

HIGHLIGHTS

24th World Congress of Dermatology (WCD)

10-15 JUNIO 2019





Patrocina:







Psoriasis and inflammatory dermatosis psoriasis comorbidity biological therpies in icthyoses

Mar Llamas Velasco

Patrocina:

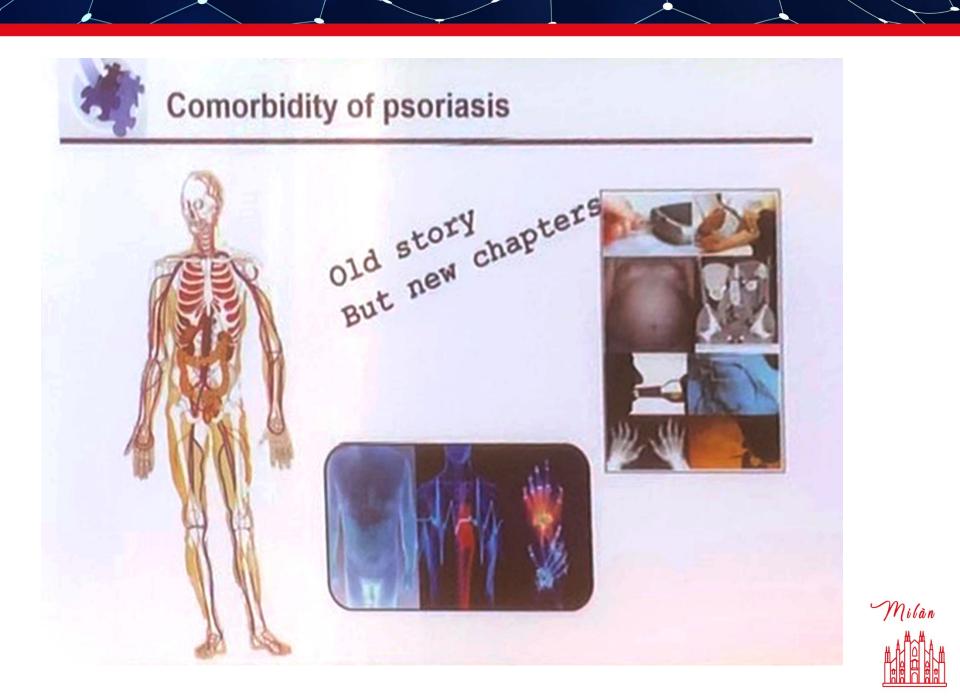




Topics to cover

- Investigation and management of psoriasis associated comorbidity. SPACE 4
- Psoriasis biological therapy: applications to other diseases.
 - Icthyoses and keratodermas

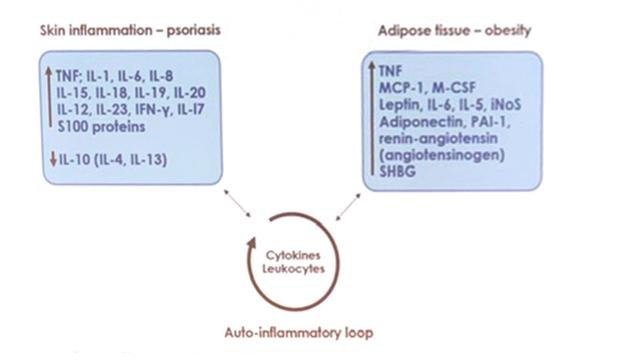




Comorbidities in psoriasis

 PSORIASIS-OBESITY-NFLV and CV risk factors as a vicious cycle of systemic inflammation.

Psoriasis and obesity: a vicious cycle of systemic inflammation

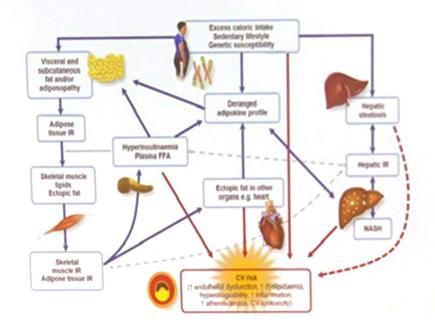




COMORBIDITIES IN PSORIASIS

- Obesity is pro-inflammatory as adipose tissue is an immune an endocrin organ.
 - Increased BMI is associated to increase of TNF, IL6 and PAI-1
 - This increase insulin resistance and platelet adherence and atherosclerosis.
- NAFLD is a risk factor for CVD
- Psoriasis is associated to NAFLD (59% vs 20-30%)







Comorbidities in psoriasis

- Lost of weight improves the treatment response of patients with psoriasis when treated with ciclosporine.
- PSO care and Biobadaderm has demonstrated BMI as risk factor for therapy withdrawal.

Incidence and Prognosis of Psoriasis and Psoriatic Arthritis in Patients Undergoing Bariatric Surgery

Egeberg A, Sørensen JA, Gislason GH, Knop FK, Skov L.

