Prevalence and Awareness of Psoriasis in Different Groups: A Survey Study

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ABSTRACT

Psoriasis is one of the chronic inflammatory disease which effect skin and joints. This disease can occur at any age but onset can occur in young adulthood. During September 1st to September 20th a questionnaire was distributed among students of Pharm.D (University of Karachi). This questionnaire contains close ended questions related to the awareness of psoriasis. We collected 100 questionnaires for our study. Results indicated that male(73.68 %) and female (82.71 %) students have knowledge about symptoms of psoriasis, male (63.15 %) and female (72.83 %) have knowledge about disease consequences while male(56.23 %) and female (55.55 %) have knowledge about all possible consequences of disease. Regarding treatment results indicated that male (73.68 %) and female (64.19 %) have knowledge about treatment of disease. Regarding susceptibility male (73.68 %) and female (71.60 %) have knowledge about the susceptibility of disease while male (31.57 %) and female (54.32 %) knows about topical treatment of psoriasis. Results of three groups will be analyzed by SPSS Version 20, Chi-Square and independent sample t tests were also used to compare and analyze the variables.

Keywords: Psoriasis, Awareness, Treatment, Prevalence.

INTRODUCTION

Psoriasis is considered to be one of the chronic diseases with physical impairing which might affect the emotional health of those patients having mild symptoms. Moderate-to-severe psoriasis may affect = 3–5 % of body surface area (BSA) which needs systemic treatment for successful management. Oral systemic management includes acitretin, methotrexate and cyclosporine have been available for last multiple decades but their use is very less based on patient intolerance [1]. Psoriasis is also associated with arthritis which can reduce the quality of life [2].

Main cause of psoriasis is genetic predisposition and the environmental triggers. Other reasons include obesity, Crohn's disease, diabetes mellitus particularly type2 etc. It has been identified as an independent risk factor for cardiovascular disease. Triggering causes which may facilitate psoriasis include HIV infection, trauma and psychogenic stress. Different drugs i.e. ß-blockers, lithium and antimalarial particularly facilitate psoriasis. One of the major features of psoriasis is hyperplasia, proliferation and dilatation of dermal blood vessels [3].

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METHODOLOGY

During September 1st to September 20th a questionnaire was distributed among students of Pharm.D (University of Karachi) having close ended questions related to their knowledge about awareness of psoriasis. Overall, students (70 %) returned the questionnaire, divided irrespective of gender (n=100).

RESULTS AND DISCUSSION

We collected 100 questionnaires for our study. Results indicated that male (73.68 %) and female (96.28 %) Pharm. D students have knowledge about psoriasis.

Among 100 students no one have psoriasis. Male (73.68 % and 63.15 %) and female (82.71 % and 72.83 %) students have some knowledge about symptoms and consequences of psoriasis while male (56.23 % and 73.68 %) and female (55.55 % and 64.19%) have information about causes and treatment of disease. Regarding susceptibility male (73.68 %) and female (71.60 %) knows about the susceptibility of disease while male (31.57 %) and female (54.32 %) have about topical treatment of psoriasis. Results of three groups were analyzed by SPSS Version 20. Chi-Square and independent sample t test were used to compare the variables with significant p value < 0.005.

Table 1: Chi-Square test

	Value	df	Asymp. Sig. (2-sided)	Exact Sig. (2-sided)	Exact Sig. (1-sided)
Disease_knowledge	10.692a	1	0.001	0.006	0.006
Symptom_knowledge	.816a	1	0.366	0.35	0.273
Knowledge_about_disease_consequence	.701a	1	0.403	0.411	0.284
Knowledge_about_cause	.053a	1	0.818	1	0.508
Knowledge_about_treatment	.617a	1	0.432	0.592	0.308
Knowledge_about_succeptibility	.033a	1	0.856	1	0.551
Knowledge_about_topical_treatmen					

Table 2: Knowledge about infection

Gender	Disease knowledge		Total
	Yes	No	
Male	14	5	19
Female	78	3	81
	92	8	100

Table 3: Knowledge about symptoms

Gender	Symptom knowledge		Total
	Yes	No	
Male	14	5	19
Female	67	14	81
	81	19	100

Table 4: Knowledge about disease consequence

Gender	Knowledge about disease consequence		Total
	Yes	No	
Male	12	7	19
Female	59	22	81
	71	29	100

Table 5: Knowledge about cause

Gender	Knowledge about cause		Total
	Yes	No	
Male	10	9	19
Female	45	36	81
	55	45	100

