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**RATIONNEL**

There has been relatively little research on the effect of psoriasis on the Quality of Life (QoL) of partners. The role of partners of psoriasis patient is very important because they are most often their main source of social support. A better understanding of the impact of psoriasis on the QoL of partners is likely to provide important information for tailoring treatment and support strategies. This study aimed to evaluate the influence of psoriasis on the QoL of partners and to determine predictors of partners' QoL.

**MATERIAL AND METHODS:**

This was a prospective multicenter observational study conducted in psoriasis patients by private and hospital-based dermatologists. It was divided into three parts:

Evaluation of patients by the physician, including their sociodemographic profile, disease characteristics (Psoriasis Area Severity Index [PASI]), and nature of their treatments

► Evaluation by the patient of the disease impact on their QoL by means of the Dermatology Life Quality Index (DLQI) and SF12 QoL questionnaire

► Evaluation by the partner of the impact of psoriasis on their QoL by means of the FamilyPso and SF12

The SF 12 is a QoL questionnaire non-specific to dermatology that evaluates overall health status. It can be used to calculate two composite scores identified through factor analysis, namely, a composite physical health score and a composite mental health score. The FamilyPso is a validated questionnaire specific to psoriasis. Its linguistic and cultural validation into French was conducted in accordance with specific guidelines [U. Mrowietz, JEADV 2017].

**RESULTS:**

This multicenter study included 183 psoriasis patients ( 108 males and 75females ) with partners. 49,7% had moderate to severe psoriasis as either PASI > 10 and DLQI > 10. Alteration of QoL measured by MCS-12 is significantly greater in female patients with psoriasis than in their partners.

The FamilyPso score of partners of patients with psoriasis revealed a statistical correlation with Mental Component Summary (MCS-12) scores of the SF-12 of partners (rs = -0,27,p: 0.0003.) and no with Physical health summary PCS12 scores of partners (rs =0,06, p=0,392).

FamilyPso score of partners revealed a strong statistical association with the DLQI score of patients (rs = 0.43; P <0.001.) and was also significantly related to the PASI score of patients (rs = 0.25; P = 0.006.). PCS-12 score of partners were associated with PASI score (p: 0. 0.034) and with DLQI (p: 0.002).

We reported greatest impairment in QoL assessed by FamilyPso and MCS12 in in partner male of female with moderate or severe psoriasis as either PASI > 10 and DLQI > 10 than those with PASI ≤10 and DLQI ≤10. There was no relationship between alteration of QoL of partners and age and duration of psoriasis with MM.

A

	MCS-12 patients	MCS-12 partners	p-value
Total	41.94	45.50	0.0021
Male patients	44.01	45.09	0.45836
Female patients	38.97	46.13	0.0001

A Comparison of QoL between patients with psoriasis and partners with SF12

B QoL in the partner group (SF12,Familypso

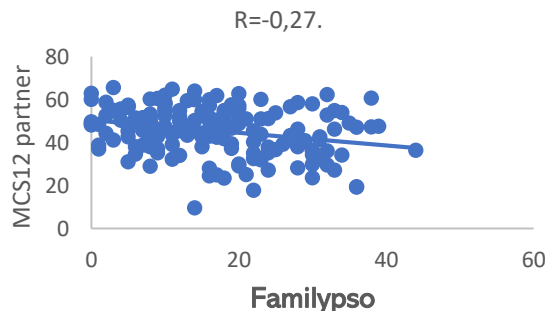
	PCS-12 patients	PCS-12 partners	p-value
Total	45.57	44.92	0.29
Male patients	44.65	44.50	0.85
Female patients	46.90	45.57	0.17

C Correlation analysis FamilyPso /MCS-12 in partners of patients with psoriasis

B

QoL instrument	Mean	SD
FamilyPso	16.78	9.96
MCS-12	45.50	11.00
SF12 PCS-12	44.92	5.75
FamilyPso	17.10	10.08
MCS-12	45.09	11.23
PCS-12	44.50	5.59
FamilyPso	16.32	9.83
MCS-12	38.97	10.71
PCS-12	46.90	5.32

C



**DISCUSSION**

This is the first study conducted in France evaluating the consequences of psoriasis on the QoL of partners. The influence of psoriasis on the QoL of partners is important and should be taken into account by dermatologists when formulating treatment plans, making treatment decisions or conducting research. The result of this study can be used to improve supportive care of psoriasis patients