

Psoriasis is a chronic, systemic, inflammatory skin disease. There is a significant risk of many comorbidities in psoriatic patients, the most prominent of these being Metabolic Syndrome (obesity, diabetes mellitus, hypertension, dyslipoproteinemia). Metabolic Syndrome contributes to increased mortality and morbidity rate, owing to cardiovascular diseases in particular. Psoriasis itself is another contributing factor. In comparison with normal population, the mortality rate in patients with severe psoriasis is two times higher.

Psoriasis and some of its comorbidities have the same pathophysiology. The same cytokines, such as TNF-alpha and inflammatory cells are involved. Integrated approach in therapy focused on the underlying inflammation may reduce the cardiovascular risk in obese patients with psoriasis.

An important step in the care of patients with this combination of ailments is the prevention of ischemic heart disease, as the risk of it is higher in them. Apart from general recommendations, one can apply specific approaches. An example of these is the treatment of obesity-induced inflammation, secondary prevention of psoriasis, anti-inflammatory systemic therapy and biological therapy.