JAMA Surg. 2017 Apr 1;152(4):344-349

- 12364 gastric bypass
 - Adjusted HRs:
 - psoriasis 0.52 (95% Cl, 0.33-0.81)
 - progression to severe psoriasis 0.44 (95% Cl. 0.23-0.86)
 - psoriatic arthritis 0.29 (95% Cl, 0.12-0.71)
- 1071 gastric banding
 - Adjusted
 - · psoriasis 1.23 (95% Cl, 0.40-3.75)
 - progression to severe psoriasis 1.18 (95% Cl, 0.12-11.49)
 - psoriatic arthritis 0.53

CONCLUSIONS:

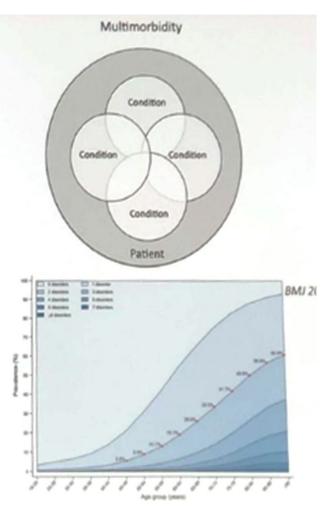
- Gastric bypass was associated with a significantly reduced risk and improved prognosis of psoriasis and psoriatic arthritis, gastric banding was not.
 - This finding may be caused by the postoperative differences in nutrient intake and/or weight loss as well as differences in the secretion of hormones that potentially modulate inflammation.



PLENARY SESSION. JONATHAN BARKER

Co- vs Multi- morbidity

- Co-morbidity:
 - Co-occurrence of additional conditions alongside a primary, or index, condition
- · Multi-morbidity:
 - Combination of chronic conditions, which could encompass diagnosed and undiagnosed physical, infectious, and mental health conditions
- WHO: 'is connected to psoriatic arthritis and increases the risk of various co-morbid diseases'





Acad Med Sci (UK) 2017

COMORBIDITIES IN PSORIASIS: REGISTRIES

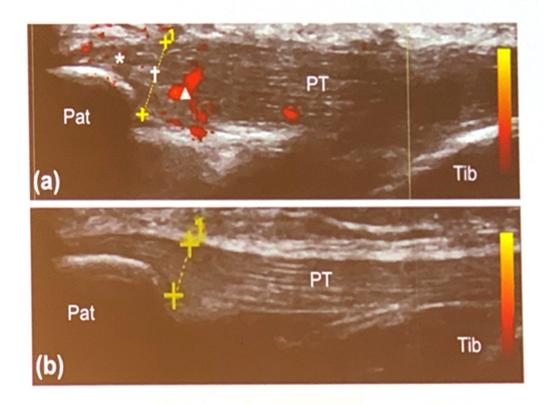
- Psobest. Registry with all systemics with 15 year-follow up. N= 10,453
- A summary of many articles of the danish psoriasis cohort showed:
 - 20% of patients with psoriasis developed at least one imid. Fivefold increased risk compared with general population.
 - Most imids occurred before the diagnosis of psoriasis
 - Psoriasis was significantly associated with having multiple imids (or 15.2; 95% ci 11.6-67 20.0)

Growing number of comorbidities A need to check critically data sources and methods A need to reference normal population



COMORBIDITIES IN PSORIASIS: PSORIATIC ARTHRITIS

Regression of Peripheral Subclinical Enthesopathy in Patients Treated With Ustekinumab for Moderate-to-Severe Chronic Plaque Psoriasis: A Fifty-Two–Week, Prospective, Open-Label Study



- 23 patients with psoriasis whose ultrasound results showed inflammatory changes were treated with ustekinumab for 52 weeks.
- With treatment, the mean inflammation scores decreased significantly by 42.2% from week o to week 24
- Entheseal structural abnormalities did not change significantly during treatment.



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Icthyoses and keratodermas (yellow 2)

Genes altered in most common Orphan Forms of Ichthyoses

- Suprabasal keratinopathies: epidermolytic ichthyosis and ichthyosis en confetti
- Netherton syndrome: Deficiency in serine protease inhibitor LEKTI
- Autosomal recessive congenital ichthyosis (ARCI): Spectrum from lamellar ichthyosis/LI (TGM1) to congenital ichthyosiform erythroderma/CIE (11 genes with biallelic variants)

What pathways translate gene change into scaling and inflammation?

With better understanding, can we target alterations in pathways towards improved and personalized therapy?





