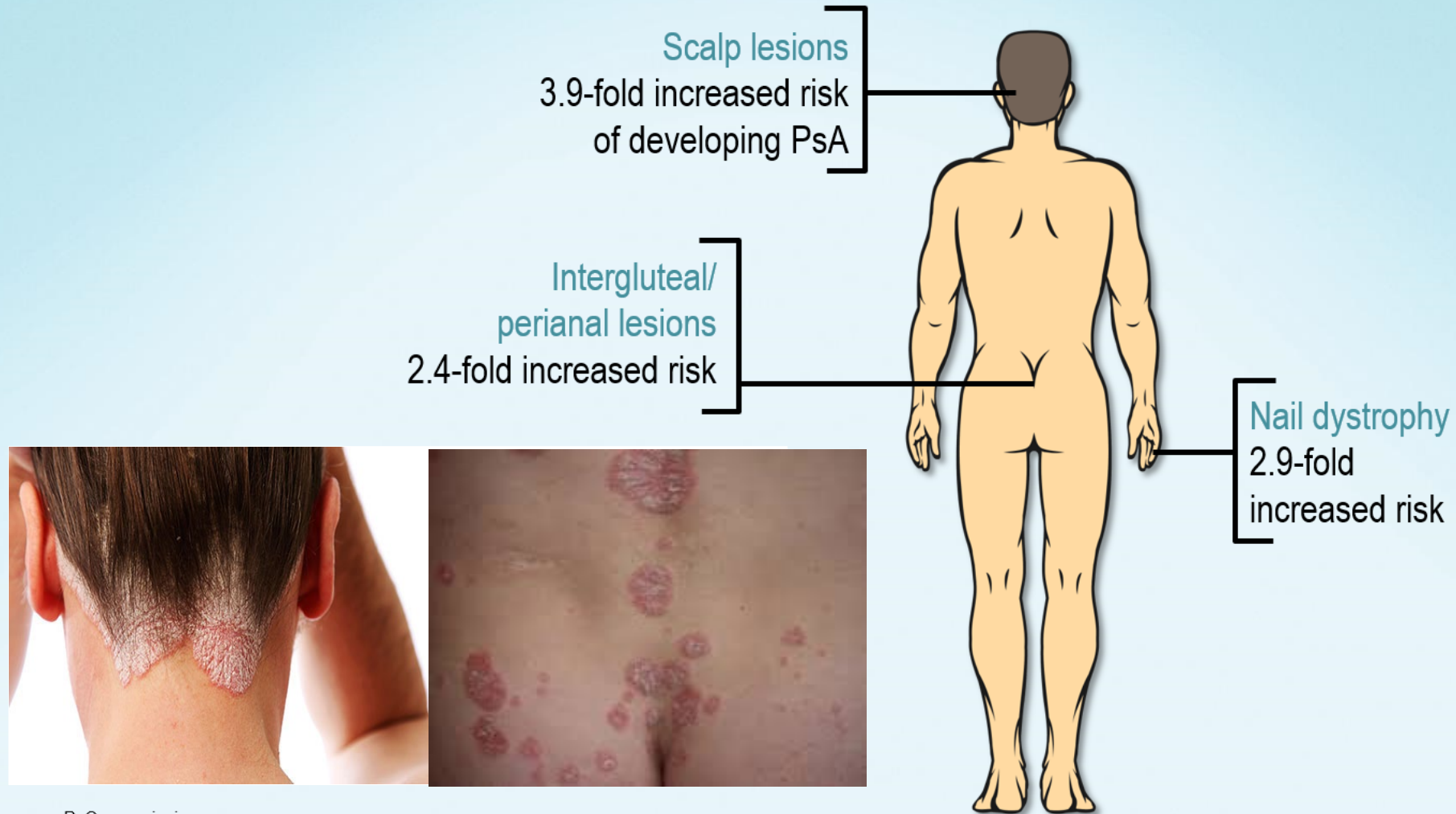
of patients with PsA have
< 3% BSA affected^{*,2}

^{*}Data from the CORRONA registry (N = 1567).

BSA = body surface area; CORRONA = Consortium of Rheumatology Researchers of North America.

1. Finlay AY. *Br J Dermatol*. 2005;152:861-867. 2. Data on file, Amgen; [CORRONA PsA SpA Report 8.2015].

Clinical Characteristics Can Predict Development of PsA in Patients With Psoriasis



PsO = psoriasis.

In a study of 1593 patients with PsO, the 57 who developed new-onset PsA were more likely to have ≥ 1 of the features of PsO shown than patients who did not develop PsA.

Wilson FC, et al. *Arthritis Rheum.* 2009;61:233-239.

