

This is an Open Access document downloaded from ORCA, Cardiff University's institutional repository: <https://orca.cardiff.ac.uk/id/eprint/150343/>

This is the author's version of a work that was submitted to / accepted for publication.

Citation for final published version:

Manolache, Liana and Finlay, Andrew Y. 2022. Should self-help interventions become routine in psoriasis therapy? *British Journal of Dermatology* 186 (6) , p. 922. 10.1111/bjd.21584

Publishers page: <http://dx.doi.org/10.1111/bjd.21584>

Please note:

Changes made as a result of publishing processes such as copy-editing, formatting and page numbers may not be reflected in this version. For the definitive version of this publication, please refer to the published source. You are advised to consult the publisher's version if you wish to cite this paper.

This version is being made available in accordance with publisher policies. See <http://orca.cf.ac.uk/policies.html> for usage policies. Copyright and moral rights for publications made available in ORCA are retained by the copyright holders.



29th Jan 2022

Should self-help interventions become a routine in psoriasis therapy?

Liana Manolache¹, Andrew Y Finlay²

¹Dali Medical, Bucharest, Romania

ORCID: 0000-0003-2357-4229

²Division of Infection and Immunity, School of Medicine, Cardiff University, Cardiff, UK

ORCID: 0000-0003-2143-1646

Funding sources: no funding involved

Conflicts of interest: AYF is joint copyright owner of several quality of life instruments. Cardiff University receives royalties from their use, AYF receives a share under standard university policy. AYF receives honoraria for presentations from Lilly and from Medscape.

Helping people with psoriasis continues to be a constant challenge for dermatologists, who may feel they carry this responsibility alone. The good news is that with the doctor-patient relationship evolving from a patient-dependency model to a shared approach in clinical decision taking, the next step is a parallel shift to shared responsibility for interventions. This change may lead to a further maturation of the doctor-patient relationship and possibly lead to even better outcomes.

Perceived stress, anxiety, depression, shame, stigmatisation and reduced quality of life (QoL) are parts of the multifaceted puzzle faced by dermatologists. Despite the hugely successful search for new mechanisms and more targeted molecules to treat severe psoriasis, the patient's personality and attitudes remain poorly understood triggers and an unexplored potential therapeutic mine.

Psoriasis not only has an economic impact¹, but also a huge influence on patient's² and family members' QoL.³ Patient's QoL could be positively influenced if patients understood their disease and if they thought that their condition could be kept under control².

Reinforcing these observations, Muftin et al⁴ examined the impact of Online Compassion-focused Self-Help for Psoriasis. Patients with psoriasis received either compassion-based self-help (n=65) or mindfulness-based self-help (n=65), in a randomised controlled trial (RCT), over four weeks. The “compassionate self-help” was designed to strengthen compassionate intention and competencies. The mindfulness self-help aimed to cultivate a soothing-breathing rhythm. There were written materials and audio MP3 with exercises: participants preferred daily audio use. Both interventions resulted in modest but significant reductions in shame and improvements in QoL. Progress in evaluating psychological interventions in dermatology, as in other specialties, has been constrained by the lack of high quality RCTs and Muftin et al⁴ are to be congratulated on tackling this issue with a rigorous scientific method.

Psoriasis requires a multi-disciplinary approach, ideally with a psychologist being part of the team and access to psychiatry advice. An audit⁵ of the provision of psoriasis therapy in hospitals in the UK and Ireland hospitals identified the persisting lack of psychological support for patients, despite longstanding recognition of this need.

Self-help intervention can be considered a first step approach for individuals with mild levels of distress, motivating patients to seek further psychological interventions, as necessary⁴. Although their potential has not been exploited, this kind of intervention could become a first line approach, with added cost-effectiveness benefit⁴. Beyond the statistical analysis of management approaches, the inner personality strengthening flowing from some psychological interventions is a subtle, continuous process that is hard to measure, but sometimes with real impact on a patient’s life. Encouraging data are emerging from the 26 to 45 years old age group, especially from females⁴, who tend to be more active, flexible and open-minded to such approaches.

Psoriasis is not usually considered as an emergency and during the pandemic many patients had no access to face-to-face consultations, causing aggravation and with evidence of a tendency to delay or suspend⁶ therapy, in particular biologics. As online consultations became second nature for most people, audio/video interventions developed by specialists should be encouraged to support patients becoming more balanced, and to reduce their stress and increase their coping,

By reducing patients’ sense of helplessness and by empowering them as part of their recovery, self-help interventions could become integrated as basic therapeutical approaches in psoriasis.

References:

1. Vanderpuye-Orgle J, Zhao Y, Lu J et al. Evaluating the economic burden of psoriasis in the United States. *J Am Acad Dermatol* 2015 ;72:961-7.
2. Solmaz N, Ilhan N, Bulut HM. The effect of illness perception on life quality in psoriasis patients. *Psychol Health Med* 2021; 26:955-967.
3. Sampogna F, Finlay AY, Salek SS et al. Measuring the impact of dermatological conditions on family and caregivers: a review of dermatology-specific instruments. *J Eur Acad Dermatol Venereol* 2017; 31:1429-1430.
4. Muftin Z, Gilbert P, Thompson A. A randomised controlled feasibility trial of online compassion-focused self-help for psoriasis. *Br J Dermatol* 2022; (in press)
5. Smith SP, Mohd Mustapa MF, de Berker D. The landscape of psoriasis provision in the UK. *Clin Exp Dermatol* 2020; 45:1040-1043.
6. Bernardini N, Skroza N, Spagnoli A et al. How lockdown measures, during COVID-19 pandemic, matter on psoriatic patient's perception: Study on 600 patients on biologic therapy. *J Infect Public Health* 2021; 14:878-882.