

# Psoriasis

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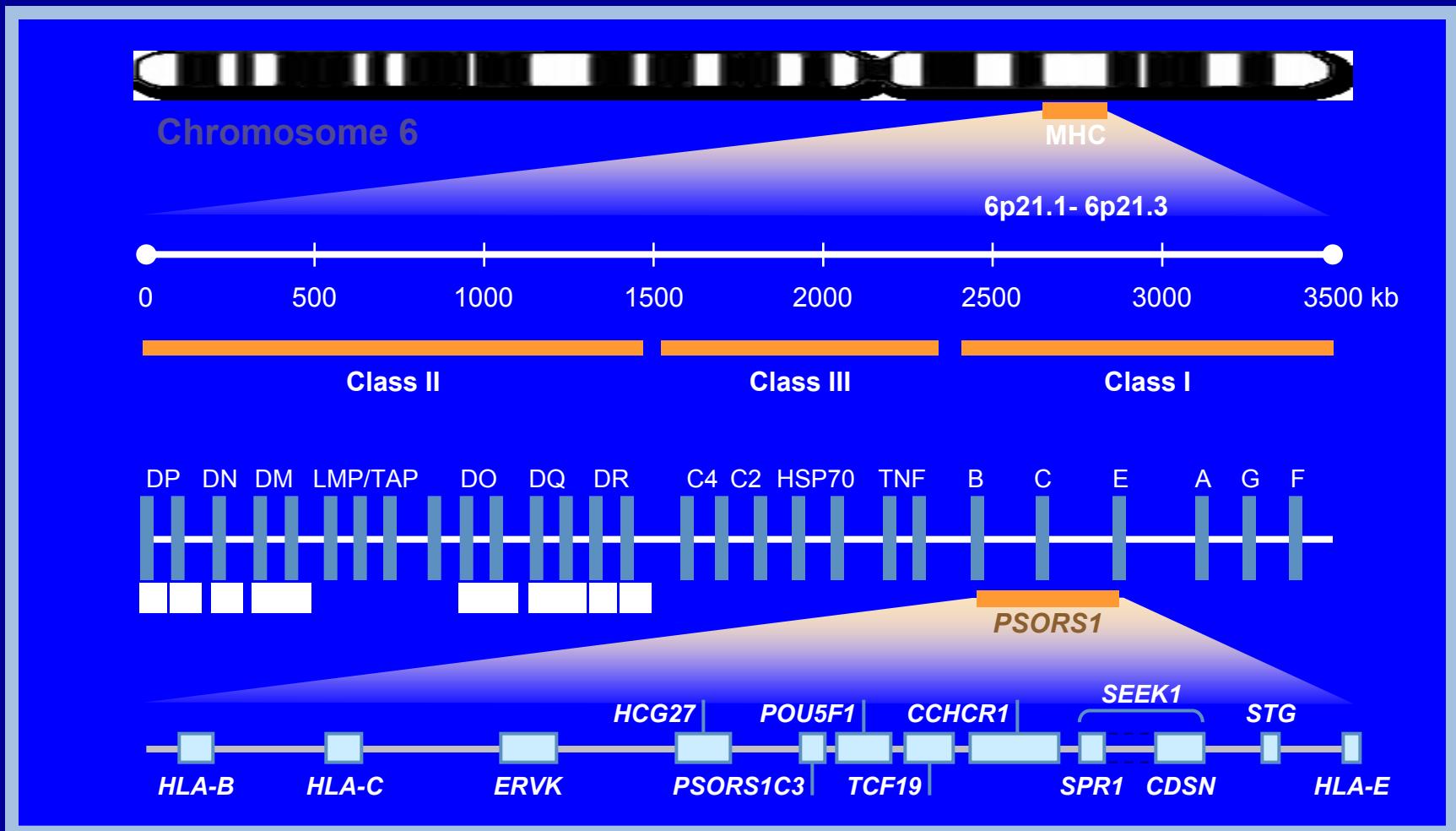
Vladimír Vašků

