Factors conditioning Health Related Quality of Life in patients with psoriasis in Europe: A systematic review of the literature

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INTRODUCTION
Psoriasis is a chronic, incurable, inflammatory skin disease that affects approximately 2% of the European population and poses a lifelong burden for those affected1. Several numbers of studies have demonstrated a significant negative impact of psoriasis on patient’s HRQoL, however, the complex association among physical, psychological and demographic factors and HRQoL are not fully understood.

OBJECTIVE
To identify conditioning factors of HRQoL of patients with psoriasis as reported in the literature during the last 5 years in Europe.

METHODS
Electronic databases [PubMed, ISI-WOK, Cochrane Library, MEDES, CSIC-IME, IB ECS] and grey literature [Google Scholar], were searched to identify studies written in English or Spanish on HRQoL in patients with psoriasis, published between January 1, 2009 and December 31, 2013 in Europe. Bibliographic references were hand searched. Editorials, letters, commentaries, opinion papers and studies related to specific treatments were excluded.

RESULTS
The search strategy resulted in 1,769 citations, 1,636 of them were excluded as duplicates or clearly not relevant. After inclusion/exclusion criteria application, 27 studies were included (Figure 1)2-19.

Figure 1. Flow-chart of literature search strategy

A total of 20 publications studied the conditioning factors of HRQoL (Table 1).

Predictors of HRQoL
HRQoL and patients’ characteristics
• Most of the publications studying the relationship between gender and HRQoL (75%, n=6) indicated that females presented worse HRQoL2,5,8,11,13,15. Half of the studies that evaluated the correlation between age and HRQoL showed that younger patients presented more deteriorated HRQoL7,8,11,13.
• Patients with psychiatric co-morbidities or disease stigma refer poorer HRQoL5,14,18,19, while effective coping strategies are associated with better HRQoL13,14.

HRQoL and disease characteristics
• HRQoL impairment was associated with more visible skin lesions5,9.
• Patients with active psoriasis presented worse HRQoL3,11,14,17.
• Disease severity was one of the most frequent assessed factors. Higher PASI score predicts impaired HRQoL2,5,8,13,14,16,18,21.
• Psoriasis symptoms such as pain13, discomfort17 or pruritus19 were identified as the elements that negatively influenced HRQoL.

HRQoL and treatment
• Use of biological agents was associated with a decrease of disease severity (PASI) which contributed to an improvement of patients’ HRQoL (DLQI) and treatment satisfaction18,20.
• Higher treatment satisfaction correlated with better HRQoL21,22.

Table 1. Factors correlated with HRQoL

WORST HRQoL BETTER HRQoL NO CORRELATION NO EVALUATED

CONCLUSIONS
HRQoL has been broadly addressed in patients with psoriasis in Europe, showing that several disease and patient-related factors contributed to its deterioration. Most of these results suggested that therapeutic measures with proved effectiveness in controlling disease symptoms and reducing PASI should be considered in patients with severe disease who consequently have poor HRQoL.

REFERENCES