Table 6: Knowledge about treatment

Gender	Knowledge about treatment		Total
	Yes	No	
Male	14	5	19
Female	52	29	81
	66	34	100
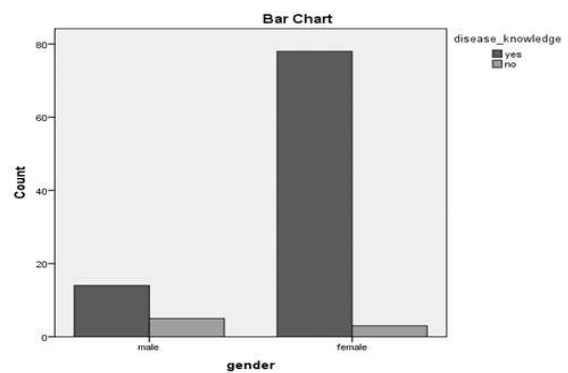
Figure 1: Knowledge about infection

Table 7: Knowledge about succeptibility

Gender	Knowledge about succeptibility		Total
	Yes	No	
Male	14	5	19
Female	58	23	81
	72	28	100
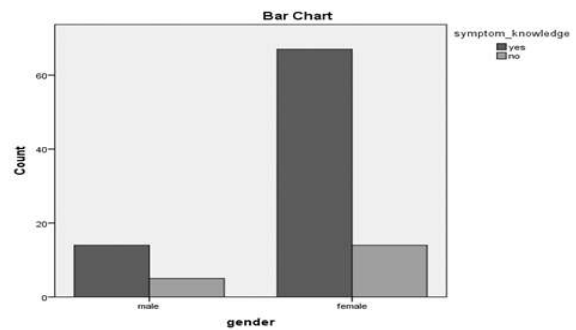
Figure 2: Knowledge about Symptoms

Table 8: Knowledge about topical treatment

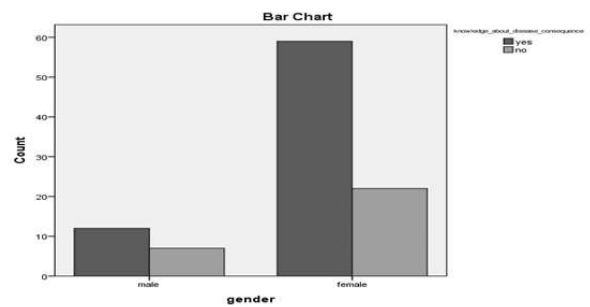| Gender	Knowledge about topical treatment		Total
	Yes	No	
Male	6	13	19
Female	44	37	81
	50	50	100

Figure 2: Knowledge about disease consequences

Table 9: Independent Samples Test

prevalance	Lenene's Test for Equality of Variances		t-test for Equality of Means							
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference		
								Lower	Upper	
Equal variances assumed	15.325	.000	-2.162	98	.033	-.17674	.08175	-.33897	-.01451	
Equal variances not assumed			-1.630	21.409	.118	-.17674	.10844	-.40199	-.04852	
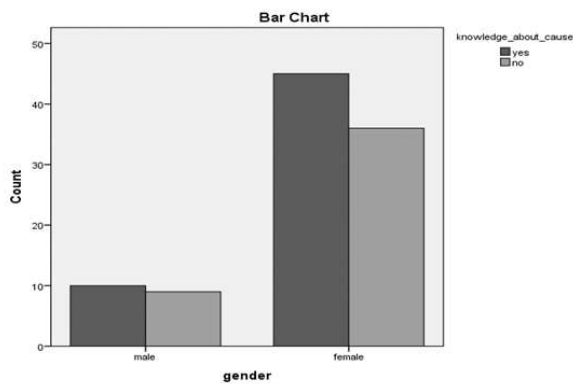
Figure 4: Knowledge about causes
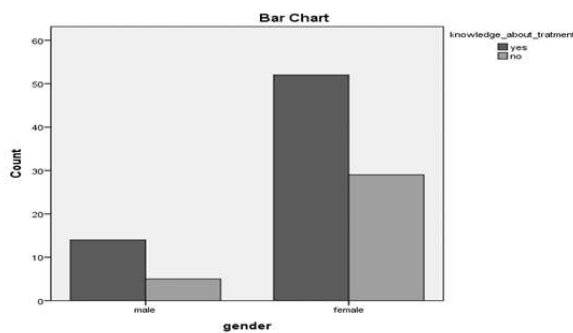
Figure 5: Knowledge about treatment

Figure 6: Knowledge about treatment

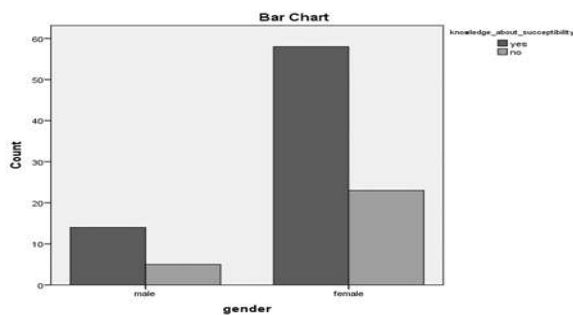3.   R.K.H. Mak, C. Hundhausen, and F.O. Nestle. Progress in understanding the immunopathogenesis of psoriasis, Actas Dermosifiliogr. Dec; 100 (Suppl 2): 2–13 (2009).

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