

# Clinical Characteristics of Scalp Predominant Psoriasis in Malaysian Population

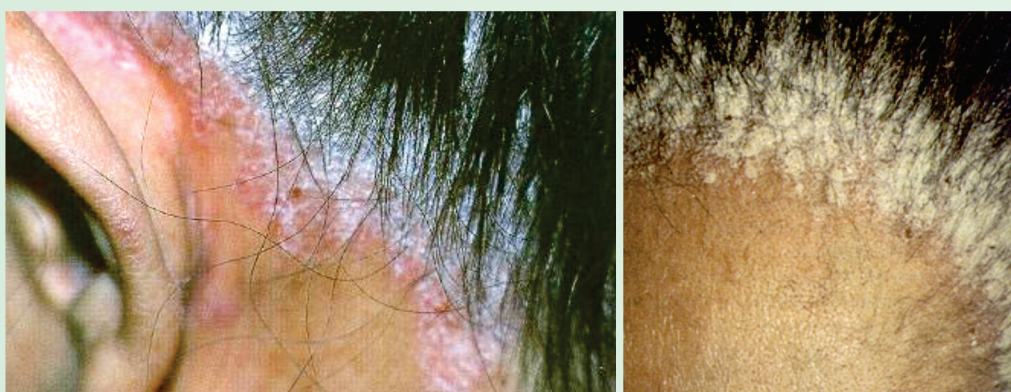
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## Introduction

Psoriasis vulgaris is a common skin disease that affects 1-3% of the global population.<sup>1,2</sup> Scalp is one of the most common sites of the disease.

Managing scalp psoriasis can be challenging.

The scalp is relatively inaccessible and its proximity to sensitive facial skin limits the choices of topical treatment.



## Objectives

- To describe the epidemiological and clinical characteristics of scalp predominant psoriasis in Malaysian population
- To compare the epidemiological and clinical characteristics of scalp predominant psoriasis patients to those with none or mild scalp involvement.

## Methods

This is a cross sectional study using data from the Malaysian Psoriasis Registry.

Patients registered from October 2007 until December 2010 with plaque psoriasis involving less than 10% of body surface area were included in the study.

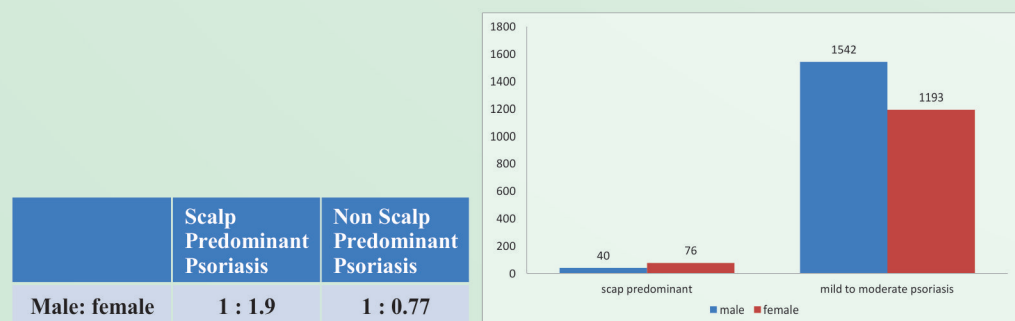
Scalp predominant psoriasis is defined as patients with moderate to severe erythema or scaling, moderate to severe thick plaque on the scalp with none or little lesions elsewhere.

## Results

A total of 2851 patients were included in the study. One hundred and sixteen patients (4%) had scalp predominant psoriasis.

### GENDER DISTRIBUTION

Female were more likely to have scalp predominant psoriasis ( $p < 0.001$ ).



