

EMBARGOED 5PM FRIDAY 2ND NOVEMBER 2018

Paving the Way for Answers in Psoriasis

The Psoriasis Association is delighted to announce the Top Ten Psoriasis Research Priorities, agreed upon by patients, carers and clinicians. This Top Ten List – developed using a recognised NIHR-validated method - will be considered by research funders to ensure future psoriasis research focuses on the areas that matter most to the 1.8 million people in the UK who live with the condition, and those involved in its care and treatment. The launch of this important priorities list forms part of the celebrations to mark the Psoriasis Association's 50th Anniversary Year.

The project followed the James Lind Alliance's Priority Setting Partnership method, and began with an open call for psoriasis stakeholders to submit the questions that they wanted answering about the condition and its treatments. Over two thousand questions were received from people living with the condition, their families, GPs, Dermatologists, Nurses and others. These questions were refined through a rigorous and collaborative process, including a second round of voting and a stakeholder workshop day to agree on the final ten.

The Top Ten Psoriasis Research Priorities are:

1. Do lifestyle factors such as diet, dietary supplements, alcohol, smoking, weight loss and exercise play a part in treating psoriasis?
2. Does treating psoriasis early (or proactively) reduce the severity of the disease, make it more likely to go into remission, or stop other health conditions developing?
3. What factors predict how well psoriasis will respond to a treatment?
4. What is the best way to treat the symptoms of psoriasis: itching, burning, redness, scaling and flaking?
5. How well do psychological and educational interventions work for adults and children with psoriasis?
6. Does treating psoriasis help improve other health conditions, such as psoriatic arthritis, cardiovascular disease, metabolic syndrome and stress?
7. Why do psoriasis treatments stop working well against psoriasis and when they stop working well, what's the best way to regain control of the disease?
8. To what extent is psoriasis caused by a person's genes or other factors, such as stress, gut health, water quality, or change in the weather / temperature?
9. Is a person with psoriasis more likely to develop other health conditions? If so, which ones?
10. What's the best way to treat sudden flare ups of psoriasis?

Helen McAteer, Chief Executive of the Psoriasis Association, comments, "Traditionally, academic researchers and commercial interests have dominated the research agenda in psoriasis. The Priority Setting Partnership offered an opportunity for people living with psoriasis, their family members, and the healthcare professionals treating them to have their say on the future of psoriasis research.

We can be confident that the Top Ten priorities we now have before us reflect the real interests of people affected by psoriasis, and they will ensure that work is carried out in these areas. ”

Dr Helen Young, Lead for the Psoriasis Priority Setting Partnership, comments, “Our entire endeavour has had both a patient and health-care professional perspective. The robustness of the Psoriasis PSP has been due to the rigour of the PSP Steering Group who have had oversight of the project in addition to the collaboration with individuals (both patients, carers and healthcare professionals) and our partnership with The Psoriasis Association, UK Dermatology Clinical Trials Network, the British Association of Dermatologists, the British Dermatological Nursing Group, the Primary Care Dermatology Society, and the International Psoriasis Council. We are enormously grateful for the support of the James Lind Alliance who have facilitated the Psoriasis PSP.”

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For further information please contact:

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Available for interview:

Helen McAteer, CEO of the Psoriasis Association, the leading national charity and membership organisation for people affected by psoriasis. Funder of the PSP.

Dr Helen Young, Senior Lecturer and Consultant Dermatologist, University of Manchester and Salford Royal NHS Foundation Trust. Lead for the Psoriasis Priority Setting Partnership.

Notes to Editors:

Psoriasis is an immune-mediated inflammatory condition, affecting up to 2% of the UK population. It is a long term, visible condition, which can have wide-ranging physical, mental and emotional impacts. For more information on psoriasis and the **Psoriasis Association**, please visit: www.psoriasis-association.org.uk

The James Lind Alliance is a non-profit making initiative established in 2004. It brings patients, carers and clinicians together in Priority Setting Partnerships (PSPs) to identify and prioritise the Top 10 uncertainties, or unanswered questions about health conditions. The National Institute for Health Research (NIHR) funds the infrastructure of the James Lind Alliance. For more information on the James Lind Alliance, please visit:

<http://www.jla.nihr.ac.uk>