

Psoriasis and the Heart



papaa[®]

A positive approach

to psoriasis and

psoriatic arthritis

What is psoriasis?

Psoriasis (Ps) is a long-term (chronic) scaling disease of the skin, which affects 2% – 3% of the UK population. It appears as red, raised scaly patches known as plaques. Any part of the skin surface may be involved but the plaques most commonly appear on the elbows, knees and scalp. It can be itchy but is not usually painful. Nail changes are present in 50% of people and 10% – 20% of people will develop psoriatic arthritis.

What happens?

Normally a skin cell matures in 21 – 28 days and during this time it travels to the surface, where it is lost in a constant invisible shedding of dead cells. In patches of psoriasis the turnover of skin cells is much faster, around 4 – 7 days, and this means that even live cells can reach the surface and accumulate with dead cells. The extent of psoriasis and how it affects an individual varies from person to person. Some may be mildly affected with a tiny patch hidden away on an elbow which does not bother them while others may have large visible areas of skin involved that significantly affect daily life and relationships. This process is the same wherever it occurs on the body. **Psoriasis is not contagious.**

Heart (cardiovascular) disease

Heart disease is the second most common reported long-term disease after musculoskeletal conditions in UK. In the general population 1.5 million men and 1.1 million women are affected. The prevalence increases for those aged 75 or older to 1 in 4 men and 1 in 5 women.

Psoriasis can affect your heart in several ways; some ways are life threatening (including heart attacks) and others are much less serious. There are many risk factors for developing heart related conditions, many of which can be avoided.

The psoriasis-heart connection

Overall, people with psoriasis have a much greater risk of heart disease than people without psoriasis. In young men and women with severe psoriasis this risk is most noticeable, where they may be up to 3 times more likely to have a heart attack than those of the same age who do not have psoriasis.

The most common heart condition affecting people with psoriasis is atherosclerosis. It occurs when cholesterol and fatty deposits clog the blood vessels, slowing blood flow and preventing the delivery of oxygen and nutrients to the heart, brain and other organs. This may result in a heart attack or stroke.

People with psoriasis often have one or more risk factors for atherosclerosis; which include diabetes, obesity, high blood pressure (hypertension), and high LDL ('bad') cholesterol. In addition, people with psoriasis may be more likely to make lifestyle choices which increase their heart disease risk further. The good news is that you can take action against many of these risk factors and reduce your risk of heart disease.

What you can change?

You may be more likely to have certain risk factors for heart disease because of your psoriasis, but you can do something about the following:

High blood pressure: High blood pressure or hypertension (consistently above 140/90 mmHg) can narrow and eventually block blood vessels that carry blood around your body. It also strains the heart, possibly leading to a heart attack. Very high blood pressure can result in blood vessels in the brain bursting causing a stroke. Hypertension often has no symptoms, so be sure to have your blood pressure checked every year.

High blood cholesterol: High cholesterol levels are associated with high-fat diets, smoking, inactivity and a family history of high cholesterol. Cholesterol and triglycerides are types of fat that can block and narrow the blood vessels leading to a heart attack or stroke. Eating a balanced diet, being physically active, not smoking and reducing salt and alcohol consumption can significantly reduce your cholesterol levels. Some people also require medication to control their blood cholesterol.

Physical inactivity: Being inactive can double your risk for heart attack and stroke. You don't have to exercise strenuously to enjoy the health benefits. Start with a goal of 30 minutes of daily activity, such as walking or gardening. Gradually increase the amount and intensity. If activity causes pain or if you are unsure about embarking on any exercise programme consult your doctor, as it may be unsuitable for you particularly if you also have psoriatic arthritis.

Diabetes: It is important to carefully manage your blood sugar level if you have diabetes as more than 80 percent of people with diabetes die of heart disease.

Excess weight: Your weight and the distribution of excess weight can put you at risk of developing heart disease, as well as developing high blood pressure, high cholesterol and diabetes. People who carry weight around their middle (apple shaped) versus around their hips (pear shaped) are at greater risk of health problems. Even a modest reduction in weight – as little as 10 percent – can significantly reduce your chances of having a heart attack or stroke or developing diabetes, in addition to improving your overall well-being.

Smoking: Stopping smoking is one of the most important steps to take for a healthy heart. The health risks associated with smoking include atherosclerosis, an increased risk of blood clots, reduced oxygen in the blood, increased blood pressure and cholesterol, and heart disease.

