



# Insights from patients with generalized pustular psoriasis: Results of an online survey in the USA

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People with generalized pustular psoriasis (GPP) often wait years before receiving an accurate diagnosis, and experience suboptimal disease control and diminished quality of life

## PURPOSE

To gain insights from patients with GPP in the USA into their experiences of disease worsening (flares), the impact of their disease on activities of daily living, their overall disease burden and the therapies they have received.

## INTRODUCTION

- GPP is a rare, neutrophilic skin disease characterized by episodes of widespread sterile, macroscopic pustules that can occur with or without systemic inflammation, plaque psoriasis or both<sup>1</sup>
- The severity of flares varies within individuals and from person to person<sup>1</sup>
- Information on the experiences of people living with GPP is limited
- Findings from an online survey of 66 people with GPP in the USA are reported

## CONCLUSIONS

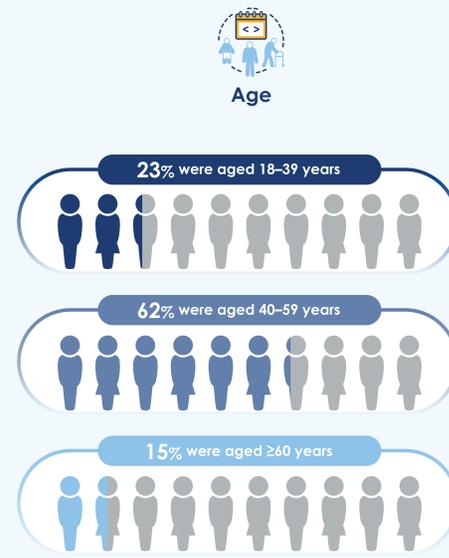
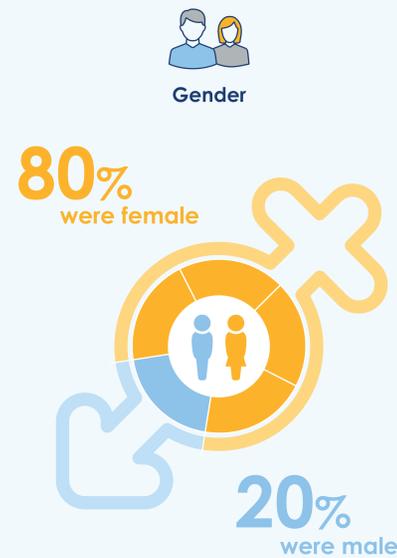
- The results of this survey suggest that people with GPP often wait years for an accurate diagnosis; they also experience suboptimal disease control with the therapies they receive
- People with GPP also experience a range of symptoms, with differing severities of flares
- The negative impact of flares on patient quality of life highlights the need for rapid diagnosis and better disease control in people with GPP

## METHODS

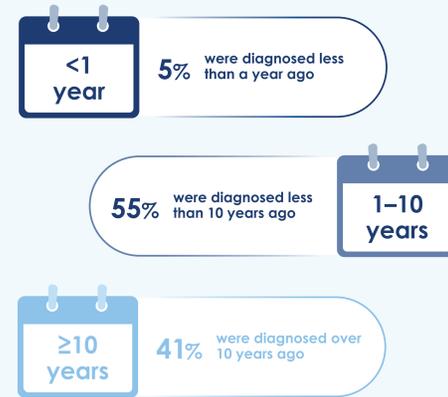
- This survey of adults with GPP in the USA was conducted in two parts in 2020 by HealthiVibe, a division of CorEvitas, LLC
- In Part 1, nine people were asked open-ended questions in a moderator-led virtual focus group
  - The purpose of this focus group was to provide feedback on the appropriateness of the survey questions for Part 2 and understand whether the response options could accurately capture the experiences of people living with GPP
- In Part 2, an online survey was conducted over 2 weeks to gain people's perceptions of their disease
  - Overall, 66 people provided informed consent prior to survey completion
  - Results from Part 2 of the survey are presented