GRAPPA RECOMENDATIONS

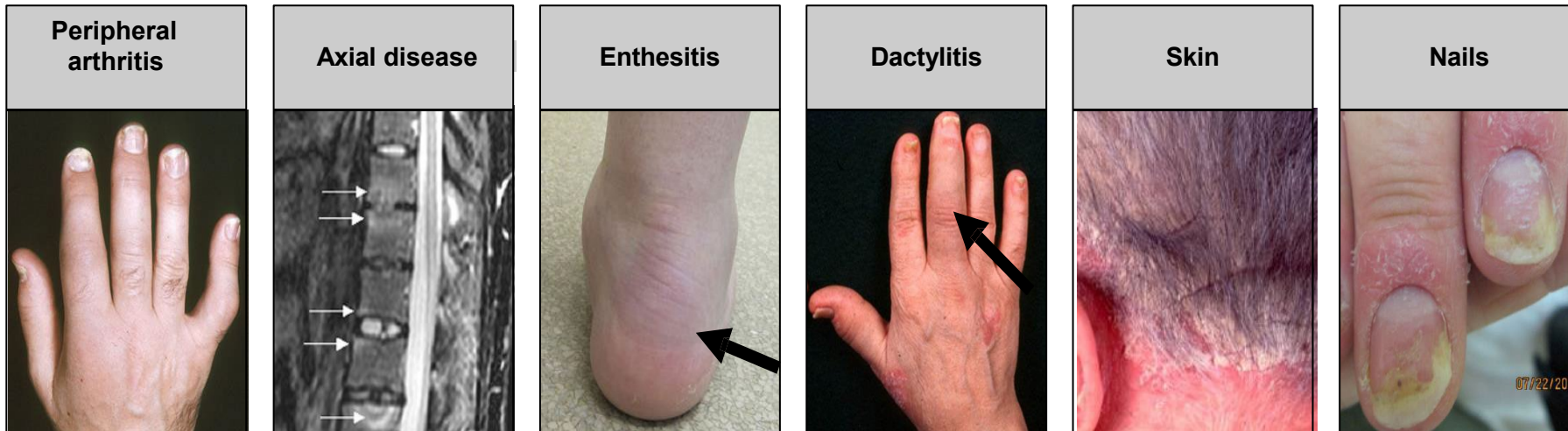


**THE GROUP FOR
RESEARCH AND
ASSESSMENT OF
PSORIASIS AND
PSORIATIC
ARTHRITIS**

Psoriatic Arthritis is a Multi-Domain Disease

- PsA can affect one or more of the six clinical domains recognized by the Group for Research and Assessment of Psoriasis and Psoriatic Arthritis (GRAPPA)

GRAPPA DOMAINS



Predictors of progression from psoriasis to PsA

Site of psoriasis	HR
Scalp	3.89
Nail	2.93
Intergluteal/perianal	2.35
Axilla/groin	1.40

<1 1–2 3–10 >10

HR, hazard ratio; PsA, psoriatic arthritis

Psoriasis incidence cohort included 1593 subjects without PsA

Gelfand JM, et al. J Am Acad Dermatol. 2005;53:573–7; Wilson FC, et al. Arthritis Rheum. 2009;61:233–9; Baran R, Sigurgeirsson B Br J Dermatol 2014;171:935-6

PsA screening tools

Screener

PASE¹

PEST²

ToPAS³

PASQ/ePASQ⁴

EARP⁵

Image

PSORIASIS ARTHRITIS SCREENING AND EVALUATION (PASE) QUESTIONNAIRE

Please circle or mark (X) YES (X) NO of the box chosen on the following 15 questions. The answers to these questions will help us better understand your symptoms. This should take about 10 minutes to complete. Thank you for your time.

Symptoms sub-scale	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I have had joint pain for most of the day	1	2	3	4	5
2. I have had joint pain for most of the week	1	2	3	4	5
3. I have had joint pain for most of the month	1	2	3	4	5
4. I have had joint pain for most of the year	1	2	3	4	5
5. I have had joint pain for most of my life	1	2	3	4	5
6. I have had joint pain for most of my life	1	2	3	4	5
7. I have had joint pain for most of my life	1	2	3	4	5
8. I have had joint pain for most of my life	1	2	3	4	5
9. I have had joint pain for most of my life	1	2	3	4	5
10. I have had joint pain for most of my life	1	2	3	4	5
11. I have had joint pain for most of my life	1	2	3	4	5
12. I have had joint pain for most of my life	1	2	3	4	5
13. I have had joint pain for most of my life	1	2	3	4	5
14. I have had joint pain for most of my life	1	2	3	4	5
15. I have had joint pain for most of my life	1	2	3	4	5

SYMPTOM SCORE (Max 75)

Add scores for questions 1-7 and write in box A.

