

Understanding

Psoriatic Arthritis (PsA)

Disease Activity...

ABOVE and

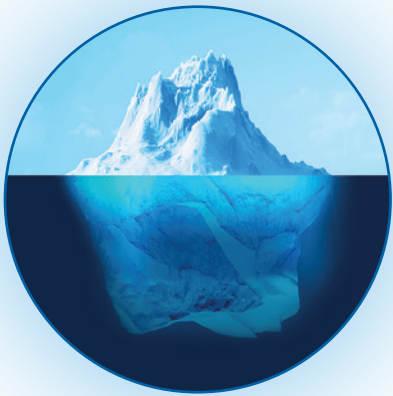
BELOW the Surface

**A Planning Guide to Help You
Optimize Your Treatment for PsA**

The information contained in this workbook is intended to reinforce and supplement information you receive from your healthcare team. It is not a substitute for medical advice from your physician. If you have questions about the information you read in this workbook, please discuss it with your healthcare provider.

This has been produced as a patient education resource by Pfizer Inc.

How to Use This Planning Guide



The iceberg

It's a commonly used image that can explain any situation where something is seen, yet *something more* is unseen—at the same time.¹ The iceberg is also a useful metaphor to explain what's happening inside your body when you have PsA. That's because the signs and symptoms of PsA—joint pain, skin lesions, inflamed tendons and ligaments—are just the *tip of the iceberg*; inflammation may still be occurring below the surface.²⁻⁴

You may not realize that inflammation is always present in your body when you have PsA.⁵ That's why it's important to take your medicines exactly as prescribed by your healthcare professional.

This is just one of several ***tips from the PsA Iceberg*** that appear in this brochure. You will also find information to help you understand PsA and your treatment. There are tips, strategies, quizzes, and exercises designed to reinforce the educational guidance in each section.

Use this planner to learn more about PsA and how it affects you. Then team up with your healthcare professional to design a treatment plan that may help manage your PsA.

What You Will Learn

Important things you may not know—but *should know*—about PsA and your treatment

By using this guide, you will be able to:

- 1. **Describe PsA**, including the common signs and symptoms, and the effects PsA may have on different areas of the human body
- 2. **Explain how PsA is diagnosed**, the types of tests used in the medical examination process
- 3. **Describe how PsA may affect your quality of life**, including potential physical and emotional challenges
- 4. **Understand the risks of developing other diseases when you have PsA**, as well as the importance of taking your PsA medication as prescribed
- 5. **Detail the goals of PsA treatment**, the main treatment options, and the importance of measuring PsA disease activity
- 6. **Understand how rheumatologists and dermatologists may work together** to support your treatment



A Tip From the PsA Iceberg

It's important to take your PsA medication exactly as prescribed by your doctor to control the inflammation in your body.

Need-to-Know Information About PsA

Understand these key facts about PsA...then expand your knowledge by completing some useful exercises to help you when discussing your medical condition and treatment plan with your healthcare professionals (HCPs)

1

PsA is a *chronic autoimmune inflammatory* disease that can affect the body in various ways. The condition is marked by different signs and symptoms.

PsA is an autoimmune disease.⁴ This means your immune system attacks healthy cells by mistake.⁴ When your immune system is working normally, it protects your body from infection and disease. But when you have PsA, it does just the opposite! In PsA, cells from your immune system attack the normal soft tissues that line the joints. This causes inflammation that is marked by joint swelling and tenderness. Over time, inflammation may lead to joint damage. This is why PsA is an *inflammatory disease*. The exact medical causes of PsA are unknown.⁶ But it's believed to result from genetic and environmental factors.⁶ Symptoms and signs—and where they appear on the body—vary widely. However, PsA tends to affect the joints, skin, and nails.³ PsA causes pain or tenderness over the affected areas.^{2,3} The disease typically affects the small joints of the body, such as the fingers or toes.

2

Different clinical tools and techniques are used to diagnose PsA.

