



AAD-NPF Release the First, Joint Treatment Guidelines For Optimal **Care of the Pediatric Patient with Psoriasis**

Recently, scholars from American Academy of Dermatology (AAD) and National Psoriasis Foundation (NPF) have released the first, joint guidelines for the management and care of pediatric patients with psoriasis. The guideline workgroup divided the overall management of pediatric psoriasis into six categories including measuring disease severity, assessing triggers, screening for comorbidities, and treating with topical, phototherapy and photochemotherapy, and systemic treatments (nonbiologic or biologic). For topical therapy, topical steroids and vitamin D analogues alone or in combination comprise the first line, most commonly recommended agents for pediatric psoriasis. Topical calcineurin inhibitors is recommended as a good choice for high-risk areas or when steroid-sparing options are desired. Alternative agents such as coal tar preparations, anthralin, and salicylic acid are recommended for occasional use as adjunctive therapy. For patients who have extensive disease or who have failed topical therapy, phototherapy involving Narrowband Ultraviolet B (NB-UVB, 311-313 nm) is recommended as an effective treatment choice, specifically for moderate to severe plaque and guttate psoriasis. Conventional systemic therapies including methotrexate, retinoids, and cyclosporine are recommended for patients with moderate to severe disease for whom topicals or phototherapy are ineffective. Methotrexate, particularly, is recommended to be always supplemented with folic acid for better outcomes. For biologics, Etanercept and Ustekinumab are FDA approved for four years and older and twelve years and older respectively and these can be used in combination with systemic and topical therapies.

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Reference: Cordoro KM. Toward Optimal Care of the Pediatric Patient with Psoriasis: The New AAD-NPF Management Guideline. Journal of Psoriasis and Psoriatic Arthritis. 2020;5(1):7-11. doi:10.1177/2475530319897462

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