Excessive alcohol consumption: There is some evidence that a moderate amount of alcohol (particularly red wine) may be good for your heart; however, too much alcohol can contribute to health problems including heart disease. If you do drink alcohol, limit yourself to no more than one or two standard drinks (one pint of regular strength lager; one 5-oz glass of wine; 1-oz of spirits) a day, to a weekly maximum of nine drinks for women and fourteen drinks for men. **Remember;** for certain medications you will be advised to avoid alcohol (for example methotrexate), make sure your healthcare provider is aware of your alcohol consumption.

Stress: Stress presents double-trouble for people with psoriasis, increasing not only your risk of heart disease, but also psoriasis flares. It is important to learn how to reduce and deal with your stress in a healthy way rather than resorting to unhealthy strategies, such as smoking, drinking and overeating. Exercise, yoga and relaxation techniques can be effective. You may wish to talk to your doctor about counselling or medication. There may also be other complementary therapies that may help you to reduce your levels of stress.

What you cannot change?

Some risk factors for heart disease cannot be changed. These include:

- **Sex:** Men over the age of 55 and post-menopausal women are at the greatest risk of heart disease.
- **Increasing age:** The risks of heart attacks and stroke increase with age.
- **Race/Ethnicity:** People of African or South Asian descent are more likely to have diabetes and high blood pressure, and are therefore at greater risk of heart disease and stroke.
- **Family History:** If a brother, sister or parent developed heart disease before the age of 55 or had a stroke before the age of 65 you are at higher risk.

If, in addition to your psoriasis, you have any of the risk factors for heart disease that you cannot change, it is especially important to try and reduce those risks which you can change.

If you are worried about any of the issues outlined above, talk to your doctor or healthcare advisor, who will be able to provide you with reassurance and explanations of your individual risk factors.

Take ACTION!

- **Do not smoke.** Or initially take steps to reduce the amount you smoke.
- **Maintain a healthy weight.** If your waist measures more than 102 centimetres (40 inches) for men or 88 centimetres (35 inches) for women, talk to your GP about weight loss strategies.
- **Eat a balanced diet,** including whole grains, cereals, vegetables, fruit, lower-fat dairy products, leaner meats and food prepared with little to no fat. Avoid saturated and trans-fats, instead use olive oil, which is high in desirable mono-unsaturated fats.
- **Control your portion sizes.** An easy method for determining meal portions is to use two open hands as your measure for vegetables; one closed hand for carbohydrates, such as pasta or rice; one closed hand for fruit; the palm of your hand for meat or protein alternate; and the tip of your thumb for fats, such as oil, margarine or butter.

- Limit alcohol intake.
- Deal with stress in a healthy way.
- Be physically active for at least 30 minutes most days of the week.
- Drink more water, although there is no strict guideline, replacing fluids is important and you should aim to drink at least 2-3 litres of water a day, particularly during warm or hot weather.

Is it your heart?

It is important that you are able to recognise the warning signs of heart disease and stroke.

Angina:

- Pain: discomfort or pain, generally in the chest, neck, jaw and/or shoulder that can be triggered by physical activity but eased by rest. The pain may feel like a heaviness, tightness or pressure.
- Shortness of breath (with or without chest pain), generally triggered by physical activity and relieved by rest.

If you notice these symptoms seek the attention of your GP as soon as possible.

Heart Attack:

- A heart attack may begin with the angina-like symptoms described above (pain and shortness of breath). The pain is usually very severe, comes on suddenly and does not go away with rest.
- Nausea, indigestion or vomiting.
- Sweating or cool, clammy skin.
- Feelings of fear, anxiety, denial.

Stroke:

- Sudden weakness or sudden numbness in the face, arm or leg, especially on one side of the body, even if temporary.
- Sudden confusion or difficulty speaking or understanding, even if temporary.
- Trouble seeing with one or both eyes.

If you notice symptoms suggestive of a heart attack or stroke seek emergency medical attention as soon as possible.

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Always consult your own doctor or your healthcare provider.

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The Charity for People with psoriasis and psoriatic arthritis

**PAPAA, the single identity of the
Psoriatic Arthropathy Alliance and the
Psoriasis Support Trust.**

**The organisation is independently funded and is a
principal source of information and educational
material for people with psoriasis and psoriatic
arthritis in the UK.**

**PAPAA supports both patients and professionals by
providing material that can be trusted (evidence
based), which has been approved and contains no
bias or agendas.**

**PAPAA provides positive advice that enables people
to be involved as they move through
their healthcare journey in an informed way,
which is appropriate for their needs and any
changing circumstances.**

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