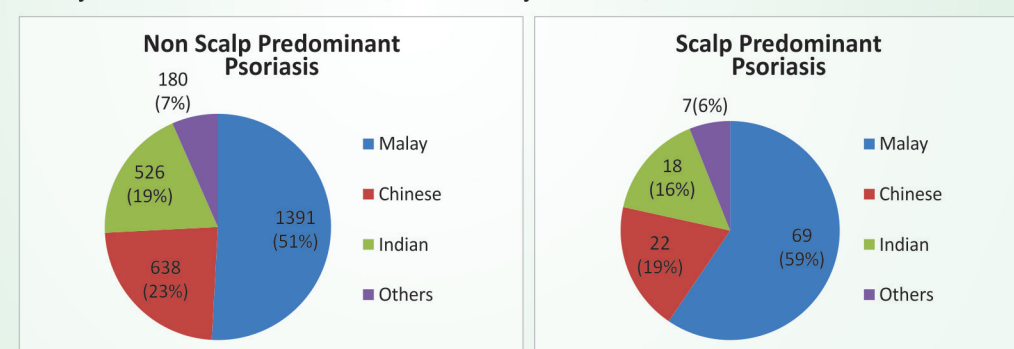
### AGE

Patients affected with scalp predominant psoriasis were younger ( $p < 0.001$ ). There were also younger age of onset ( $p = 0.005$ ) and shorter mean duration of disease ( $p < 0.001$ ).

	Scalp Predominant Psoriasis	Non Scalp Predominant Psoriasis
Mean age	36.6 ( $\pm$ 19.0)	44.8 ( $\pm$ 17.4)
Mean age of onset	30.0 ( $\pm$ 18.0)	34.6 ( $\pm$ 16.7)
Mean duration of disease	6.5 ( $\pm$ 8.0)	10.23 ( $\pm$ 10.1)

### ETHNIC

Malays were the most affected, followed by Chinese, Indians and other races.



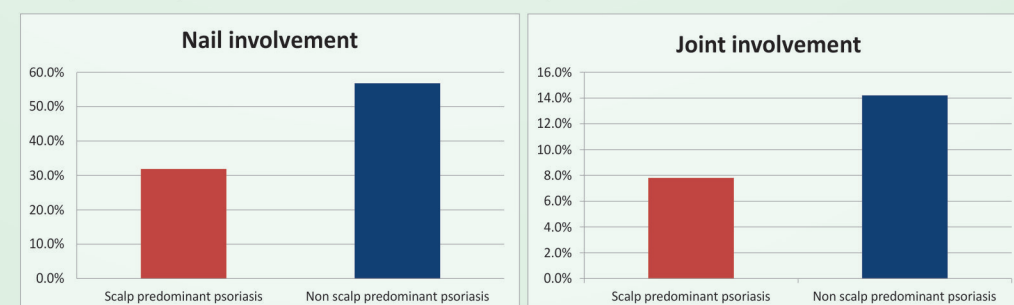
### AGGRAVATING FACTORS

Stress and sun burns were the most common aggravating factors for both groups of patients.

However, scalp predominant psoriasis patients were less likely to be affected by infections and smoking.

### NAIL AND JOINT INVOLVEMENT

Scalp predominant psoriasis patients had less tendency to develop nail involvement (31.9% v.s 56.8%,  $p < 0.001$ ) and joint involvement (7.8% v.s 14.2%,  $p = 0.048$ ) as compared to patients with mild to moderate psoriasis.

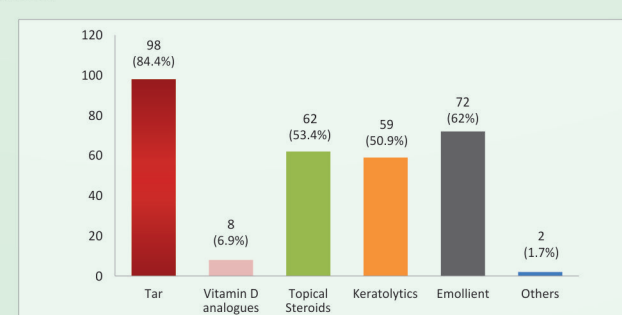


### TREATMENT

None of the scalp predominant psoriasis patients was started on systemic therapy.

Topical medications remain the mainstay of treatment.

Most of the patients were on topical tar preparations followed by topical steroids and topical keratolytics.



### EFFECT ON DLQI

Effect of scalp predominant psoriasis on Dermatology Life Quality Index (DLQI) was comparable to mild to moderate plaque psoriasis on other sites of body (6.03 vs 7.03,  $p = 0.13$ ).

## Conclusions

Scalp predominant psoriasis has different clinical characteristics from plaque psoriasis involving other parts of the body.

It affects markedly on individuals' quality of life but its psychosocial impact may be underestimated.<sup>3,4</sup>

Topical medications are the mainstay of treatment.

Treatment could be suboptimal in Malaysia.

## References

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