PsA is diagnosed in a physical examination. To check PsA symptoms that appear “above the surface,” your HCP may conduct a joint assessment (to identify tender and swollen joints) and collect personal medical information from you. To identify joint and spinal problems that appear “below the surface,” your HCP may conduct lab tests and use x-rays and magnetic resonance imaging (MRI).^{6,7} Ultrasound tests are used for other cases where PsA affects the muscles or inflamed areas where tendons and ligaments attach to the bone.⁸ Treatment for PsA may help alleviate symptoms. Yet, the underlying inflammation may continue. This may lead to cartilage damage and loss, bone erosion, or other joint damage.⁵ The fact that only your HCP can tell if your underlying inflammation is under control—even when your symptoms may be absent—is why you must take your medicines exactly as prescribed.

HCP=healthcare professional.

3

PsA may have different effects—physically and emotionally—on your quality of life.

PsA may negatively affect your everyday life and your ability to perform simple daily tasks. This was confirmed in a lifestyle-related survey published in 2009 of more than 550 veterans with PsA and more than 660 with spondyloarthritis—a condition related to PsA.⁹ In that study, 74% of patients had difficulty walking, 43% had problems in getting dressed, and 41% had trouble bathing. These findings describe the physical challenges posed by PsA. But other studies show the emotional strains of living with PsA. In a survey of nearly 5000 patients that was completed in 2009—a study that examined the lifestyle burden of PsA based on a review of published literature—approximately 75% of patients said their visible skin lesions affected their social, emotional, and professional lives.^{10,11} A similar percentage of patients said their PsA made them feel self-conscious, angry, frustrated, or completely helpless.

Now that you know the facts about PsA, check your understanding by answering the following questions:

1. Which parts of the body are mainly affected by PsA? (Circle the right answer)
- A. Throat, nose, and mouth
 - B. Joints, skin, and nails
 - C. Stomach, bladder, and kidneys

Say it in your own words...Where on the human body may the signs/symptoms of PsA appear?

2. PsA is diagnosed by your doctor using what tools? (Circle the right answer)
- A. X-rays and MRIs along with a thorough physical examination
 - B. Echocardiogram
 - C. Blood pressure monitor

Say it in your own words...How is PsA diagnosed by your HCP?

3. Generally speaking, how can PsA negatively affect patients? (Circle the right answer)
- A. It hinders intellectual development
 - B. It affects one's physical capabilities and emotional well-being
 - C. It leads to unhealthy weight loss

Say it in your own words...Provide some examples of how PsA may affect your daily life.

A Tip From the PsA Iceberg
Anyone with PsA can tell you how life is affected by the condition. But research shows that the stress of living with PsA may be reduced with the help of your HCP, your friends and family, and patient peer support groups.¹¹



4 You risk developing other medical conditions when you have PsA.

If you have PsA, you may develop other health problems.¹²⁻¹⁴ These conditions—known as comorbidities—may be difficult on their own. But they may also worsen your PsA.¹²⁻¹⁴ Research shows that nearly half of all patients with PsA have a history of 3 or more comorbidities.¹³ You may have an increased risk of developing heart disease and certain metabolic conditions such as high cholesterol, diabetes, obesity, and high blood pressure.^{12,14} Other medical problems associated with PsA include different types of inflammatory diseases, like inflammatory bowel disease (IBD) and uveitis (an inflammatory eye disease).¹²⁻¹⁵ Closely following your treatment plan can help your healthcare professional (HCP) manage any conditions that may arise.

5 Treatment for PsA—and the goals of managing it—may be based on your level of disease activity and the impact of PsA on quality of life.

