

### 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/how-obesity-influences-psoriatic-arthritis-risk-and-outcomes/56533/>

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## How Obesity Influences Psoriatic Arthritis Risk and Outcomes

### Announcer:

This is *Living Rheum* on ReachMD. On this episode, we'll explore the link between obesity and psoriatic arthritis with Dr. Philip Mease. He'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. Let's hear from Dr. Mease now.

### Dr. Mease:

Having psoriasis or having psoriatic arthritis, you're more likely to be obese or overweight. This is partly genetically driven. We also know the converse: that if you are obese or overweight, you're more likely to develop psoriatic disease—both psoriasis and psoriatic arthritis—and that, if you are a psoriasis patient with obesity, you're more likely to develop psoriatic arthritis than if you have psoriasis and are not obese.

We now know, increasingly, that fat tissue in the body elaborates pro inflammatory molecules. These are called adipokines, and they have names like leptin. And these adipokines contribute to the inflammation of autoimmune rheumatic diseases like psoriasis, psoriatic arthritis, rheumatoid arthritis, and so on.

We also now know that fat cells that are from visceral fat—that is, as we become obese and have more fatty tissue around the stomach area—these fat cells can produce some of our standard pro-inflammatory molecules that we know are inherently responsible for inflammation and psoriatic arthritis. And these include cytokines such as TNF, interleukin 17, interleukin 6, and so on.

So there's a direct correlation between the presence of obesity and increased inflammation, and suffering and tissue damage that comes from that.

In a corollary way, we have learned that with reduction of weight—either through diet and exercise alone, or by doing diet and exercise and using one of the new weight loss drugs, such as one of the GLP-1 receptor agonists—that there is less likelihood of developing psoriatic arthritis if you are obese and have psoriasis and are utilizing these weight loss methodologies.

We also know that if you are obese and have psoriatic arthritis or psoriasis, that you're less likely to achieve treatment goals of minimal disease activity, low disease activity, or remission. And so counseling about weight loss has become a standard part—or should be a standard part—of disease management discussions that are held by healthcare practitioners, including rheumatologists and dermatologists.

### Announcer:

That was Dr. Philip Mease talking about why weight management matters in psoriatic disease. 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!