

**Research Article****Prevalence of Anxiety and Depression with Psoriasis at a Tertiary Care Centre****Manjunath M<sup>1\*</sup>, Ramprasad K S<sup>2</sup>, Prabhudev M Hiremath<sup>3</sup>, Vijaykumar S<sup>4</sup>**<sup>1</sup>Associate Professor, Dept of Dermatology, Venerology and Leprosy, Shivamogga Institute of Medical Sciences, Shivamogga, Karnataka, India<sup>2</sup>Associate Professor, Dept of Psychiatry, Shivamogga Institute of Medical Sciences, Shivamogga, Karnataka, India<sup>3</sup>Intern, Dept of Psychiatry, Shivamogga Institute of Medical Sciences, Shivamogga, Karnataka, India<sup>4</sup>Clinical Psychologist Department of Psychiatry, Shivamogga Institute of Medical Sciences, Shivamogga, Karnataka, India**\*Corresponding author**

Manjunath. M

**Email:** [manjunath.derma@gmail.com](mailto:manjunath.derma@gmail.com)

---

**Abstract:** Psoriasis is a chronic skin disorder with multisystem involvement. Musculoskeletal, cardiovascular, psychological, etc. A cross sectional study is done to know the prevalence of mood disorders in psoriatic patients. Many studies have been conducted regarding same topic with the results indicating higher prevalence of mood disorders with psoriasis. In that depression is found to be most prevalent. Patients diagnosed to have psoriasis attending dermatology department at Shivamogga Institute of Medical Sciences, Shivamogga were serially selected with their consent and the evaluation of the mood problems was done at department of psychiatry using Beck's depression inventory and Hamilton's anxiety scale to assess the prevalent mood status. The Results Though depression is common mood disorder in other studies, in our study anxiety found to be more prevalent. It needs replication.**Keywords:** Sims, anxiety and depression.

---

**INTRODUCTION:**

Psoriasis is a common genetically determined disease of the skin. Chronic disorders tend to have effect on the persons work, attitude and outcome of his activities. This in turn has an effect on his family and society also. The individual problems will lead to sufferings like decreased in self esteem, working ability affecting the financial outcome. Psychiatric illness with psoriasis reduces the quality of life. Psychiatric disorders are most commonly associated with psoriasis vulgaris type and psoriatic arthritis type. The distribution of anxiety and depression in the psoriatic patients are determined and their effects are matched with age and sex attending the dermatology Department at tertiary care centre (Mc Gann Teaching Hospital, Shivamogga).

**REVIEW OF LITERATURE:**

Psoriasis is a multisystem disease predominantly affects 2% of the population. The distribution of psychiatric disorders in psoriatic patients is as high as 70% [1]. Another study reveals 71.2% of patients of psoriasis with psychiatry problems and in that 17.5% were moody and 12.5% with anxiety [2]. National Psoriasis foundation reports 24% prevalence of depression among psoriatic patients [3]. Anxiety and depression always not associated with the extent of the disease. A study promises improvement in the mood

disorders by reducing the severity of psoriasis [4]. A study conducted by university of Toronto has shown, the higher rate of psychiatric disorders associated with arthritis type. Study shows the combination of joint and skin disease increases the risk for depression [5, 6]. A Study shown higher risk of anxiety than depression in women than men in psoriatic arthritic patients [7]. In contrast another study showed higher rates of both anxiety and depression among females [8]. Our aim is to study prevalence of anxiety and depression in psoriasis. SSRI namely paroxetine, fluoxetine used in mood disorders among psoriatic patients shown improvement in psoriasis [9]. American medical association journal stated that one case of depression for every 39 patients with severe psoriasis and one case of anxiety for 123 psoriasis cases. A study shows drugs in the treatment of depression in psoriatic patient's triggered psoriasis itself [10]. Multiple regression analysis was done, but did not show any influence of psychiatry problems with reference to distribution of psoriasis [11]. Psychological factors were much stronger determinants of disability with psoriasis than severity, location or duration of psoriasis [11].

**MATERIAL AND METHODS**

In our hospital a cross sectional study was done among patients with psoriasis attending the department of dermatology and screened for their prevalent mood

status with the onset of disorder. Patients of all age and sex were included, no bar on duration of illness. Consent was obtained from the patient prior to the study after briefing them about the procedure. Intervention was done only for psoriasis but not for psychological problems. Psychiatric intervention was considered for only patients who voluntarily opted for it. Inclusion criteria: Patients from all age. Not associated with any other skin disease. Exclusion criteria: patients known to have had skin illness before onset of psoriasis.

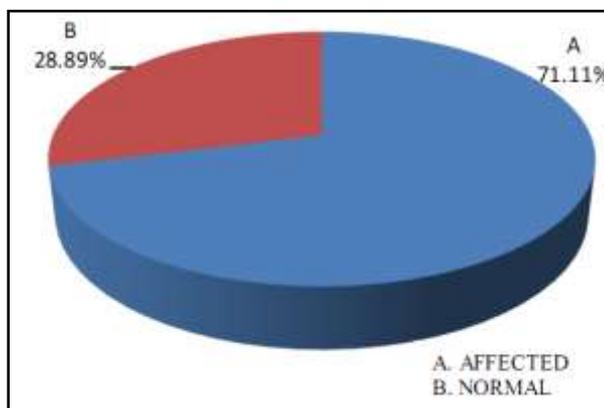
Unwilling Patients Mental sub normality, substance use disorders, corticosteroid intake.