Medications used to treat PsA include nonsteroidal anti-inflammatory drugs (NSAIDs) and corticosteroids, which are designed to help decrease inflammation and pain.⁶ Patients with PsA may also be treated with a DMARD (pronounced DEE-MARD). This stands for Disease-Modifying AntiRheumatic Drug. DMARDs are a class of treatment used to manage underlying inflammation, reduce pain, and prevent join damage. Topical treatment (eg, medicines applied to particular places on your body) and non-pharmacologic treatment (eg, physical therapy) may also be used to manage PsA symptoms.¹⁶


Your HCP will work with you to set treatment goals that support your physical and emotional well-being. Medical guidelines emphasize the importance of PsA treatment that focuses on optimizing patients’ quality of life. These recommendations also promote shared decision-making between HCPs and patients, and providing patients with the accurate clinical information and treatment options.¹⁶ Additionally, a global task force consisting of rheumatologists, dermatologists, and patients with PsA advised that PsA treatment should be based on measuring disease activity; should include changes to therapy when treatment goals are not being met; and should involve HCPs in different areas of expertise (eg, dermatologists, rheumatologists, gastroenterologists, and ophthalmologists).¹⁷

HCP=healthcare professional.

6 Rheumatologists, dermatologists, and other HCPs may work together to support your treatment of PsA.

PsA can present with different signs and symptoms, and where they appear on the body may vary widely.² That’s why different HCPs may be involved in diagnosing your condition and designing your treatment plan. For example, a primary care physician or a dermatologist might begin treatment of PsA before a rheumatologist would. Coordinated care by rheumatologists and dermatologists in diagnosing PsA increases early detection of PsA. What’s more, many patients receiving multidisciplinary care—that is, treatment from HCPs in different areas of specialization—show improvement in their condition.¹⁹

A Tip From the PsA Iceberg
Many HCPs use an approach known as treat-to-target. With treat-to-target—supported by shared decision-making—your healthcare professional works directly with you to design a customized treatment plan based on your individual goals.¹⁷



4. What are examples of other medical conditions (comorbidities) that may arise when you have PsA? (Circle the right answer)
- A. Kidney and bladder infections
 - B. Stomach ulcers and other intestinal disorders
 - C. High cholesterol, high blood pressure, and obesity

Say it in your own words...Define what a comorbidity is.

5. DMARDs are important in treating PsA for this reason. (Circle the right answer)
- A. DMARDs identify the visible signs and symptoms associated with PsA
 - B. DMARDs can help reduce joint damage associated with PsA
 - C. DMARDs can help relieve the emotional toll PsA may take on patients

Say it in your own words...Describe the main goals of PsA treatment.

6. What is the main goal of a treat-to-target strategy for PsA? (Circle the right answer)
- A. To devise a treatment plan based on your individual needs and requirements
 - B. To contribute to clinical research on PsA
 - C. To avoid the need for PsA medication

Say it in your own words...Explain why shared decision-making may be valuable in treating PsA.

Common PsA Signs and Symptoms

- Joint pain and swelling
- Thickness and reddening of skin with flaky, silver-white patches (scales)
- Pitting of nails or separation from nail bed
- Tenderness at attachment site of tendon or ligament to bone (enthesitis)
- Pain and stiffness in the neck and lower back (spondylitis)
- Painful, sausage-like swelling of fingers and toes (dactylitis)

Although effective treatment for PsA can help relieve PsA symptoms, the underlying inflammation can continue, possibly leading to cartilage damage and loss, bone erosion, or other joint damage.

Structural Manifestations of Underlying Inflammation

- Bone resorption or disappearance of bone (osteolysis)
- Inflammation at joint of spine and pelvis (sacroiliitis)
- Bone erosion
- Pencil-in-cup deformity (areas of both new bone formation and resorption)

This is why it's important to continue to take all medicines as prescribed by your doctor.

Preparing for Your Next Appointment With Your Healthcare Professional (HCP)

Your next appointment:

HCP: _____

Date: _____ Time: _____

Location: _____

List the questions, issues, or concerns you would like to speak to your HCP about during your next appointment:

1. _____

2. _____

3. _____

Answer key to questions (Need-to-Know Information About PsA):

[A.9] [B.8] [C.7] [D.6] [E.5] [F.4] [G.3] [H.2] [I.1]

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HCP=healthcare professional.

