

AN INTRODUCTION TO PSORIASIS AND ITS CAUSES

Tahiyeed Riyaz¹, Jyoti Negi², Dar Muneeb Hamid³

¹Student of Operation Theatre technology at Swami Vivekananda Group of Institutes Chandigarh, India.

^{2,3}Assistant Professor Swami Vivekananda group of Institutes Chandigarh, India.

DOI: <https://www.doi.org/10.58257/IJPREMS32596>

ABSTRACT

Psoriasis can be defined as "chronic inflammatory skin disease", which, if explained, can be said to be a skin condition where the skin cells are generated at a very high level compared to normal cells, causing abnormal skin size and shape at a specific point, or we can say at a specific skin part like the skull, shoulder, knees, back etc .In this condition, skin posture starts to become white, pale, dry segments, leading to the skin fetching abnormally, which at a point can be itchy, painful, and can ooze the white or colorless fluid, and some time can also lead to bleeding. It can either occur due to the inside conditions of the body or be caused by outside environmental factors.

1. INTRODUCTION

Psoriasis was firstly discovered in 1809, by the English doctor Robert Willan . Who further categorized different skin conditions he was the first person to provide a description of different types of psoriasis . He was the first person who wrote about the progression of the condition.

Its being Said that Psoriasis is the longest standing skin condition to exist , assumed to exist around 400BC The mechanism of psoriasis can depend on three main factors:1) Genetic: As already said, this can happen due to the abnormal working of cells, We already know that the body cells work on the stimulus of the nervous system and the nervous system postures are based on the genetic parts and postulates that were transferred from our ancestors Psoriasis can transmit from first-level generation or be dominant from prolonged generation.

If a patient has psoriasis or has a history of psoriasis, they can transmit it to the next generation2) immune: auto-immune actions can also be a factor in psoriasis. When the immune system does not work properly, it can boost the level of energy in the derma cells, which can be the reason for the fast growth of derma cells, which is referred to as psoriasis. It depends on the response from which the intensity of cell growth can be handled. In this situation, there is also a probability that the immune system does not work properly due to the use of consistent antibiotics or some of the narcotic drugs.3) Environmental Factor:

Psoriasis can also happen due to an infection of the outer layer of the skin, which can be due to the toxins as well as some of the abnormal growth elements present

inside the lotions or skin creams we continuously use to apply to the skin. Also, the mineral intensity of water can help increase the growth of psoriasis..

General Clinical View: It is a disease related to skin where the skin of a specific part grows on a rapid speed . The normal skin-shedding time of a human body is 15–25 days, while in psoriasis, the skin starts shedding every 3–4 days. It is an inflammatory infection affecting around 3% of the total world population. It has an adverse health impact on the body as well as on the economy of the patient. It is a situation often misunderstood by the doctors (dermatologists). Although many people underestimate the situation, what afterwards leads to heavy dermatologic damage?

Some of the clinical factors affecting Psoriasis are :

- 1) Obesity.
- 2) Cardio Vascular Diseases (CVD's).
- 3) Dyslipidemia.
- 4) Hypertension etc. These diseases can enhance the level of Psoriasis.

In Psoriasis a patient suffer from different conditions of physical as well as mental consequences like;

- 1) Mood disorders.
- 2) Inflammatory Bowel Disease.
- 3) Depression, Anxiety.
- 4) Suicidal thought.
- 5) Kidney Disease.
- 6) Malignancy, etc.

2. REVIEW OF LITERATURE

Mechanism of beta blocker included Psoriasis and Psoriasis de Novo at cellular level.

In this Blog the Researcher has written about the effect or we can say the adverse effect of Beta Blockers that are been given for other medication . Although in this research paper they cant specify the main mechanism but according to this paper ,beta blockers change the intracellular changes in Calcium , affecting both Keratinocyte proliferation and Granulocyte function which decreases CAMP (Cyclic adenosine mono-phosphate)levels . Although many research Articles suggest this as main cause of Psoriasis De Novo

Alcohol in Psoriasis: From Bench to Bedside by

In this paper, the authors have written about the molecular background and pathways of cellularlevel effects of alcohol on the dermatic condition of the human body. This paper gives a detailedoverview of the effects of alcohol on dermatic cells. Here, the different situations are also specified, as is the change in mechanism due to the intake of alcohol in the body. Author has specified the hormonal secretion which differs due to the intake of alcohol .So this paper concludes on the effects of alcohol on psoriasis

