

Barriers to Accessing Treatment for Plaque Psoriasis: A National Psoriasis Foundation Survey

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Introduction: Psoriasis is a chronic inflammatory skin disease that causes pain, itching, and disfigurement, with a physical and psychological burden that substantially affects quality of life. While healthcare professionals (HCPs) offer effective treatments for plaque psoriasis, individuals with psoriasis may not access treatment for a variety of reasons, resulting in unmet treatment needs and poor outcomes.

Objective: The objective of this study was to understand why patients with plaque psoriasis choose not to receive treatment for their disease.

Methods: This was an online survey conducted by the National Psoriasis Foundation (NPF) and supported by Dermavant Sciences, Inc., USA. Eligible adults had a diagnosis of plaque psoriasis but were not accessing care, seeing an HCP, or receiving treatment. The survey included 32 questions related to demographics, treatment history, access to healthcare, and reasons for discontinuing or not seeking treatment.

Results: The survey was completed by 1002 respondents. The majority were male (73%), white and non-Hispanic (both 99%), and aged 35–44 years (90%). Respondents had tried approximately 2–3 types each of topical, oral, and biologic psoriasis therapies. Barriers to obtaining a psoriasis diagnosis included long wait times for an HCP appointment (68.2%), misdiagnosis (32.6%), and issues with transportation to clinics (33.0%). Although most respondents (97.5%) reported having access to a dermatology HCP, frustration over the perceived lack of new treatment options (78.2%), and feeling that their HCP did not understand them or their priorities (48.8%) were the main reasons for not continuing to see HCPs. Barriers to treatment included inconvenience of in-office treatment (e.g. phototherapy; 74.2%), concerns about safety or side effects (53.2%), and a lack of acceptable treatment options (53.0%). Topical therapies were considered safer than other oral or biologic drugs by 73.0% of respondents. Respondents disliked topicals that were sticky/messy or get on clothes or sheets (42.6%) or required multiple daily applications (20.2%). Patient expectations of treatment were generally modest with almost half of the respondents (49.1%) considering treatment success to be at least a 50% improvement in their plaque psoriasis, while 43.2% rated treatment success as “Skin cleared and stayed clear for a while.” Participants considered “Absence of bothersome symptoms (itching and flaking)” (55.4%) and “No effect of psoriasis on personal relationships or interactions with other people” (53.7%) as key outcomes indicating control over their psoriasis.

Conclusions: Patients with psoriasis report feelings of frustration, and a lack of acceptance of available therapeutic options as key reasons for choosing not to receive treatment. Other barriers included feeling misunderstood by their clinicians, the

inconvenience of having to travel to see a clinician, and safety concerns with systemic therapies, with most perceiving topical treatments as safer. Respondents were not on treatment despite having prior treatment experience and reasonable expectations of what constitutes treatment success, as well as having access to a dermatology clinician. Therefore, taking the time to build therapeutic rapport and educate patients on the newest available therapies may better engage patients and prevent them from discontinuing treatment, potentially leading to physical and psychological benefits.
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