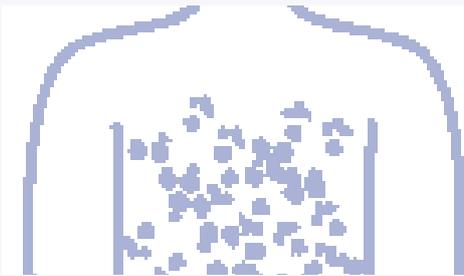


my psoriasis

support programme

my psoriasis is a support programme developed by **talkhealth** to help you understand more about your psoriasis and to support you with a weekly email of tips and information. We hope this support programme will enable you to understand more about psoriasis generally, treatment and self care options, and hopefully help you to better manage your psoriasis.

A common skin condition



Psoriasis is a common skin condition, which affects 2.8% of the UK population. It can affect people of all ages and at any time in their life. Psoriasis is a chronic skin condition, which can wax and wane throughout life. It is caused by the skin cells replacing more quickly than usual, which results in patches of dry, red skin covered with silvery scales (often referred to as plaques). Some people may also find these patches are sore or itchy.

Psoriasis is more than a skin disease; it is a complicated immune disease, which manifests in the skin and joints. Some people can have mild psoriasis and for others it can be a severe and debilitating condition for life.

There are many links with other chronic conditions, which we will look at, such as psoriatic arthritis and other co-morbidities later in the programme.

Cause of psoriasis and genetics

The actual cause of psoriasis is not fully understood but there are strong genetic links. Genetic research has shown that Type I psoriasis is hereditary, strongly HLA (the human gene coding system) associated with early onset, and more likely to be severe. Type II is sporadic, HLA unrelated, of late onset and often mild to moderate. **Investigation into families looking at psoriasis inheritance shows that several genes are responsible, rather than one specific gene.** However, psoriasis may often skip generations, so you may find you have inherited psoriasis from a grandparent rather than your parents.

There are several different types of psoriasis, we will look at these next week.





How does psoriasis affect you?

Psoriasis is a visible skin condition, which can have a negative impact on body image for some people. This can affect quality of life and for some people with psoriasis, confidence and self-esteem can be affected too. There is a known link between the severity of psoriasis and stressful life events, which can be responsible for psoriasis flare-ups. Depression and anxiety can also worsen psoriasis and cause resistance to treatment. Psoriasis is a very individual condition and coping mechanisms will vary. However, it is very important to be aware of the effects of psoriasis on mental as well as physical health. We will discuss this topic in week 10.

week 1:



Treating the mind and the body

I have severe eczema and psoriasis. When it's particularly bad my skin bleeds and sheds, I'm itchy all day and my skin sheds on my clothes which makes me really self-conscious. My ears shed and I need to get my ears cleaned out by the doctor every year where the debris blocks my ear canals. I've suffered like this for many years, and now I have been told I have psoriatic arthritis too. I decided I'd had enough and tried to see if diet affected my condition. I experimented for 3 months. Went to see GP about my arthritis and showed her my skin. She was shocked. She asked if my dermatologist had started me on some new drug trials. After trying the new treatment it almost completely cleared my skin. My psoriasis massively reduced. The only trouble is I really have to stick to a diet whereby I eat things which are kind to my skin and totally avoid those which exacerbate my condition. Coincidentally, the diet for my skin is also helping my arthritis and my blood pressure is reduced so I believe I've found a good balance. It's not always easy, I have to think before I plan trips etc, and I've also had to cut down on some things which I enjoyed, but the trade-off is worth it. It's taken me 50 years to believe this but in my case it's true, you are what you eat!

[Read more about Martyn and others living with psoriasis here.](#)

next week: *Types of Psoriasis*

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