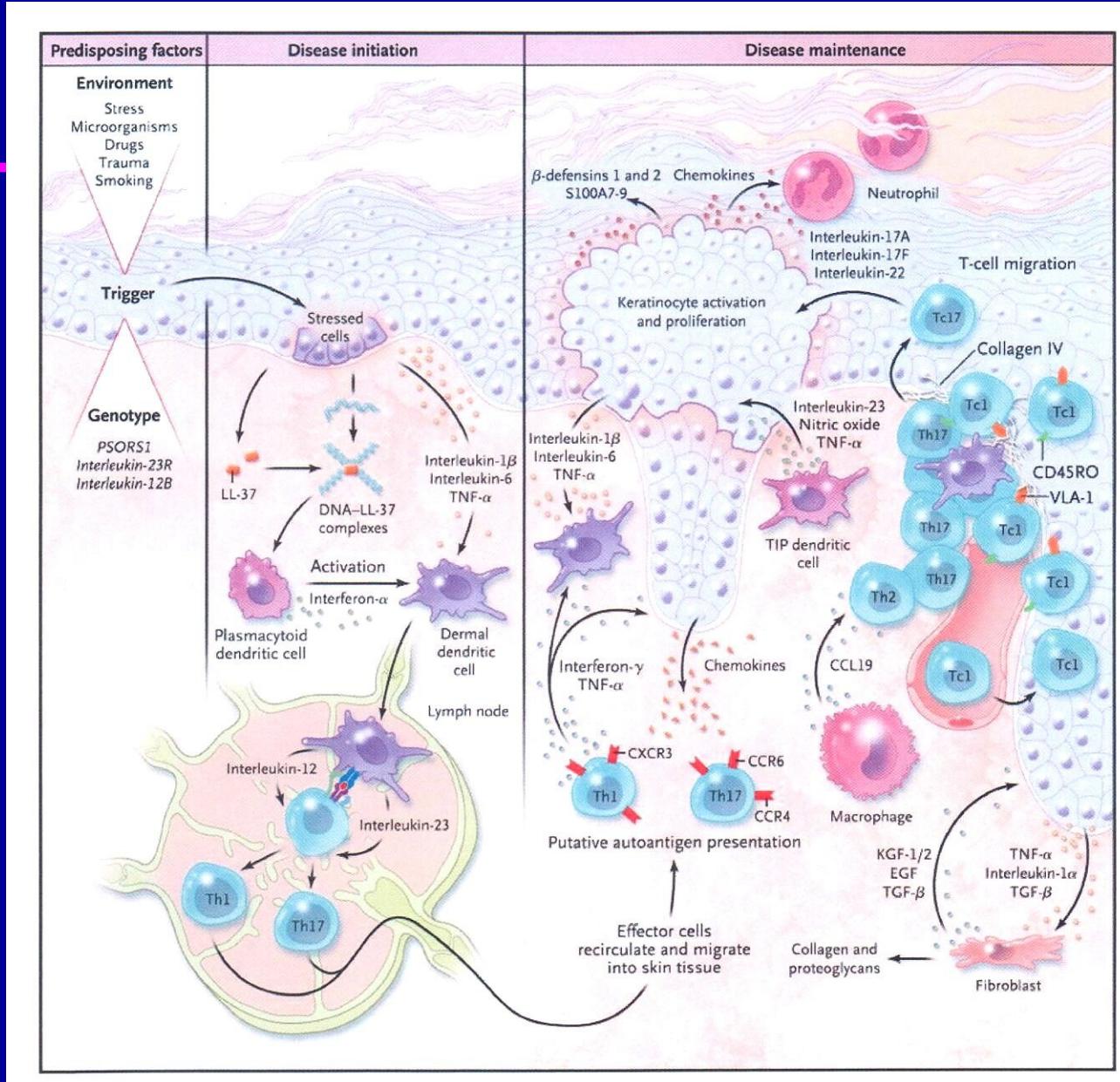
I. dermatovenerologická klinika  
LF MU a FN u sv. Anny v Brně  
Czech Republic



# PSORS1

Illustration adapted from Bowcock AM, Krueger JG. Nat Rev Immunol. 2005;5(9):699-711.





