

MEDICAL BREAKTHROUGHS **RESEARCH SUMMARY**

TOPIC: PSORIASIS: BRUSH AND FLOSS YOUR WAY TO BETTER SKIN?
REPORT: MB #4801

WHAT IS PSORIASIS: Psoriasis is a skin disease that causes red, itchy scaly patches, most commonly on the knees, elbows, trunk, and scalp. It is a common, long-term (chronic) disease with no cure. It tends to go through cycles, flaring for a few weeks or months, then subsiding for a while or going into remission. Psoriasis can last a lifetime and is caused by a problem with the immune system. In a process called cell turnover, skin cells that grow deep in the skin rise to the surface. Normally this takes a month but with psoriasis, it happens in just a few days because the cells rise too quickly. There are several types of psoriasis, including plaque psoriasis which is the most common form, that causes dry, raised, red skin patches (lesions) covered with silvery scales, Nail psoriasis affects fingernails and toenails, causing pitting, abnormal nail growth and discoloration, Guttate psoriasis primarily affects young adults and children and is usually triggered by a bacterial infection such as strep throat, Inverse psoriasis mainly affects the skin folds of the groin, buttocks, and breasts. Pustular psoriasis is a form of psoriasis that causes clearly defined pus-filled lesions that occur in widespread patches (generalized pustular psoriasis) or in smaller areas on the palms of the hands or the soles of the feet, Erythrodermic psoriasis can cover your entire body with a red, peeling rash that can itch or burn intensely, and finally Psoriatic arthritis causes swollen, painful joints that are typical of arthritis.

(Sources: <https://www.mayoclinic.org/diseases-conditions/psoriasis/symptoms-causes/syc-20355840>, <https://wexnermedical.osu.edu/mediaroom/pressreleaselisting/ohio-state-study-finds-oral-health-diet-may-improve-psoriasis>)

DIAGNOSING AND TREATING PSORIASIS: The doctor will make a diagnosis by asking questions about your health and examining your skin, scalp, and nails. The doctor might take a small sample of skin (biopsy) for examination under a microscope to help determine the type of psoriasis and rule out other disorders. Psoriasis treatments aim to stop skin cells from growing so quickly and to remove scales. Options include creams and ointments (topical therapy), light therapy (phototherapy), and oral or injected medication.

(Source: <https://www.mayoclinic.org/diseases-conditions/psoriasis/diagnosis-treatment/drc-20355845>)

ORAL HEALTH AND DIET CAN IMPROVE PSORIASIS: According to a study by dermatologists at The Ohio State University Wexner Medical Center, dental health and diet may have an impact on the development and severity of psoriasis. Researchers created a specially designed lifestyle and diet questionnaire that was administered to 265 patients at Ohio State's dermatology clinics. The study surveyed 100 patients with psoriasis and 165 without the disease. The study showed poor dental and oral health, in particular gum pain, was associated with those who had psoriasis. "Patients who had more severe psoriasis were more likely to report that their gums were in worse condition than patients who didn't have mild to moderate psoriasis in the first place," said Benjamin Kaffenberger, MD, Physician and Associate Professor of Dermatology at The Ohio State University. "And patients who had higher fruit consumption reported less significant psoriasis, indicating fruit and potentially fresh foods may be an associated protective factor." The study also reinforced data from previous studies that found family history of psoriasis, smoking and obesity were significant predictors of psoriasis.

(Source: <https://wexnermedical.osu.edu/mediaroom/pressreleaselisting/ohio-state-study-finds-oral-health-diet-may-improve-psoriasis>)

FOR MORE INFORMATION ON THIS REPORT, PLEASE CONTACT:

AMY COLGAN

614-425-0424

AMY.COLGAN@OSUMC.EDU

If this story or any other Ivanhoe story has impacted your life or prompted you or someone you know to seek or change treatments, please let us know by contacting Marjorie Bekaert Thomas at mthomas@ivanhoe.com