

Transcript Details

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Treating PsA in a Pandemic: Recommendations from the COVID-19 Task Force

Announcer:

You're listening to ReachMD, and this is *Beyond Skin Deep: Impacts of Psoriatic Arthritis*, sponsored by Lilly. Your host is Dr. Matt Birnholz.

Dr. Birnholz:

Welcome to *Beyond Skin Deep: Impacts of Psoriatic Arthritis*. I'm Dr. Matt Birnholz, and on this program, we're going to walk through some of the latest recommendations for treating patients with psoriatic arthritis amid the COVID-19 pandemic.

This worldwide health crisis has made every area of medicine reconsider what's essential. With psoriasis affecting over 7 million people in the United States, of which more than 30 percent go on to develop psoriatic arthritis, there's a continual need to assess and reassess which treatments are safe to maintain, and which should be withheld to keep any additional risk of COVID-19 at bay. Those are the main considerations the National Psoriasis Foundation's COVID-19 Task Force set out to address.

The task force conducted a thorough review of research in the dermatology, rheumatology, gastroenterology, and infectious disease specialties relating to COVID-19 with the goal of developing some guidelines and best practices for psoriasis care based on the most current research available.

A collaboration of researchers from 17 institutions across the U.S and Canada led to 22 new recommendations on how to best manage psoriasis and psoriatic arthritis during this pandemic.

One of the pillar statements coming from these guidelines advised that treating patients with psoriasis and psoriatic arthritis alone, in the absence of other risk factors, did *not* meaningfully increase a patient's risk of acquiring COVID-19. Although coronavirus infection *could* exacerbate a patient's psoriasis or psoriatic arthritis symptoms, the task force didn't find sufficient evidence to warrant interrupting or altering treatments. However, for psoriatic arthritis, it *was* recommended that chronic systemic corticosteroid treatments be avoided when possible under normal circumstances.

Another update that could change the way patients and clinicians navigate through this unprecedented time is the recommended adoption of shared decision making. This is an intuitively familiar but often underutilized care paradigm putting patients and clinicians in closer partnership to consider how beneficial certain treatments may be, how extensive the skin and/or joint disease activity is, and how patients have responded to previous therapies, all while keeping in mind each patient's underlying risk for COVID-19 alongside their capacity and access to preventive measures, such as wearing face masks, washing hands, and social distancing.

Another set of considerations within the COVID-19 Task Force guidelines concerned potential impacts of discontinuing treatment for psoriasis or psoriatic arthritis. After combing through hundreds of research publications, the Task Force determined that the risk of permanent joint damage and disability for psoriatic arthritis patients discontinuing treatment outweighed speculative benefits, particularly after the finding that patients already on treatment who became COVID-19-positive did not experience exacerbations of their disease. The recommendation followed to continue biologic or oral therapies for patients with psoriasis and/or psoriatic arthritis during the pandemic.

One other notable guideline from the task force, reflected across many other disciplines, advocated for the broader inclusion of telemedical monitoring and follow-ups for patients with psoriatic disease. This, paired with ongoing pandemic safety precautions such as physical distancing, hand washing, wearing masks, and maintaining updated flu vaccination status, were all adaptive measures to maximize treatment adherence and reduce losses to follow-up while prioritizing patient safety.

But as the medical community continues to learn more about COVID-19, this Task Force has pledged to review ongoing research and update its treatment recommendations accordingly. We'll be on the lookout for these updates to share with you as soon as we can.

For ReachMD, I'm Dr. Matt Birnholz. Find more details of this report online in the *Journal of the American Academy of Dermatology*. Thanks for listening.

Announcer:

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