Understanding Psoriatic Arthritis (PsA) Disease Activity... ABOVE and BELOW the Surface

A Planning Guide to Help You Optimize Disease Management With Your Healthcare Team

The information contained in this educational resource 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 educational resource, please discuss them with your healthcare provider.

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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.[2-5]

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 provider (HCP).

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 disease management options. 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 HCP to design a disease management plan that may help manage your PsA.

HCP=healthcare provider.

What You Will Learn

Important things you may not know—but *should* know—about PsA and your disease management options

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** and 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 disease management** and the importance of measuring PsA disease activity
6. **Understand how rheumatologists and dermatologists may work together** to support your disease management plan

A Tip From the PsA Iceberg

It's important to take your PsA medication exactly as prescribed by your healthcare provider 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 disease management plan with your 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.

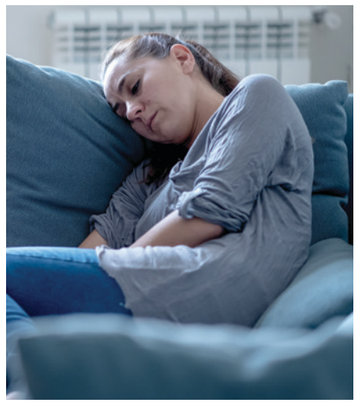
PsA is an autoimmune disease.[6] This means your immune system attacks healthy cells by mistake. When your immune system is working normally, it protects your body from infection and disease. But when you have PsA, it does just the opposite! In PsA, cells from your immune system attack the normal soft tissues that line the joints. This causes inflammation that is marked by joint swelling and tenderness. Over time, inflammation may lead to joint damage.[7] This is why PsA is an inflammatory disease.[2] The exact medical causes of PsA are unknown.[6] But it's believed to result from genetic and environmental factors. Symptoms and signs—and where they appear on the body—vary widely.[2,6] However, PsA tends to affect the joints, skin, and nails.[4] PsA causes pain or tenderness over the affected areas.[2-4] 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.[6] 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).[8,9] Ultrasound tests are used for other cases where PsA affects the muscles or inflamed areas where tendons and ligaments attach to the bone.[10] Disease management for PsA may help alleviate symptoms.[6] Yet, the underlying inflammation may continue. This may lead to cartilage damage and loss, bone erosion, or other joint damage. 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 medicine exactly as prescribed.

HCP=healthcare provider.

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.[11]

In a survey of almost 3500 patients, 712 patients with PsA were asked if and how PsA had an impact on their daily routines.[11] Ten percent (10%) said they had much difficulty turning faucets on and off and bathing. About 15% said it was very difficult to get in and out of bed, to dress themselves, to get in and out of a car, and to walk outdoors on flat ground. More than 20% said they were unable to bend down to pick something up from the floor. In addition, 25% to 30% of patients reported that PsA affected their ability to work full time, choose a career, and get or keep a job.

A valid way to determine the effect that PsA has on quality of life is through use of health-related quality-of-life questionnaires.[12] Looking at such questionnaires, one analysis determined that patients with PsA were impacted by, in order of importance: pain, fatigue, skin problems, ability to function at work and in leisure activities, discomfort, sleep disturbances, coping skills, and anxiety/fear.[12]

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

If you have PsA, you may develop other health problems.[5] These conditions—known as comorbidities—may be difficult on their own. But they may also worsen your PsA.[13-15] You may have an increased risk of developing heart disease and certain metabolic conditions such as high cholesterol, diabetes, obesity, and high blood pressure.[5,13-15] Other medical problems associated with PsA include different types of inflammatory diseases, like inflammatory bowel disease (IBD) and uveitis (an inflammatory eye disease).[13,15-18] Closely following your disease management plan can help your HCP manage any conditions that may arise.

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.[19]

Need-to-Know Information About PsA, *continued*

5 The goals of PsA disease management may be based on your level of disease activity and the impact of PsA on your 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 help with inflammation and joint pain, as well as help prevent further joint damage.[6] Two other medication types may be prescribed: these include biologic DMARDs (bDMARDs) and Janus kinase (JAK) inhibitors.[20,21] bDMARDs are genetically engineered to inhibit proteins involved in inflammatory processes, while JAK inhibitors are drugs that work at the cellular level to inhibit inflammation.[6,20,21] Topical treatment (eg, medicines applied to particular places on your body) and nonpharmacologic treatment (eg, physical therapy) may also be used to manage PsA symptoms.[6,22]

Your HCP will work with you to set goals that support your physical and emotional well-being. Medical guidelines emphasize the importance of PsA disease management that focuses on optimizing patients' quality of life.[22] These recommendations promote shared decision-making between HCPs and patients; the guidelines also advise providing patients with accurate clinical information and disease management options. Additionally, a global task force consisting of rheumatologists, dermatologists, and patients with PsA advised that PsA disease management should be based on measuring disease activity[7]; should include changes to therapy when disease management goals are not being met; and should involve HCPs in different areas of expertise (eg, dermatologists, rheumatologists, gastroenterologists, and ophthalmologists).

6 Rheumatologists, dermatologists, and other HCPs may work together to support your PsA disease management.

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 disease management plan. For example, a primary care physician or a dermatologist might begin disease management of PsA before a rheumatologist would. Coordinated care by rheumatologists and dermatologists in diagnosing PsA increases early detection of PsA.[23] What's more, many patients receiving multidisciplinary care—that is, disease management from HCPs in different areas of specialization—show improvement in their condition.

A Tip From the PsA Iceberg

Many HCPs use an approach known as treat-to-target.[7] With treat-to-target—supported by shared decision-making—your HCP works directly with you to design a customized disease management plan based on your individual goals.

HCP=healthcare provider.

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[3,4,6,9]
- **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[5,8,9]
- **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[11,12]
- **C.** It leads to unhealthy weight loss

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

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[5,13-15]

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[6]
- **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 disease management.

6. What is the main goal of a treat-to-target strategy for PsA? (Circle the right answer)
- **A.** To devise a disease management plan based on your individual needs and requirements[7]
- **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[3,4,6]
- Thickness and reddening of skin with flaky, silver-white patches (scales)[6]
- Pitting of nails or separation from nail bed[3,4,6,9]
- Tenderness at attachment site of tendon or ligament to bone (enthesitis)[3,6,10]
- Pain and stiffness in the neck and lower back (spondylitis)[3,6,10]
- Painful, sausage-like swelling of fingers and toes (dactylitis)[3,4,6,9,10]

Structural Manifestations of Underlying Inflammation

- Bone resorption or disappearance of bone (osteolysis)[4]
- Inflammation at joint of spine and pelvis (sacroiliitis)[4,9]
- Bone erosion[4,9]
- Pencil-in-cup deformity (areas of new bone formation and resorption)[4]

Although effective PsA disease management can help relieve PsA symptoms, the underlying inflammation can continue, possibly leading to cartilage damage and loss, bone erosion, or other joint damage.[6]

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

Preparing for Your Next Appointment With Your HCP

Your next appointment:

Healthcare Provider: _____

Date: _____ Appointment Time: _____

Location (HCP office/telehealth visit): _____

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

_____

_____

Answer key to questions (Need-to-Know Information About PsA):
[1. B] [2. A] [3. B] [4. C] [5. B] [6. A]

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HCP=healthcare provider.