# Psoriasis is a Complex Disease

## Characteristics

Multigenic predisposition  
(1% - 3% of Caucasian population affected)

Inflammatory disorder

Lifelong, chronic relapsing disease

Various clinical features

**Plaque-type psoriasis most common form**

## Palmoplantar<sup>1</sup>



## Erythrodermic<sup>1</sup>



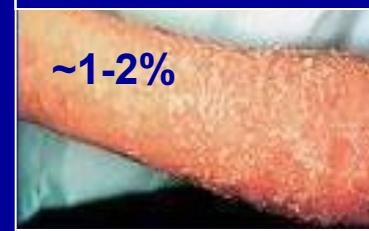
## Guttate<sup>1</sup>



## Plaque<sup>1</sup>



## Pustular<sup>1</sup>



## Inverse Psoriasis<sup>1</sup>



## Joints (PsA)<sup>2</sup>



## Nail psoriasis<sup>3</sup>



<sup>1</sup>García-Diez A et al. Dermatology. 2008;216(2):137-151.

<sup>2</sup>Wilson FC et al. Arthritis Rheum. 2009;61:233-239.

<sup>3</sup>Griffiths CE et al. Br J Dermatol. 2007;156(2):258-262.

# Imunobiologie IMID („immune mediated inflammatory diseases“)

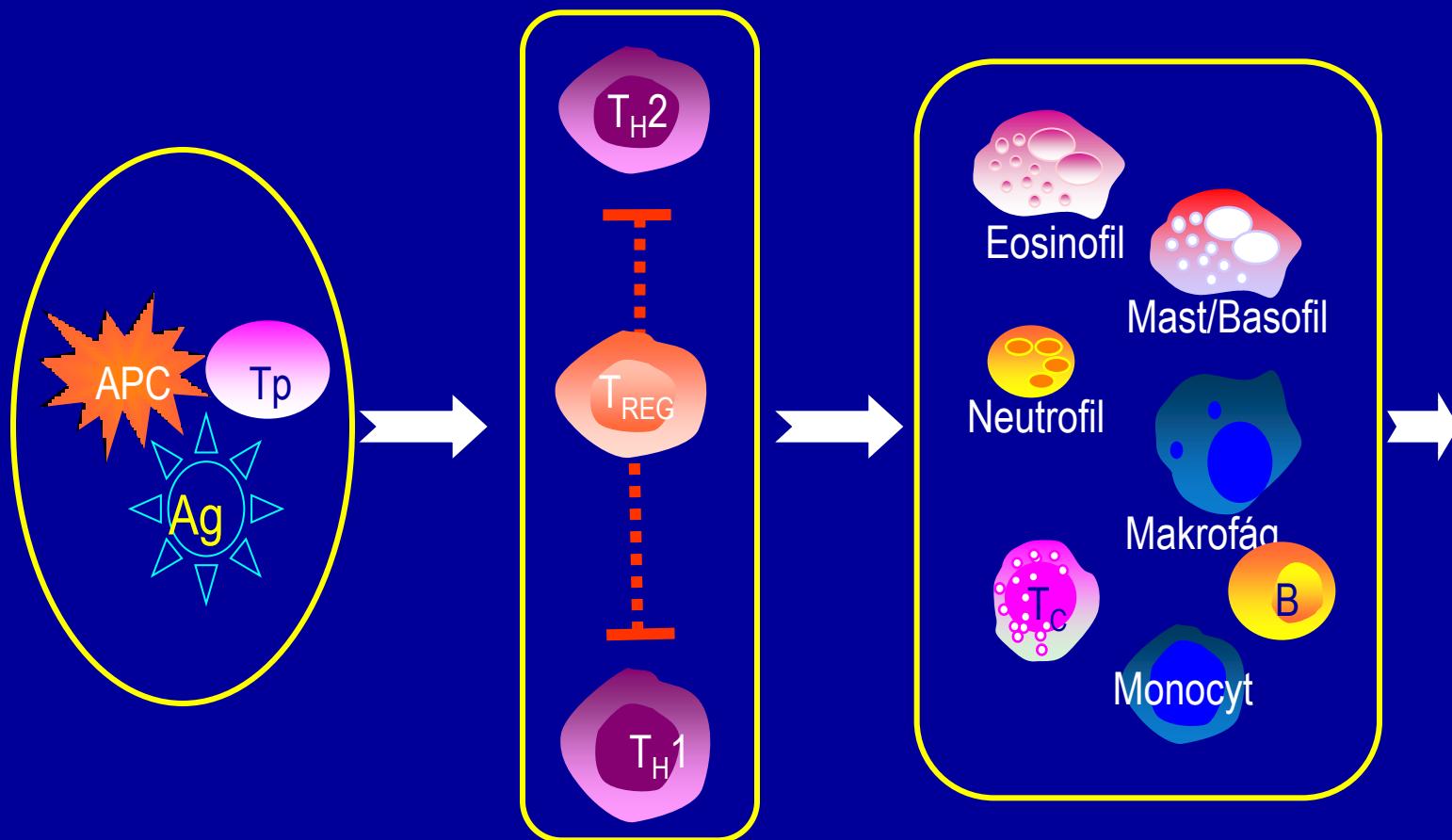
Senzitizace

Vývoj patogenních T-buněk  
Nerovnováha efektor/ supresor

Místní zánět

Tkáňové poškození  
Fibróza

I.M.I.D.

