



DOCTOR DISCUSSION GUIDE

Managing Psoriatic Arthritis

Psoriatic arthritis is a chronic condition, and being diagnosed with it may feel a bit overwhelming. However, understanding your condition will best help you take control of its symptoms. Asking the right questions during your conversation will help you know what to expect and how to better navigate your condition. Familiarize yourself with these common terms before your appointment to help facilitate your discussion.

Vocabulary to Know

Your doctor might mention these common terms. Here's what they mean.

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| Psoriasis | A skin condition which causes skin cells to build upon the surface of the skin and form into red, itchy, dry, and scaly patches. About 30 percent of people with psoriasis will develop psoriatic arthritis. |
| Rheumatologist | A doctor that specializes in diagnosing and treating musculoskeletal and rheumatic diseases. |
| Corticosteroids | Anti-inflammatory drugs. For psoriatic arthritis, they help to quickly reduce swelling and pain. |
| Arthritis Mullins | A very rare and severe type of psoriatic arthritis where bone and joint tissue wear out and disappear. Other types of psoriatic arthritis are symmetric arthritis, asymmetric arthritis, distal interphalangeal predominant (DIP), and spondylitis. |
| Rheumatoid Factor Test | A test used to confirm the diagnosis of psoriatic arthritis. The symptoms of psoriatic arthritis and rheumatoid arthritis are very similar, and this test checks for the presence of an antibody called rheumatoid factor in your blood. If it's not present, then psoriatic arthritis can be confirmed. |
| Disease-Modifying Antirheumatic Drugs | Drugs, also known as DMARDs, that slow the progression of psoriatic arthritis and stop it from destroying your joints. They also help with swelling and pain. |
| Biologics | Drugs similar to DMARDs in that they help prevent the worsening of psoriatic arthritis. In fact, they are technically a type of DMARDs, but are always differentiated because biologics are stronger and target particular inflammatory processes instead of the entire immune system. |



Questions to Ask

These questions will help you start a conversation with your doctor about how to best manage psoriatic arthritis.

About Symptoms

- What possible triggers should I avoid other than stress and cold weather?
- Are there any signs of my psoriatic arthritis getting worse that I should watch out for?

About Causes & Risk Factors

- I've never had psoriasis, will I develop it eventually?
- Will my psoriasis get worse?

About Diagnosis

- How sure are we that I don't have rheumatoid arthritis or some other form of arthritis?
- Will I need to undergo a skin biopsy to confirm my psoriatic arthritis?
- Exactly which of my joints are affected?

About Treatment

- Will I have to be on pain medication permanently?
- Will I need joint replacement surgery?
- Will I be referred to a rheumatologist?
- What are the side effects of the medication I'll be taking?
- I understand that delaying treatment can lead to irreversible joint damage. How soon will I start my treatment plan?

About Living With Psoriatic Arthritis

- I understand that stress can worsen my condition. Should I see a therapist?
- Are there any exercises I should avoid?
- I'm aware that having psoriatic arthritis increase my risk of diseases like hypertension and diabetes. What lifestyle changes do I have to make to prevent them?
- What changes will I have to make to my diet?