In this article we have got the combined numeric blocks of factors triggering Psoriasis. According to past surveys from 1982–2012, the exacerbating factors for the Japanese population were stress (6.4% to 16.6%), seasonal factors (9.7% to 13.3%), infection (3.5% to 8.3%), sun exposure (1.3% to 3.5%), and β -blockers (0.9% to 2.3%).The comorbidities include hypertension (1.1% to 27.8%), diabetes mellitus (DM) (7.0% to 13.9%), cardiovascular disease (4.2% to 8.1%), and tonsillitis (3.55 to 5.4%). As already mentioned repeatedly, the most common factor in psoriasis is genetic background. This article concludes with many important information. However, the impact and intensity of the disease vary from patient to patient, and the approaches are changing and being established to prevent psoriasis

Diagnosis and management of psoriasis.

This short paper is actually meant for the overview and awareness of the patients about the first view, diagnosis, and seeks of treatment for the betterment of the patient .Also writing about the impacts of psoriasisauthos; it has a very bad emotional as well as psychosocial effect. Clinical and skin biopsy is the best ways to ensure the occurrence of psoriasis.

The risk factors of psoriasis are divided into two factors:

EXTRINSIC	INTRINSIC
Mechanical Stress	Metabolic syndrome
Air pollution	Obesity
Drugs	Diabetes mellitus
Vaccination	Dyslipidemia
Infection	Hypertension
Smoking, Alcohol	Mental stress

This article concludes with many important information. However, the impact and intensity of the disease vary from patient to patient, and the approaches are changing and being established to prevent psoriasis.

Treatment for Plaque Psoriasis In This article some Vitamins and Combined materials (natural or synthetic) are being specified like Vit. D , Dithranol, Coal tar, corticosteroid etc.

There is also mentioned about the combined effect of Corticosteroid and Vit. D as alone Corticosteroids are itchy and cause irritation and are sensibly burning to the psoriatic part. But if Corticosteroid is mixed with Vit. D it doesn't show any evidence of acute risk factor. T

he author of this article has concluded that "Corticosteroids perform at least as well as Vit. D analogs and they are associated with a lower incidence of local adverse events. However for people with chronic Plaque Psoriasis receiving long term treatment with Corticosteroids, there remains a lack of evidence about the Risk of skin dermal atrophy. Further research is required to inform long term Maintenance treatment and provide appropriate safety data Evidence based (S3) guidelines for the treatment of Psoriasis Vulgaris.

In this article the author has written about the explanation to optimize the treatment of psoriasis in Germany . This is an article which diverts its focus from medication and explains about the induction therapy in cases of Mild , Moderate , and severe Plaque type psoriasis in adult In this article Author has written also about the contraindications and adverse drug reactions and drug interactions as well as estimates of practicability and cost of medication .

3. CONCLUSION

After going through the following papers I conclude that Psoriasis is a chronic disease and the root cause can differ from individual to individual. The effect of psoriasis also differ as per the viability of an individual . There are also different medication on the basis of effect of the disease . As far as considering the following papers the induction therapy method is a better option than using drugs . But there are some natural parts of plants which if processed can show a better effect , which can be applied externally on the surface and also there are some natural herbs that can create resolvable effect on this disease . those medicines should be taken under consideration.

4. REFERENCES

- [1] Vanessa M Awad , Sirisha Sakhamuru , Srikala Kambampati , Shehnaz Wasim , Bilal Haider Malik :
- [2] Zita Szentkereszty-Kovacs, Krisztian Gaspar, Andrea Szegedi, Lajos Kemeny, Dora Kovacs, and Daniel Torocisk were published on July 7, 2021.
- [3] Whan B Kim, Dana Jerome, Jensen Yeung Published: Canadian Family Physician 63(4), 278–285, 2017.
- [4] Koji Kaniya, Megumi Kishimoto, Junichi Sugai, Mayumi Komine, and Mamitaro Ontsuki. Publication: Department of dermatology, Jichi Medical University, 3311-1 yakushiji, Shimotsuke Japan. 2010, 21(18), 4347.
- [5] Anne R Mason, James Mason, Michael Cork, Gordon Dooley, Helen Hancock .Cochrane Database of Systematic Reviews, 2013
- [6] By, Alexander Nest , Ina B Kopp , Matthias Augustin , Kirstin Benita , Wolf Henning Boehncke Markus Follman , Markus Friedrich , Berthold Rzany .First Published ; 05| July|2017