## RESULTS

### Demographics of the online survey respondents (N=66)

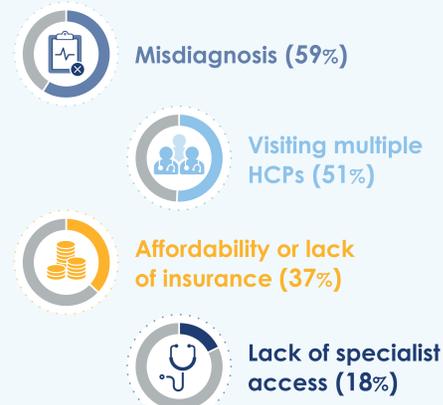


### Time since GPP diagnosis



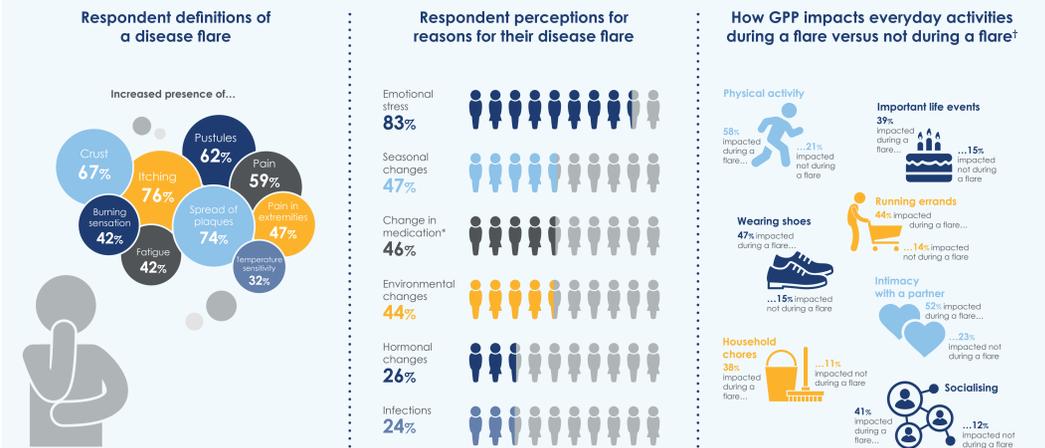
HCP, healthcare professional.

### Reasons for delayed diagnosis



The majority of respondents were female, aged 40–59 years and reported that it took years to receive a diagnosis of GPP

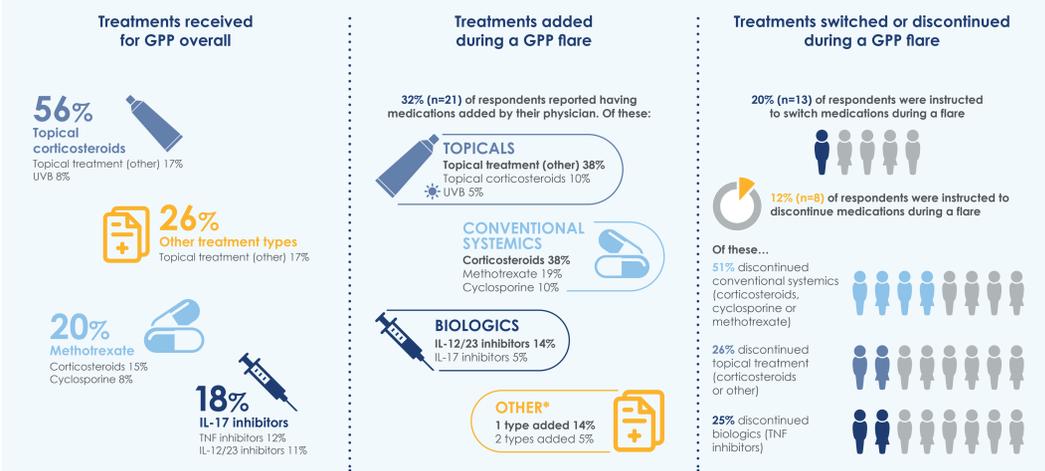
### Respondents' experiences of GPP flares (N=66)



\*Including stopping a current medication, a change in medication; dose or starting a medication. †Proportion of patients reporting a high impact on the activity in question (defined as 8–10 on a scale of 0–10).

Respondents frequently defined flares as increased itching and an increase in the size of the affected area, and reported more overall pain and an increase in the burden of some signs and symptoms during flares versus not during flares

### Treatment patterns for GPP overall and during a flare (N=66)



\*Including one or two medications, acupuncture, homeopathy or salt floats. IL, interleukin; TNF, tumour necrosis factor; UVB, ultraviolet B.

The most frequently received medication for GPP was topical corticosteroids

Reference  
1. Navarini AA, et al. J Eur Acad Dermatol Venereol 2017;31:1792–1799.

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