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Diseases of the digestive system in young patients with severe plaque psoriasis: A hospital-based study

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Background: Psoriasis is associated with multiple other comorbidities, including gastrointestinal tract (GIT) and liver diseases (LD). But no study has been performed in Russian population of Psoriasis (PsO) patients.

Objectives: To evaluate the prevalence of GIT and LD comorbidity in a hospital-based cohort of patients (pts) with severe PsO.

Methods: 330 pts (234 Male (M)/96 Female (F)), mean age $39.9 \pm 0.9 / 38.05 \pm 1.3$ years accordingly, mean PASI 49.4 ± 0.56 , PsO duration 11.6 ± 0.6 years were included. PsO pts with GIT and LD, including diseases of oesophagus, stomach and duodenum (K20–K31), disorders of gallbladder, biliary tract and pancreas (K80–K87), alcoholic and toxic liver disease (K70–K77) (LD), viral hepatitis (B15–B19) (VH) were identify in the hospital database reporting and coding by International Statistical Classification of Disease and Related Health Problems (ICD-10) between 2010-2011 years. $M \pm m$, t-test, (%) were calculated. All $p < 0.05$ were considered to indicate statistical significance.

Results: 166 (103-M/63 - F) out of 330 pts (50.3%) had GIT

and LD. M and F pts were at the same age. No significantly differences were found in the prevalence of GIT and LD coding as K20–K31 between M and F pts – in 47 out of 103 pts (45.6%) and in 29 out of 63 pts (46.0%) accordingly ($p < 0.05$). GIT and LD coding as K80–K87 were found in significantly more cases in M pts compare to F pts - in 23 out of 103 pts (22.3%) and in 23 out of 63 pts (36.5%) accordingly ($p < 0.05$). LD coding as K70–K77 were found in significantly more cases in M pts compare to F pts - in 19 out of 103 pts (18.4%) and in 3 out of 63 pts (4.8%) accordingly ($p < 0.05$). VH coding as B15–B19 were found in significantly more cases in M pts compare to F pts - in 29 out of 103 pts (28.2%) and in eight out of 63 pts (12.7%) accordingly ($p < 0.05$).

Conclusions: GIT and LD comorbidities are common for hospital-treated cohort pts with severe plaque PsO. Young M pts with severe plaque PsO significantly often suffer from LD and VH compared to F pts. Young F pts with severe plaque PsO tend to suffer from diseases of the gallbladder, biliary tract and pancreas compared to M pts.

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