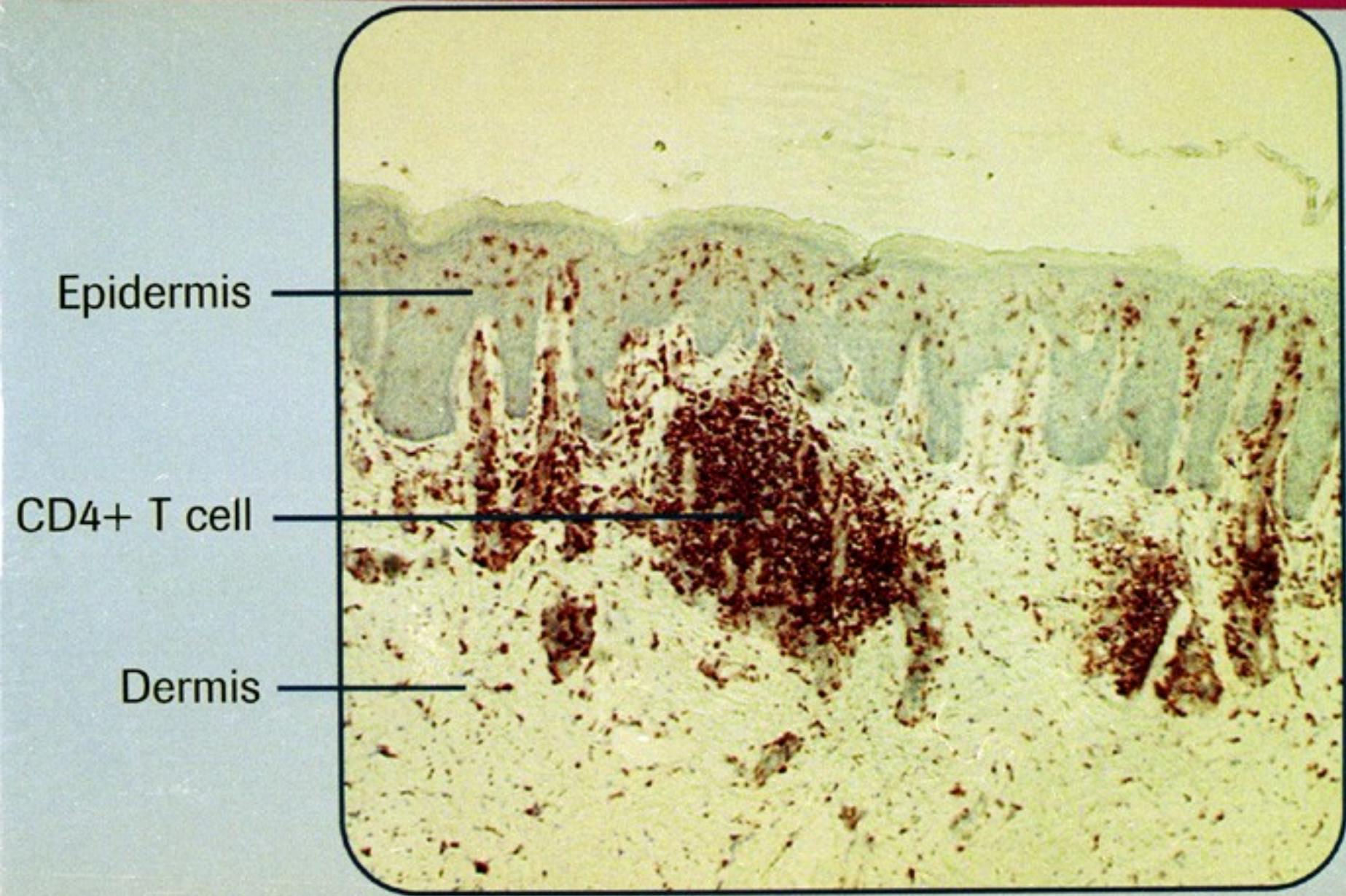


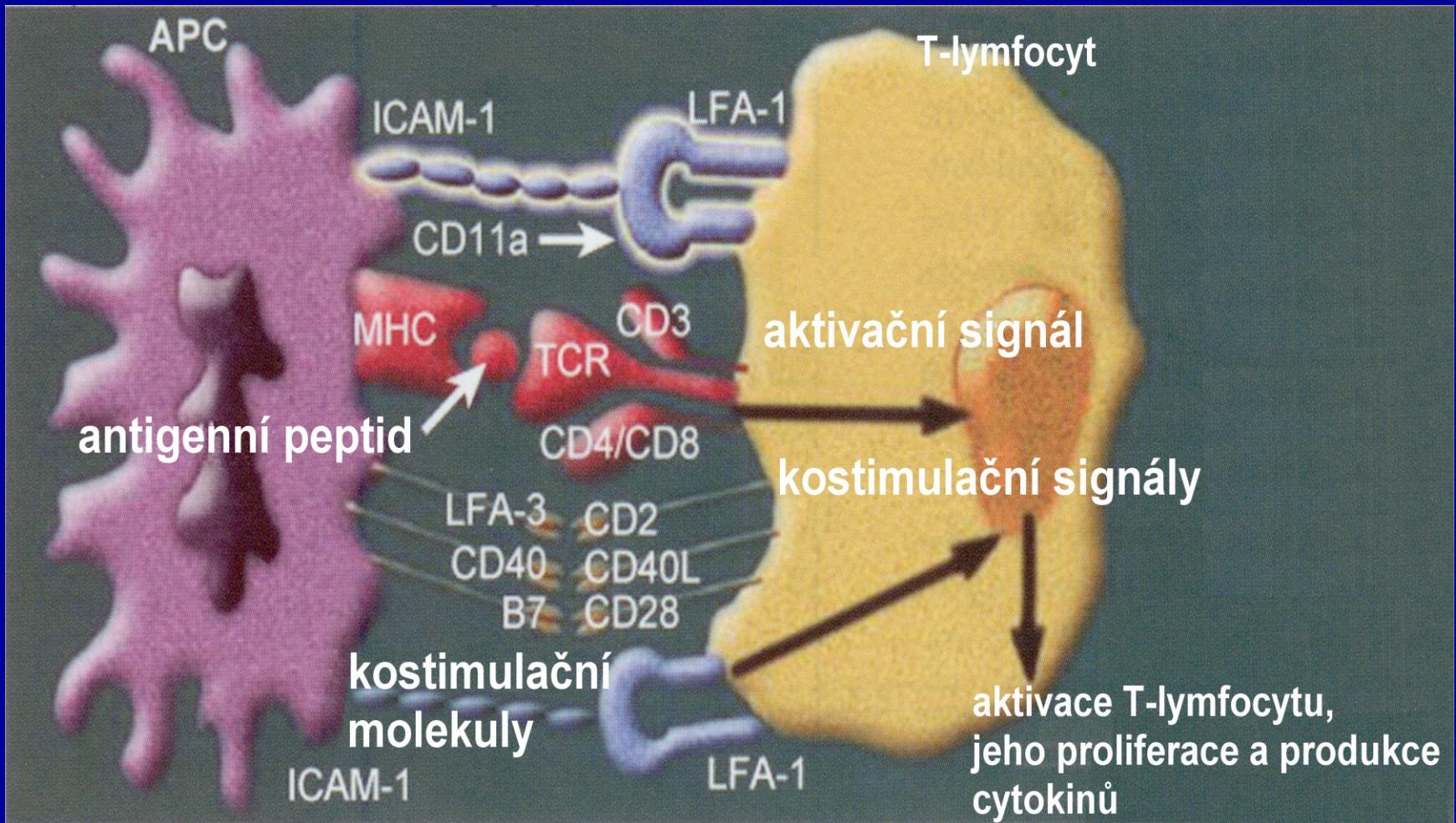
Alergie  
Ankylozující Spondylitis  
Astma  
Crohnova nemoc  
Graft Rejection  
Sclerosis multiplex  
Psoriasis  
Psoriatická Arthritis  
Revmatoidní Arthritis  
Sarcoidosis  
SLE  
Type I DM  
Ulcerativní Colitis  
Uveitis

