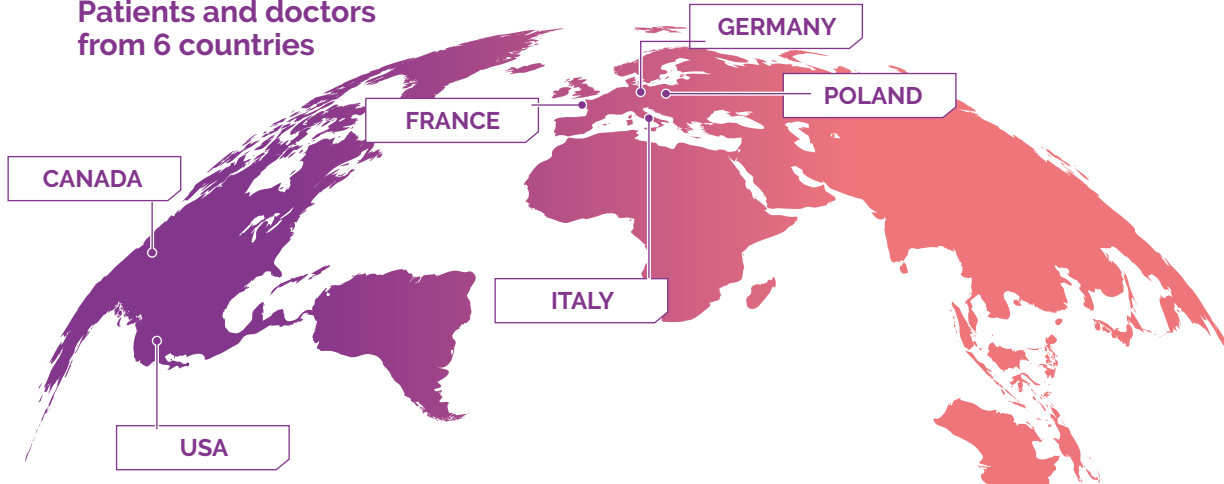


Beyond the visible: Rosacea and psoriasis of the face

Exploring new dimensions beyond the known

Overview – a study involving:

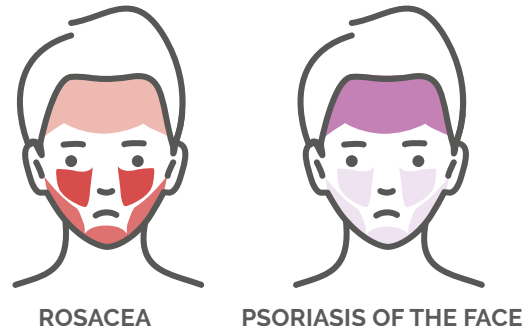
Patients and doctors from 6 countries



Rationale for comparing the impact of the two diseases:

By looking at patients with manifestations of the disease in the face region with similar quality of life measures (DLQI), we can learn from their experiences and behaviors to better inform treatment practice based on the similarities and differences

The survey demonstrated that the two patient groups were remarkably similar in many ways from the patient population characteristics to disease experience



Key similarities in the two diseases:



of patients felt their disease was **partially or totally uncontrolled**

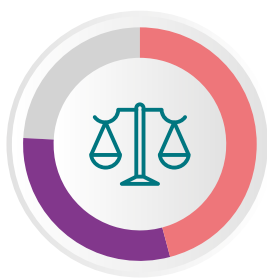


of patients admitted that their disease **impairs their work activities**



of patients (58% rosacea vs 55% psoriasis on the face) felt their disease **significantly impacted their daily lives**

Key differences in the two diseases:



When spontaneously asked what doctors investigate with new patients, the majority didn't mention quality of life or psychosocial burden:

9% of rosacea patients vs **22% of psoriasis patients**

People with rosacea were significantly more likely to avoid daily lifestyle habits because of their disease (sun exposure, drinking alcohol, eating hot or spicy foods, having hot drinks and/or using make-up)

