

## Patients with psoriasis, especially women, may be at an increased risk for metabolic syndrome.

Researchers from Landspítali Haskólasjúkrahús, Reykjavík, Iceland found that in a national sample of over 6,500 people, patients with psoriasis had a higher prevalence of metabolic syndrome, compared to those without (40% versus 23%). They noted that this frequent co-morbidity had implications in the long-term treatment of patients with psoriasis, given the complications associated with the metabolic syndrome.

The researchers used data from the United States National Health and Nutrition Examination Survey 2003-2006. There were 6,549 patients, whose ages ranged from 20 to 59 years. The mean age of the patients was 39, 50% were men and 70% were white. The mean body mass index (BMI) was 28 kg/m<sup>2</sup>. The prevalence of psoriasis was 4%. In this group, the mean age was 42, and the mean BMI was 30.

It was found that age, BMI, waist circumference, and systolic blood pressure were all significantly higher in patients with psoriasis (with respective P values of 0.04, 0.01, 0.003, 0.02). Overall, the prevalence of the metabolic syndrome was higher among patients with psoriasis than

those without (40% versus 23%). Patients with psoriasis were twice as likely to have the metabolic syndrome, compared with controls (OR 2.16, 95% CI 1.16 to 4.03). In multivariate analyses, this finding was still significant (OR 1.96, 95% CI 1.01 to 3.77). Prevalence of the metabolic syndrome was higher in women with psoriasis than men with psoriasis.

The most common feature of the metabolic syndrome in patients with psoriasis was abdominal obesity, followed by hypertriglyceridaemia and then low high-density lipoprotein. The researchers noted that central obesity is associated with an abnormal level of certain inflammatory markers (TNF-alpha and interleukin-6), which is a factor that may be associated with the pathogenesis of psoriasis.

The authors said their finding could account for the reported increased risk of cardiovascular and metabolic morbidity and mortality in patients with psoriasis. Thus a diagnosis of psoriasis should trigger an investigation for the coexistence of the metabolic syndrome.

The authors also called for further research to assess how psoriasis treatment regimens affect metabolic syndrome and cardiovascular disease risk. For example, tumour necrosis factor inhibitors used to treat psoriasis may also decrease insulin resistance.

### SMA

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