

## **Smoking Associated With Severity of Psoriasis**

Cigarette smoking is associated with the clinical severity of the skin disease psoriasis, and both smoking and obesity are more prevalent among psoriasis patients, according to two studies in the December issue of Archives of Dermatology, one of the JAMA/Archives journals.

Psoriasis is a chronic, persistent, lifelong disease characterized by scaly red plaques on the surface of the skin. Although psoriasis is not a life-threatening disease, the disability experienced by patients with psoriasis is comparable with that of patients with other chronic illnesses, such as heart disease, diabetes, cancer, and depression, according to background information in the article. Cigarette smoking is a risk factor for many chronic diseases, including psoriasis, but little is known about the effect of smoking on psoriasis severity.

Cristina Fortes, Ph.D., of Istituto di Ricovero e Cura a Carattere Scientifico, Rome, Italy, and colleagues conducted a cross-sectional study to evaluate the association between different components of smoking history and the clinical severity of psoriasis. They analyzed data on 818 adults with psoriasis in inpatient wards of a hospital for skin diseases.

"Specifically, patients who smoked more than a pack of cigarettes (more than 20 cigarettes) daily had twice the risk of more severe psoriasis compared with those who smoked ten cigarettes or less per day," the authors report.

Cigarette-years, measured as the product of the intensity and duration of smoking, significantly increased the risk of clinically more severe psoriasis. "Separate analyses for men and women showed that the effect of cigarette-years on psoriasis severity was stronger for women than for men," the authors write.

"Smoking is associated with the clinical severity of psoriasis and highlights the importance of smoking cessation in patients with psoriasis," they conclude. (Arch Dermatol. 2005;141:1580-1584. Available pre-embargo to the media at [www.jamamedia.org](http://www.jamamedia.org).)

Editor's Note: This study was supported by the Istituto Dermopatico dell'Immacolata, Istituto di Ricovero e Cura a Carattere Scientifico, and by the Progetto Ricerca Corrente 2003, Italian Ministry of Health, Rome.

### **Smoking and Obesity More Prevalent Among Psoriasis Patients**

In another article, researchers report that the prevalence of both smoking, and obesity, is higher among patients with psoriasis than in the general population.

Mark D. Herron, M.D., now in private practice in Montgomery, Ala., and colleagues from the University of Utah School of Medicine, Salt Lake City, studied the impact of obesity and smoking on psoriasis. A case series of patients

with psoriasis enrolled in the prospective Utah Psoriasis Initiative (UPI) was compared with three population databases: the Behavioral Risk Factor Surveillance System of the Utah population, the 1998 patient-member survey from the National Psoriasis Foundation, and 500 adult patients who attend the University of Utah Department of Dermatology clinics and do not have psoriasis.

"The prevalence of obesity in patients within the UPI population was higher than that in the general Utah population (34 percent vs. 18 percent) and higher than that in the non-psoriatic population attending our clinics," the authors write. "The prevalence of smoking in the UPI population was higher than in the general Utah population (37 percent vs. 13 percent) and higher than in the non-psoriatic population."

The authors found that obesity appears to be the consequence of psoriasis, and not a risk factor for onset of the disease. "Smoking appears to have a role in the onset of psoriasis, but obesity does not," they write.

"It seems certain that the cost of providing care for psoriasis -- when coupled with the increased frequency of obesity and smoking in patients attending clinics such as ours -- will continue to increase," the authors conclude. "An effort to control obesity and smoking in psoriasis patients and an increased appreciation of the effects of these comorbidities are clearly needed." (Arch Dermatol. 2005;141:1527-1534. Available pre-embargo to the media at [www.jamamedia.org](http://www.jamamedia.org).)

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#### **Editorial: Advances in Psoriasis**

In an accompanying editorial, Mark G. Lebwohl, M.D., of Mount Sinai Medical Center, New York, examines recent advances in psoriasis treatment, and suggests that the impact of those treatments on all dermatologic disease has been profound.

Summarizing the findings of Fortes and colleagues and Herron and colleagues, Dr. Lebwohl writes, "These studies do not answer the question, however, of whether psoriasis leads to smoking or smoking exacerbates psoriasis."

"The current issue of the Archives demonstrates that psoriasis remains a therapeutically and intellectually challenging disease," he concludes. "As research and development continue, we undoubtedly will have better treatments. We can only hope that they will be treatments that patients can afford."

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(Arch Dermatol. 2005;141:1589-1590. Available pre-embargo to the media at [www.jamamedia.org](http://www.jamamedia.org).)

**Editor's Note:**

In the past year, members of Dr. Lebwohl's department have served as investigators for and received grants and honoraria from Abbott Laboratories, Allergan, Amgen, Astellas, Biogen Idec, Centocor, Connetics, Genentech, Novartis, and Warner Chilcott. Dr. Lebwohl is also a consultant (or has pending consulting agreements) for Abbott Laboratories, Amgen, Astellas, Biogen Idec, Centocor, Connetics, Genentech, Novartis, Pfizer, Warner Chilcott, and 3M. In addition, members of Mount Sinai's Department of Dermatology hold patents for short-contact tazarotene therapy, excimer laser treatment of vitiligo, and topical genistein. Finally, in the past year, Dr. Lebwohl has served as a speaker for Abbott Laboratories, Amgen, Astellas, Biogen Idec, Centocor, Connetics, Genentech, Novartis, Warner Chilcott, and 3M.

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*This story has been adapted from a news release issued by JAMA and Archives Journals.*