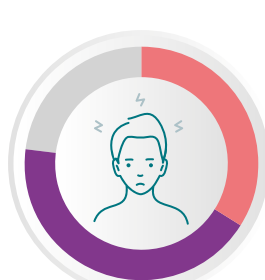
“ **Together with their doctors**, people who suffer with rosacea and psoriasis of the face can make a powerful change by aiming **to make the visible invisible and the invisible disappear.** ”

Prof. Dr Jerry Tan, Adjunct Professor, Western University, Ontario, Canada

Impact on mental health: Two diseases with a similar burden on emotional well-being



people in both disease groups self-reported moderate to severe depression*: **49% rosacea** vs **54% psoriasis on the face**



of all patients surveyed were bothered mostly by the fact that **other people might notice they have a facial skin disease**

Compared with people with psoriasis of the face, **those with rosacea were more likely to blame themselves for flare-ups** (28% rosacea vs 20% psoriasis on the face), experience **low self-esteem** (34% rosacea vs 20% psoriasis on the face) and **low confidence** (30% rosacea vs 18% psoriasis on the face)

Impact of invisible skin-related symptoms:

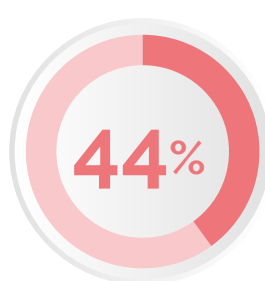
Invisible skin-related symptoms are **driving the burden** for many patients which **can be physically stressful** - psoriasis is known to be associated with itching and rosacea with burning and stinging, however both diseases are not limited to these sensations alone. Quite often both groups can experience similar skin symptoms as seen in the survey results



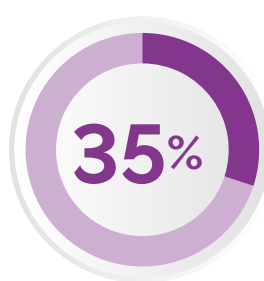
Striving for 'clear' (IGA 0) skin:

The benefits of achieving 'clear' (IGA 0) are well-established in both rosacea and psoriasis

Only 1% of patients regardless of disease rated themselves as 'clear' of visible lesions of the face



44% of rosacea patients recognized that 'clear' skin is possible

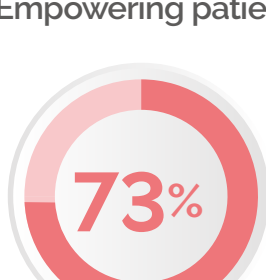


35% of psoriasis patients with facial involvement recognized that 'clear' skin is possible

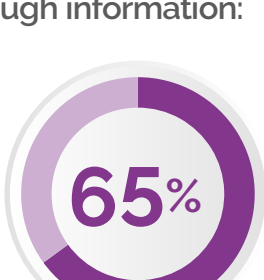
'CLEAR' IS NOW POSSIBLE

The goal of treatment should not only be to clear visible signs but to also make the invisible symptoms, non-existent. Educating patients during consultations about the likelihood of reaching 'clear' (IGA 0), may change their perception of treatment success

Empowering patients through information:



73% of rosacea patients expressed a **desire to know more** about their disease



65% of psoriasis on the face patients expressed a **desire to know more** about their disease

Need for HCPs to **empower patients through knowledge**, discuss the **invisible as well as visible symptoms' impacts**, and help them to understand the **benefits of aiming for 'clear' (IGA 0) to improve outcomes**

“ **Knowledge is power**, by increasing our patients' understanding of their disease, **we can increase their chances of achieving clear skin.** ”

Prof. Dr Jerry Tan, Adjunct Professor, Western University, Ontario, Canada

Footnotes:
*Self-reported, measured using Patient Health Questionnaire-g (PHQ-g) †Self-reported, measured using General Anxiety Disorder-7 scale (GAD-7)

Reference:
Steinhoff M, et al. Beyond the Visible: Rosacea and Psoriasis of the face. The BMJ Hosted Content 2020. Available from: <https://hosted.bmj.com/rosaceaandpsoriasisbeyondthevisible>. Date accessed: May 2020.