Icthyoses and keratodermas (yellow 2)

Analysis of Clinical vs. Gene Expression Patterns in Ichthyoses



Psoriasis

AD

Skin biopsy assessments

qRT-PCR of (45 markers, 21 patients) Paller et al. JACI 2017;139:152

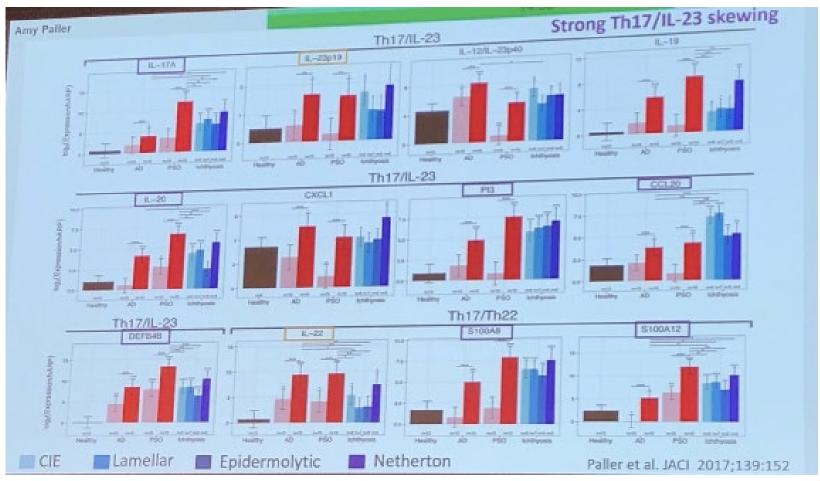
Gene arrays (47K transcripts, 29 patients) Malik et al. JACI 2019;143:604

RNA-Seq (32K genes, 60 patients: more extensive subsets) Unpublished data

Lamellar ichthyosis/LI Congenital ichthyosiform erythroderma/CIE Epidermolytic ichthyosis/EI Netherton syndrome/NS

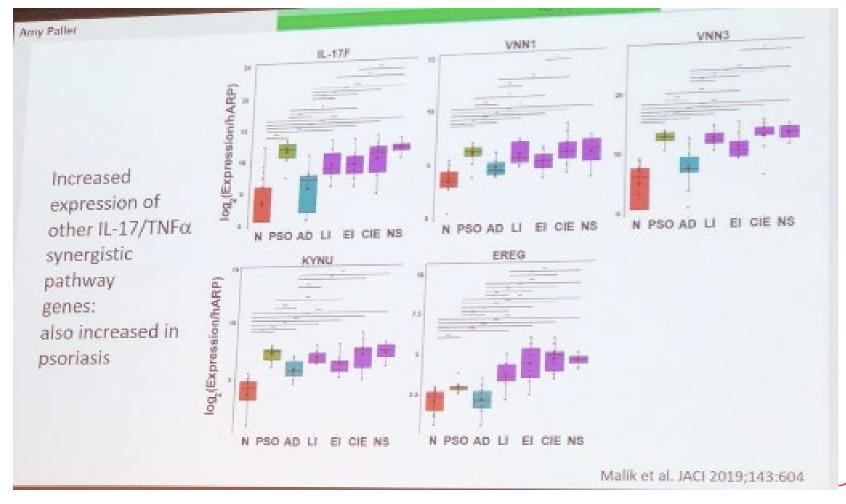


Icthyoses and keratoderma: strong th17/il23



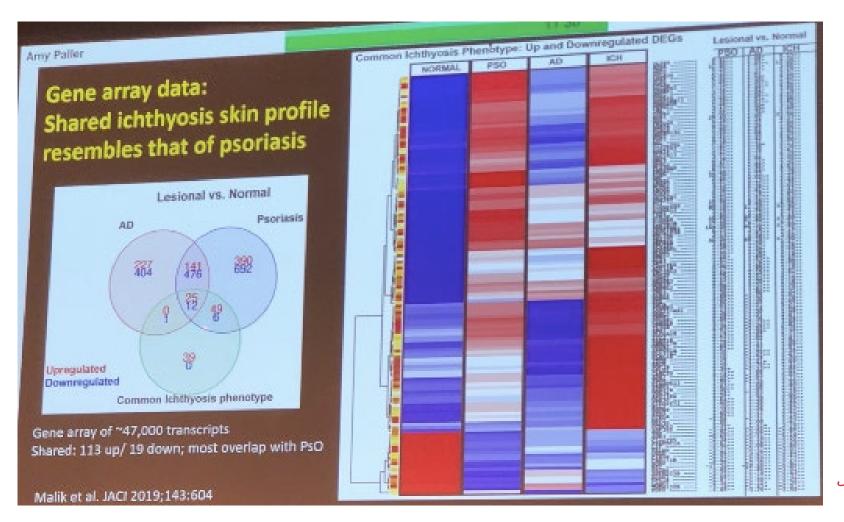


Icthyosis and psoriasis: shared partners





Icthyosis and psoriasis: shared partners





ANTI IL17, ANTIP40 Y ANTIIL23: POTENTIAL TREATMENTS FOR ICTHYOSES PATIENTS