**RESULTS**

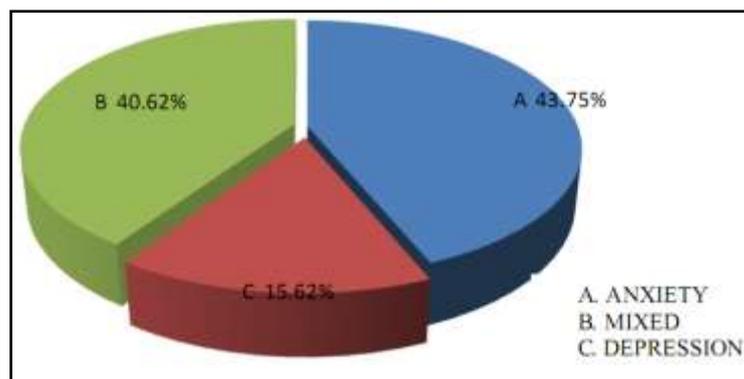
In this study, we found that Anxiety is more prevalent mood disorder. Mixed disorders were more prevalent than depression. Anxiety is more common in age group of 40-60 years. Mixed disorder is more common in 20-40 years.

**Table 1: Distribution of mood states in different ages**

	<20 YEARS		20-40 YEARS		40-60 YEARS		>60 YEARS	
	M	F	M	F	M	F	M	F
ANXIETY	NIL	NIL	2	1	8	2	1	NIL
DEPRESSION	NIL	NIL	1	1	1	2	NIL	NIL
MIXED DISORDER	1	1	4	1	2	1	3	NIL



**Fig-1: Percentage of distribution**



**Fig-2: Distribution of mood states**

**DISCUSSION**

In major studies across the world it is shown that mood disorders are common than other psychiatric disorders in psoriatic patients. Study conducted in our tertiary care centre among 45 patients suffering from psoriasis of different types 32 of them were having mood disorders, that is 71.11% and 28.89% were normal with no psychological problems. Among them 14(43.75%) patients were suffering from anxiety, 13(40.62%) patients had mixed mood disorders, least is the depression where 5(15.62%)

patients were suffering from it. Unlike all other studies depression is being more common than anxiety. But our study came up with the result that anxiety is more common than depression. Depression is found be even less prevalent than mixed anxiety and depression states.

**CONCLUSION**

Mood disorders especially anxiety is more prevalent in the cross sectional study done in this study. As this is a cross sectional study done in a

tertiary care centre, this needs further application at different centers. Ethical clearance has been obtained.

#### REFERENCES

1. He sham abd el moati zeher, Mohammed Ezzat Amin, Mona yehia rakhaway, Faculty of medicine, cairo university. Egypt journal of psychiatry. 2010; 31(2): 57-63.
2. Mazett A, Mazzetta A, Saavi GC, Andreoli E; Psoriasis, stress & psychiatry; psychodynamic characteristics of stressors. Acta dermato-venereologica supplementum, 1994; 186: 62-64.
3. National psoriasis foundation clinical consensus on psoriasis co morbidities and recommendations for screening. Kimball AB, Gladman D, Gelfand JM; Journal of the American Academy of dermatology, 2008; 58: 1031-1042.
4. Mental health self assessment in patients with moderate to severe psoriasis: an observational , multicenter study of 1164 patients in spain (the VACAP study). Actas Dermosifiliogr, 2013; 104(10): 897-903. Doi:10.1016/j.ad.2013.04.014.
5. Mood disorders common in psoriatic arthritis, but poorly recognized and treated by Rita Baron-Faust. April 09, 2014.Psoriatic Arthritis, Arthritis, Musculoskeletal citations, Rheumatic diseases. www.rheumatology network com.
6. Depression and anxiety in psoriatic disease: Prevalence and associated factors. McDonough E, Ayearst R, Eder L, J Rheumatol. 2014; (Epub ahead of print)
7. Mood disorders common in psoriatic arthritis, but poorly recognized and treated. By Rita Baron-Faust. April 09, 2014.Psoriatic Arthritis, Arthritis, Musculoskeletal citations, Rheumatic diseases. www.rheumatology network com.
8. Prevalence of patient- reported comorbidities in early and established psoriatic arthritiscohorts. Khraishi M, MacDonald D, Rampakakis E; clin Rheumatol. 2011; 30: 877-85.
9. Thorslund K; Sweden 2006-08.Use of serotonin reuptake inhibitors in patients with psoriasis is associated with a decreased need for systemic psoriasis treatment: a population-based cohort study.
10. Abdullah akpinar, Murat ali, Rumeysa yaman; psoriasis triggered by bupropion in a patients with Major depression. Journal of mood disorders. Periodical of Turkish association for psychopharmacology. 2013; 3(4): 186-8.
11. The contribution of perceptions of stigmatization for disability in patients with psoriasis .Helen L Richards, donal G fortune, Christopher E M Griffiths, Chris. Journal of psychosomatic research. 2001; 50: 11-15.