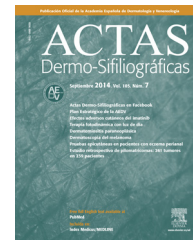




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ORIGINAL ARTICLE

Expert Recommendations on Treating Psoriasis in Special Circumstances[☆]



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Consensus

Abstract

Introduction and objectives: A great amount of information on systemic and biologic therapies for moderate to severe psoriasis is now available. However, applying the evidence in numerous clinical scenarios has engendered debate; under these circumstances, the consensus of experts is useful.

Material and methods: A scientific committee systematically reviewed the literature relevant to 5 clinical scenarios. An online Delphi survey of dermatologists with experience treating moderate to severe psoriasis was then carried out in order to shed light on questions that remained unresolved by the available evidence.

Results: Twenty-three dermatologists responded to the survey and consensus was reached on 37 (56%) of the 66 statements proposed. These results led to consensus on various clinical situations even though firm evidence was lacking. Thus, intermittent therapeutic regimens and strategies for reducing the intensity of treatment are considered appropriate for optimizing biologic treatment and reducing costs. The measurement of drug and antidrug antibody levels should be included routinely when following patients on biologics to treat psoriasis. Concomitant psoriatic arthritis or a history of cardiovascular conditions will influence the choice of biologic; in these situations, an agent with anti-tumor necrosis factor properties will be preferred. Tailored management is important when the patient is pregnant or intends to conceive; drug half-life and disease severity are important factors to take into consideration in these scenarios.

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PALABRAS CLAVE

Psoriasis;
Artritis psoriásica;
Terapia biológica;
Factor de necrosis
tumoral alfa;
Consenso

Conclusions: A combination of systematic review of the literature and structured discussion of expert opinion facilitates decision-making in specific clinical scenarios.

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Recomendaciones de expertos para el tratamiento de la psoriasis en situaciones especiales

Resumen

Introducción y objetivos: Existe gran cantidad de información sobre la terapia sistémica y biológica de la psoriasis moderada-grave. Sin embargo, pueden identificarse numerosas situaciones clínicas concretas en las que la evidencia clínica es controvertida y donde resulta útil la opinión consensuada de los expertos.

Material y métodos: Un comité científico revisó, de forma sistemática, la bibliografía disponible en 5 escenarios clínicos. En aquellas cuestiones en las que la evidencia era controvertida se llevó a cabo un cuestionario *on line* según la metodología Delphi, realizado por dermatólogos con experiencia en el manejo de la psoriasis moderada-grave.

Resultados: El cuestionario recogió opiniones de 23 dermatólogos y se alcanzó el consenso en 37 de las 66 aseveraciones propuestas (56%).

Los resultados permitieron consensuar propuestas en diversas situaciones clínicas, aun cuando la evidencia no fuese firme. Así, tanto el tratamiento intermitente como la desintensificación se consideraron estrategias adecuadas en la optimización de la terapia biológica y en la reducción de costes. La determinación de niveles de fármaco y de anticuerpos antifármaco debería incluirse rutinariamente en el seguimiento de los pacientes psoriásicos tratados con terapia biológica. La coexistencia de artropatía psoriásica y de antecedentes cardiovasculares condiciona la elección de la terapia biológica, prefiriéndose los fármacos anti-TNF alfa como primera elección. En pacientes embarazadas o con deseos de gestación la evaluación personalizada, la gravedad de la psoriasis y la vida media del fármaco son factores relevantes en la toma de decisiones.

Conclusiones: La combinación de una revisión sistemática de la literatura y la discusión y opinión estructurada de los expertos permite realizar propuestas para situaciones clínicas concretas.

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Introduction

Psoriasis is a chronic recurrent skin disease that affects approximately 2.3% of the Spanish population.¹ Advances in research and pathogenesis have led to the development of a new class of drugs, referred to collectively as biologic therapy, and the advent of biologics represented a major step forward in the management of moderate to severe psoriasis. Published guidelines on the use of these drugs are based on the results of pivotal trials undertaken to provide evidence to support their approval by the regulatory agencies and their Summaries of Product Characteristics. The findings of pivotal trials provide a strong evidence base for the use of biologics to treat moderate to severe psoriasis in most of the patients who are candidates for this type of therapy.²⁻¹³ However, growing clinical experience with these drugs has revealed that the limitations of the evidence is hindering the use of biologics in a considerable number of situations that were either not covered in or specifically excluded from these trials. Although consensus statements and the results of postmarketing clinical studies partly compensate for this deficit, there are still many situations for which the evidence is scarce.

The aim of the present study was to review the evidence relating to some of these clinical situations and to complement, when the evidence was not strong, this information with the opinion of the authors structured by way of a Delphi survey, thereby creating a document that would be useful in clinical practice.

Material and Methods

Creation of the Scientific Committee and Definition of the Hypothetical Clinical Scenarios

In the first phase of the process, a 6-member scientific committee was formed. All the members were dermatologists experienced in the clinical management of moderate to severe psoriasis. Each committee member was asked to propose clinical scenarios of practical interest which, in their opinion, posed problems in the clinical management of psoriasis.

The committee members met and agreed on the 5 hypothetical clinical scenarios that would be evaluated.

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