

Pediatric psoriasis: Recognizing symptoms and exploring treatment pathways.

Akhil Dev*

Department of Dermatology, All India Institute of Medical Sciences, India

Introduction

Psoriasis is a chronic autoimmune condition that causes the rapid growth of skin cells, leading to thick, scaly patches on the skin. While it is commonly associated with adults, psoriasis can also affect children. Pediatric psoriasis may present differently than in adults, making it crucial for parents and caregivers to be aware of the symptoms and explore appropriate treatment options. Early recognition and intervention can help manage the condition and improve the child's quality of life [1].

The symptoms of pediatric psoriasis can vary depending on the type and severity of the condition. However, some common signs to look out for include: The most characteristic symptom of psoriasis is the presence of red, inflamed patches of skin covered with silvery-white scales. These patches can appear anywhere on the body, but they are most commonly found on the scalp, elbows, knees, and lower back. In infants, the diaper area may be affected [2].

Psoriasis can cause the skin to become very dry, and in some cases, cracks or fissures may develop. These cracks may bleed or become infected if not properly managed. Children with psoriasis may experience itching, burning, or stinging sensations in the affected areas. The discomfort can vary from mild to severe, affecting a child's ability to focus on daily activities [3].

Psoriasis can also affect the nails, leading to pitting (small depressions on the surface), discoloration, or thickening of the nails. This symptom is more common in older children and adolescents with the condition. In some cases, children with psoriasis may also develop psoriatic arthritis, which affects the joints, causing pain, stiffness, and swelling. This can interfere with a child's ability to move and engage in normal activities [4].

This is the most common form and typically presents as raised, red patches covered with silvery scales. It can occur anywhere on the body but is most often seen on the scalp, elbows, and knees. Often triggered by a strep throat infection, guttate psoriasis presents as small, drop-shaped lesions that appear suddenly, typically on the torso, arms, and legs. This type is more common in children and teenagers [5].

This type appears in skin folds, such as the armpits, groin, and under the breasts. It is characterized by smooth, red patches

that may be inflamed but lack the typical scaly appearance seen in plaque psoriasis. This rare form involves white pustules (blisters of noninfectious pus) surrounded by red skin. It can be painful and may require immediate medical attention [6].

A severe form of psoriasis, erythrodermic psoriasis can cause widespread redness and scaling over large portions of the body. It can be life-threatening and requires urgent medical care. While there is no cure for psoriasis, several treatment options can help manage the condition and reduce flare-ups. The goal of treatment is to control symptoms, prevent infection, and improve the child's quality of life. Treatment strategies typically vary based on the severity of the condition, the child's age, and any other underlying health issues [7].

Corticosteroid creams and ointments are commonly used to reduce inflammation and slow down the growth of skin cells. They come in various strengths, and a healthcare provider will determine the most appropriate one for a child's skin type and the severity of the condition. These creams, such as calcipotriene, help slow down skin cell turnover and can be used in combination with steroids [8].

Tazarotene, a topical retinoid, can be used to decrease skin cell production, although it may cause skin irritation in some children. This ointment or shampoo can help reduce itching and scaling by slowing skin cell turnover. It is often used for scalp psoriasis. For more extensive or persistent cases of psoriasis, light therapy may be recommended. This treatment involves exposing the skin to ultraviolet (UV) light under controlled conditions. UVB light therapy can be very effective in reducing inflammation and controlling symptoms, but it requires regular sessions under a healthcare provider's supervision [9].

If topical treatments and light therapy are not effective, systemic treatments may be considered. These treatments target the immune system and are typically used for moderate to severe cases of psoriasis. Systemic treatments include: Drugs like methotrexate, acitretin, and cyclosporine are often used to suppress the immune system's overactive response. These are newer injectable or intravenous medications that target specific parts of the immune system. Biologics like etanercept, adalimumab, and ustekinumab have shown promise in treating pediatric psoriasis and may be considered when other treatments have failed [10].

*Correspondence to: Akhil Dev, Department of Dermatology, All India Institute of Medical Sciences, India. E-mail: akhildev@gmail.com

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Conclusion

Pediatric psoriasis can be a challenging condition for both children and their families. Recognizing the symptoms early, understanding the different types of psoriasis, and exploring the available treatment options can help manage the condition and improve the child's quality of life. With the right treatment and support, children with psoriasis can lead healthy, active lives. If you suspect your child may have psoriasis, consult a healthcare provider to develop a tailored treatment plan that suits their needs.

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