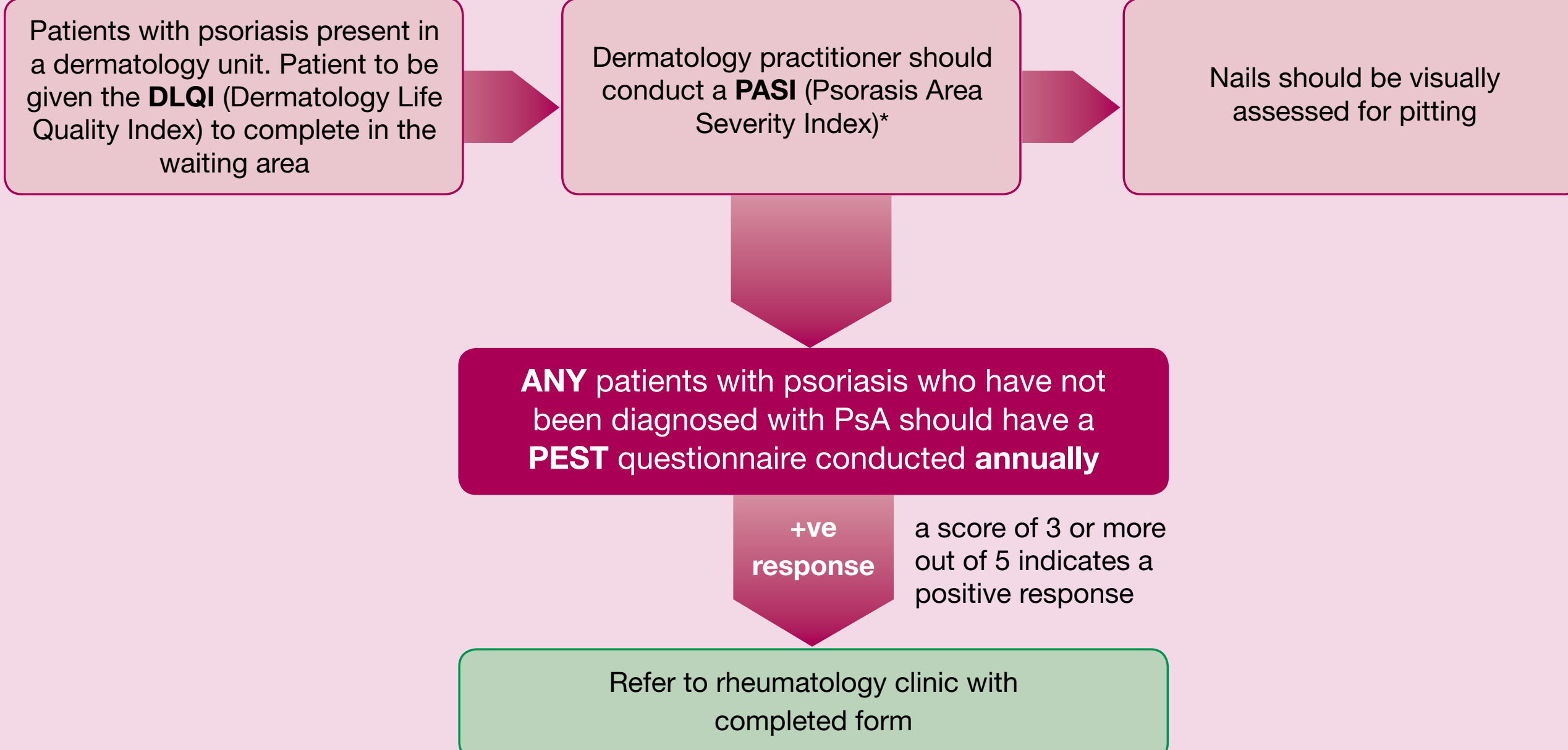


Assessing Psoriatic Arthritis

Psoriatic arthritis (PsA) is a complex condition that involves many body areas. To optimise best practice, all patients with psoriasis should be screened for PsA to help prevent irreversible joint damage. The recommended assessments are PASI for the skin and PEST for the joints.

ASSESSMENT AND SCREENING OF PSORIATIC DISEASE IN DERMATOLOGY CLINICS

The recommended approach for assessing and screening patients is outlined below. Details on the PASI and PEST are shown on this poster. A training manual including short videos on how to conduct all assessments is available.



