Transcript Details
This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/living-rheum/delayed-diagnosis-impact-psoriatic-arthritis/70146/

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How Delayed Diagnosis Can Affect Psoriatic Arthritis Patients

Announcer:
You're listening to *Living Rheum* on ReachMD. On this episode, we'll hear from Dr. Philip Mease, who's the Director of Rheumatology Research at the Providence Swedish Medical Center and a Clinical Professor at the University of Washington School of Medicine in Seattle, Washington. He'll be discussing the impacts of delayed diagnosis on patients with psoriatic arthritis. Here's Dr. Mease now.

Dr. Mease:
A delay in diagnosis of psoriatic arthritis from onset of symptoms can be quite significant in its impact on the patient.

For example, in a study from Dublin, Ireland, we've learned that if there is a delay in diagnosis of over six months, then it has significant consequences in terms of increased disability, increased functional problems, increased destructive changes in joints, as well as a reduction in quality of life and the ability to do the things that you want to do in life. We've similarly done a study in the CorEvitas registry, which includes several thousand psoriatic arthritis patients in the United States, and have noted that if there is a delay in diagnosis of beyond a year, the patient is much less likely in the future to be able to achieve a state of what we call minimal disease activity. And then from Dafna Gladman's cohort in Toronto, we have learned that a delay in diagnosis of over two years significantly increases the likelihood of destructive joint changes.

So all of this really behooves us to make a diagnosis promptly once the symptoms arise and triage patients to a rheumatologist for optimal management if the dermatologist or primary care clinician is not fully confident that they would be able to manage the patient.

So then you may ask, why is it that there is such a delay in diagnosis? We don't see this as much with a disease like rheumatoid arthritis, for example. Part of the reason is the fact that we have no biomarker, blood test, nor imaging test that cinches the diagnosis down. In psoriatic arthritis, the patient may have very active disease, yet not have elevation of inflammation markers. So this represents a handicap right from the beginning in being able to identify the disease.

The other factor is the heterogeneity of the disease. So the fact that a patient not only may have peripheral arthritis, as in rheumatoid arthritis, but they also may have spondylitis, a back inflammation. And so sorting out whether or not the patient's back pain is due to psoriatic arthritis or simply degenerative arthritis of aging is often quite difficult. And then sometimes, the patient with psoriatic arthritis may present with just enthesitis alone.

It takes some sleuthing to recognize that these issues are going on, and that's why some of the questionnaires like the PEST questionnaire that's embedded in the National Psoriasis Foundation website to help patients with psoriasis—30 percent of whom are going to develop psoriatic arthritis—ascertain, "Might I have psoriatic arthritis, and would it behoove me to ask my dermatologist if they could refer me to a rheumatologist?"

Announcer:
That was Dr. Philip Mease talking about how a delayed diagnosis can impact patients with psoriatic arthritis. To access this and other episodes in our series, visit *Living Rheum* on ReachMD.com, where you can Be Part of the Knowledge. Thanks for listening!