THE PREVALENCE OF PLAQUE PSORIASIS, PSORIATIC ARTHRITIS AND THE OVERLAP BETWEEN THEM IN NORWAY

INTRODUCTION

Psoriasis [PSO] is a chronic disease estimated to affect 1.5% to 8.5% of the Norwegian population [1,2], with the most common type being the plaque psoriasis. Psoriatic arthritis [PsA] is a chronic form of arthritis with reported prevalence around 0.2% [4,5]. Several studies have reported a wide range of proportions that reflect the share of patients with PSO that are expected to develop PsA [6% - 42%] [6]. The proportion of overlap between PSO and PsA has not been frequently studied in Norway. The disease burden of PsO and PsA is substantial and comparable to other major severe chronic diseases such as rheumatoid arthritis [7,8]. Patients with PSO and PsA require specialist care (i.e. outpatient specialist visits or inpatient stays), and information about the consumption thereof is lacking in Norway. The primary objective of this study was to estimate the prevalence of patients with plaque psoriasis (ICD-10 code L40.0) and PsA (ICD-10 code L40.5) seeking specialist care and the overlap between these two patient groups, as measured by reported diagnosis in the National Patient Registry (NPR) in Norway in 2014. The secondary objective was to investigate and describe the type and amount of specialist care services consumed by each respective patient group in Norway, in 2014, as reported in the NPR.

RESULTS

• The prevalence of plaque psoriasis patients seeking specialist care in Norway was estimated to be 0.174% in the adult population in 2014 (Table 1).
• The prevalence of PsA patients seeking specialist care in Norway was estimated to be 0.232% in the adult population in 2014 (Table 1).
• 14.0% of the patients with plaque psoriasis seeking specialist care in Norway also had a PsA diagnosis, resulting in a joint prevalence of the patient population seeking specialist care in Norway diagnosed with both plaque psoriasis and PsA equal to 0.024% in the adult population in 2014 (Table 1).

Table 1: Total number of unique adult patients with PSO and PsA seeking specialist care in the NPR and their prevalence among the Norwegian adult population in 2014

<table>
<thead>
<tr>
<th>ICD-10 codes</th>
<th>Total number of unique patients seeking specialist care in 2014</th>
<th>Prevalence among adult population 2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>L40.0 (L40.0 - L40.9)</td>
<td>16,243</td>
<td>0.409%</td>
</tr>
<tr>
<td>L40.5</td>
<td>9,248</td>
<td>0.232%</td>
</tr>
<tr>
<td>L40.0 and L40.5</td>
<td>946</td>
<td>0.024%</td>
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</tbody>
</table>

CONCLUSIONS

• The prevalence estimated for the patients with PsA seeking specialist care is in line with the PsA prevalence reported in the literature [4,5], which potentially indicates that the majority of the PsA patients are primarily treated through specialist care services.
• Despite the smaller total number of unique patients, the plaque psoriasis patients consumed in total more specialist care services than the PsA patients. The total number of inpatient hospital days was comparable between the two patient groups, with plaque psoriasis patients having fewer but longer hospital visits.
• Further research is needed in order to estimate the prevalence of the overall PSO and PsA patient populations and to capture the full picture of the health care recourses consumed by these populations. This could be achieved by also considering data from the primary care setting and data from a longer time period.

REFERENCES


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