* A video is available on how to conduct assessment

About PEST (Psoriasis Epidemiology Screening Tool)

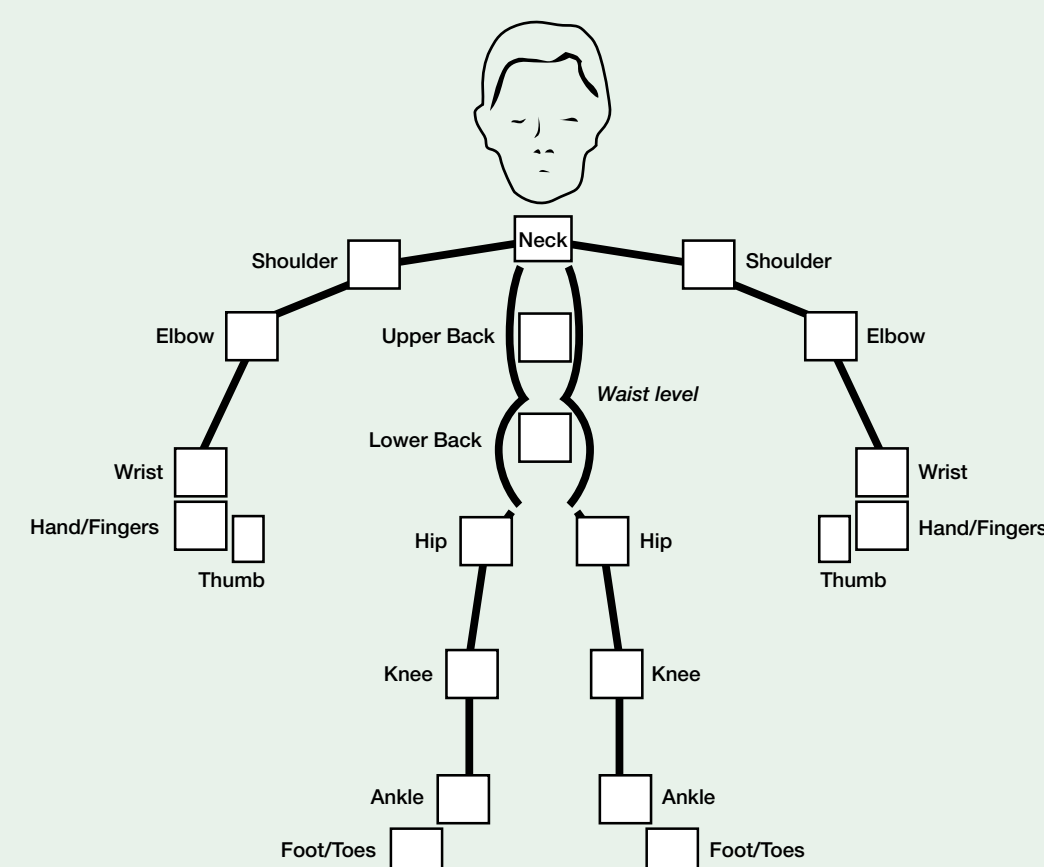
Any patients with psoriasis who have not been diagnosed with PsA should have a PEST questionnaire annually.

A total score of 3 or more is indicative of psoriatic arthritis and patients should be referred to a rheumatology unit for further assessment.

Please ask your patients the questions below and score 1 point for each question answered yes.

In the drawing below, please tick the joints that have caused you discomfort (i.e. stiff, swollen or painful joints).

	Yes	No
1. Have you ever had a swollen joint (or joints)?	<input type="checkbox"/>	<input type="checkbox"/>
2. Has a doctor ever told you that you have arthritis?	<input type="checkbox"/>	<input type="checkbox"/>
3. Do your finger nails or toenails have holes or pits?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have you had pain in your heel?	<input type="checkbox"/>	<input type="checkbox"/>
5. Have you had a finger or toe that was completely swollen and painful for no apparent reason?	<input type="checkbox"/>	<input type="checkbox"/>
Total	<input type="text"/> /5	



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A total score of 3 or more out of 5 is positive and indicates the need for rheumatology follow up

About PASI

PASI is derived from skin assessment of the body in four regions: head and neck, arms, trunk (including groin and axillae) and legs (including buttocks). The assessment of the severity of the symptoms erythema, scaling and induration is performed separately for each region. The extent to which each of the four regions of the body is affected by psoriasis is also assessed.

Extent score	Grade
0	None
1	1% to 9%
2	10% to 29%
3	30% to 49%
4	50% to 69%
5	70% to 89%
6	90% to 100%

Severity Score	Erythema	Scaling	Induration
0 – None	No redness	No scaling	No elevation
1 – Mild	Light red	Predominantly fine scaling covering part of the lesion	Slight, but definite elevation; typically edges indistinct or sloped
2 – Moderate	Red, but not dark red	Fine to rough scaling covering a large part of the lesion	Moderate elevation with rough or sloped edges
3 – Severe	Dark red	Rough, thick scaling covering a large part of the lesion	Marked elevation; typically with hard or sharp edges
4 – Very severe	Very dark red (changing to purple)	Very rough, very thick scaling totally covering the lesion	Very marked elevation; typically with hard, sharp edges

Extent			Severity				
Area	Extent score (0-6)	Total score	Erythema (0-4)	Scaling (0-4)	Induration (0-4)	Total severity	Total extent x total severity
Head & Neck	<input type="text"/> x 0.1	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Arms	<input type="text"/> x 0.2	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Trunk	<input type="text"/> x 0.3	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Legs	<input type="text"/> x 0.4	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
PASI = extent x severity							<input type="text"/> /72

Example of nail pitting

