

## INTRODUCTION

**T**reating patients with psoriasis offers clinicians the opportunity to get back to their medical roots. Because the disease is multifaceted and challenging to manage, clinicians need to look beyond the skin for clues as to how they can best improve and relieve patients' symptoms and signs.

This supplement represents the perspectives of myself and three of my colleagues, all respected and prolific research dermatologists:

**April W. Armstrong, MD, MPH**, sets the stage with a primer on the pathophysiology of plaque psoriasis and how drug discovery has led to breakthrough concepts of inflammation and the systemic nature of the disease. In her thorough walkthrough of the therapeutic landscape of treatment for patients with plaque psoriasis, Dr Armstrong discusses the benefits of the major therapeutic classes for plaque psoriasis, from topical agents to biologics.

**Kenneth B. Gordon, MD**, discusses the controversial concept of treating to target. The question he poses is: Whose target is it? Although traditional measures such as the Psoriasis Area and Severity Index and Physician Global Assessment might appear logical to clinicians, he emphasizes that patients' individual needs, especially quality-of-life concerns, are equally important and suggests methods that are more patient-centric. In a case vignette, Dr Gordon illustrates the importance of selecting the right starting therapy—one that balances patients' needs with appropriate efficacy.

**Jashin J. Wu, MD**, offers practical suggestions for helping patients obtain the greatest benefit from treatment. His sensible approach considers patients' ages, lifestyles, and concomitant medications for maintaining a therapeutic regimen that sets the stage for success. Dr Wu also provides tips for mitigating risks with psoriasis treatment.

In my article, I address one of my favorite topics within the psoriasis spectrum: how comorbidities affect the course of the disease. I review the common diseases that ride alongside psoriasis, including arthritis/psoriatic arthritis and cardiovascular disease—as well as some that might not have been considered. I also recommend strategies to avoid flares and suggest therapeutic options that might treat the full spectrum of psoriasis.

Our hope is that, even if you do not routinely see patients with psoriasis, you will come away from this supplement with a greater understanding of this multisystemic disease. We will encourage you to look beyond the skin when treating patients with psoriasis, or at least to guide these individuals to find the right clinicians to address their needs. If we succeed in this endeavor, we will show that medical dermatology is still interesting and rewarding intellectually. We hope also to show that dermatologists and dermatologic clinicians need to be at the forefront in understanding, diagnosing, and treating psoriasis and all its manifestations and comorbidities.

M. Alan Menter, MD  
Chairman, Division of Dermatology  
Baylor University Medical Center  
Dallas, Texas

---

Publication of this CME/CE article was jointly provided by University of Louisville, Postgraduate Institute for Medicine, and Global Academy for Medical Education, LLC, and is supported by an educational grant from Ortho Dermatologics. Dr Menter has received an honorarium for his participation in this activity. He acknowledges the editorial assistance of Suzanne Bujara, medical writer, and Global Academy for Medical Education in the development of this continuing medical education journal article.

---

M. Alan Menter, MD, *Advisory Board*: AbbVie Inc., Afecta Pharmaceuticals, Inc., Amgen Inc., Boehringer Ingelheim, Eli Lilly and Company, Janssen Biotech, Inc., LEO Pharma Inc., Ortho Dermatologics, Promius Pharma, LLC. *Consultant*: AbbVie Inc., Afecta Pharmaceuticals, Inc., Amgen Inc., Avillion LLP, Boehringer Ingelheim, Eli Lilly and Company, Galderma S.A., Janssen Biotech, Inc., LEO Pharma Inc., Menlo Therapeutics Inc., Novartis Pharmaceuticals Corporation, Ortho Dermatologics, Pfizer Inc., Promius Pharma, LLC. *Investigator*: AbbVie Inc., Amgen Inc., Boehringer Ingelheim, Celgene Corporation, Dermira, Inc., Eli Lilly and Company, Janssen Biotech, Inc., LEO Pharma Inc., Novartis Pharmaceuticals Corporation, Pfizer Inc., Regeneron. *Speakers Bureau*: AbbVie Inc., Amgen Inc., Janssen Biotech, Inc., LEO Pharma Inc., Ortho Dermatologics, Promius Pharma, LLC.

---

Address reprint requests to: M. Alan Menter, MD, 3900 Junius Street, Suite 145, Dallas, TX 75246; amderm@gmail.com