FUNCTION SUB-SCALE

Function sub-scale	Strongly Disagree	Disagree	Neutral	Agree	Strongly Agree
1. I have had joint pain for most of the day	1	2	3	4	5
2. I have had joint pain for most of the week	1	2	3	4	5
3. I have had joint pain for most of the month	1	2	3	4	5
4. I have had joint pain for most of the year	1	2	3	4	5
5. I have had joint pain for most of my life	1	2	3	4	5
6. I have had joint pain for most of my life	1	2	3	4	5
7. I have had joint pain for most of my life	1	2	3	4	5
8. I have had joint pain for most of my life	1	2	3	4	5
9. I have had joint pain for most of my life	1	2	3	4	5
10. I have had joint pain for most of my life	1	2	3	4	5
11. I have had joint pain for most of my life	1	2	3	4	5
12. I have had joint pain for most of my life	1	2	3	4	5
13. I have had joint pain for most of my life	1	2	3	4	5
14. I have had joint pain for most of my life	1	2	3	4	5
15. I have had joint pain for most of my life	1	2	3	4	5

FUNCTION SCORE (Max 40)

Add scores for questions 1-15 and write in box B.

TOTAL PASE SCORE (Max 75)

Add scores in boxes A and B and write in box C.

Have you ever had a swollen joint (or joints)?

Has a doctor ever told you that you have arthritis?

Do your finger nails or toe nails have holes or pits?

Have you had pain in your feet?

Have you had a finger or toe that was completely swollen and painful for no apparent reason?

In the drawing below, please tick the joints that have caused you discomfort (i.e., stiff, swollen or painful joints).

1. Have you ever had a skin rash consisting of red, inflamed, scaly, or itchy areas particularly on the elbows, knees or ankles or around the joints?

2. Have you ever noticed any of these changes in your fingernails?

3. Have you ever noticed any of these changes in your toenails?

4. Have you ever noticed any of these changes in your toenails?

5. Have you ever noticed any of these changes in your toenails?

6. Have you ever noticed any of these changes in your toenails?

7. Have you ever noticed any of these changes in your toenails?

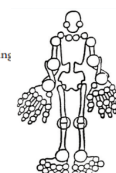
8. Have you ever noticed any of these changes in your toenails?

9. Have you ever noticed any of these changes in your toenails?

10. Have you ever noticed any of these changes in your toenails?

Question

- Have you ever thought you might have arthritis?
- Have you ever had a swollen joint?
- Has a doctor ever told you that you have arthritis?
- Are your joints stiff when you wake up in the morning?
- If yes to #4, how long does the stiffness last?
- Have you ever had back troubles?
- Has your back ever been stiff in the morning?
- Do your fingernails or toenails have holes or "pits"?
- Are your nails abnormally thick?
- Does anyone in your family have arthritis?
- If yes to #10, who?



Question	Yes	No
Do your joints hurt?	1	0
Have you taken anti-inflammatory more than twice a week for joint pain in the last 3 months?	1	0
Do you wake up at night because of low back pain?	1	0
Do you feel stiffness in your hands for more than 30 minutes in the morning?	1	0
Do your wrists and fingers hurt?	1	0
Do your wrists and fingers swell?	1	0
Does one finger hurt and swell for more than 3 days?	1	0
Does your Achilles tendon swell?	1	0
Do your feet or ankles hurt?	1	0
Do your elbow or hips hurt?	1	0

The final 10 items of the EARP questionnaire were chosen after the psychometric analysis. Each positive answer is scored as one, and the final score is calculated by summing the positive answers.

10 minutes:
15 questions
(1–5) scale

1 minute: 5 yes/no questions
with a detailed joint diagram

7 minutes: 12 yes/no
questions with pictures of skin
and nail symptoms

6 minutes: 10 yes/no
questions with a detailed joint
diagram

2 minutes: 10 yes/no questions

Positives

Can distinguish between
symptoms of PsA and
osteoarthritis

Very quick and easy to
complete

Developed to screen for both
PsO and PsA

Specific joint diagram.
Accessible through an app and
a website

Newer test developed for early
detection of PsA for people
diagnosed with PsO

Relevant?

Involves a complex scoring
system

Does not include skin or spinal
symptom questions

Not designed for early
detection of PsA (questions
require
3 months of symptoms)

Does not include skin
symptom questions

Does not include skin symptom
questions

EARP, Early Arthritis Psoriatic patients; PASE, Psoriatic Arthritis Screening Evaluation; PASQ/ePASQ, electronic/Psoriatic Arthritis Screening Questionnaire; PEST, Psoriatic Epidemiological Screening Tool; PsO, psoriasis; ToPAS, Toronto Psoriatic Arthritis Screening Questionnaire

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