# **Psoriasis Demography Czech Republic**

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<b>Severity</b>	<b>%</b>	<b>Prevalence 2%</b>
<b>mild to moderate</b>	<b>75</b>	<b>153000</b>
<b>moderate to severe</b>	<b>25</b>	<b>51000</b>
<b>severe</b>	<b>15</b>	<b>30600</b>

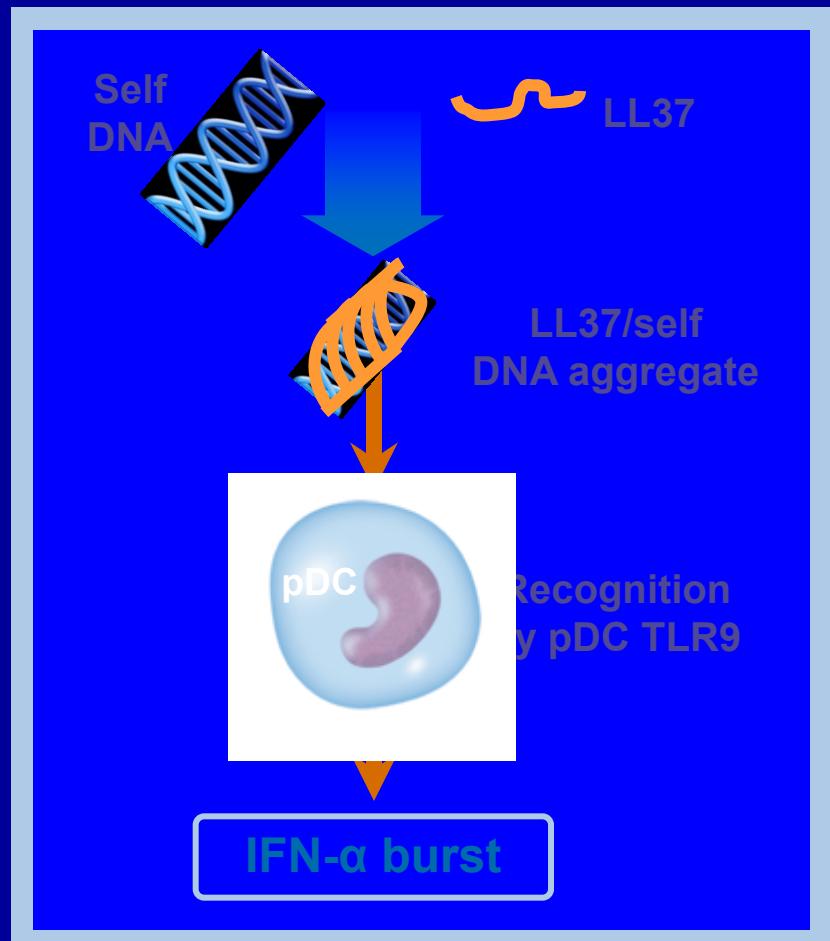




Podle Gottliebové, 2004

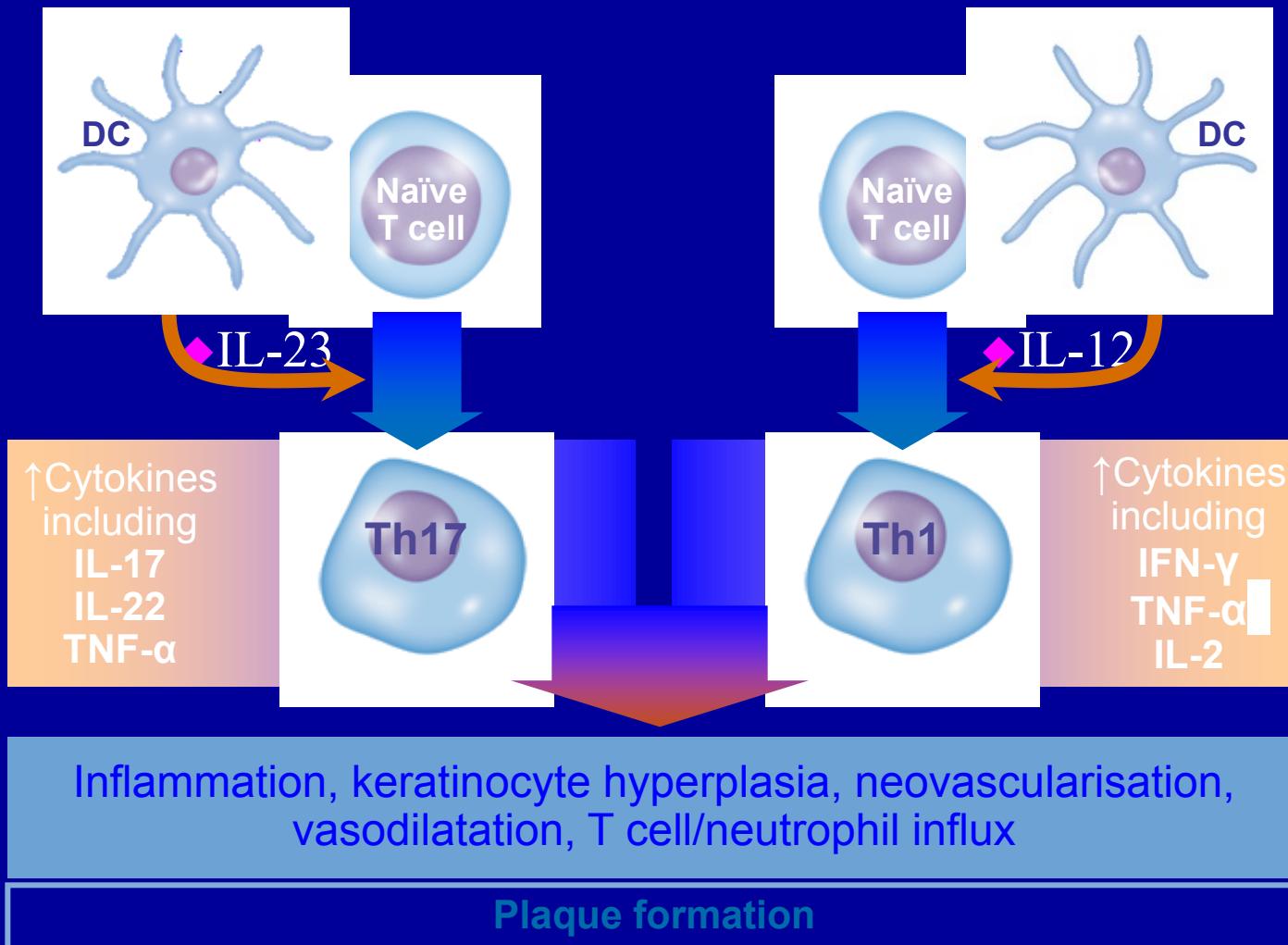
# Plasmacytoid Dendritic Cell Activation and Initiate Psoriasis<sup>1</sup>

- pDCs use Toll-like receptor (TLR)7 and TLR9 to recognise viral/microbial nucleic acids in endosomal compartments
- The antimicrobial peptide LL37, a cathelicidin overexpressed in psoriatic skin, forms an aggregate with self-



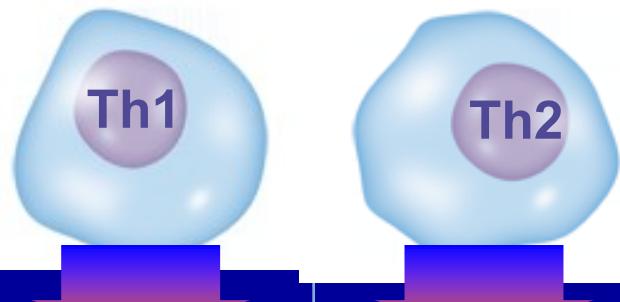
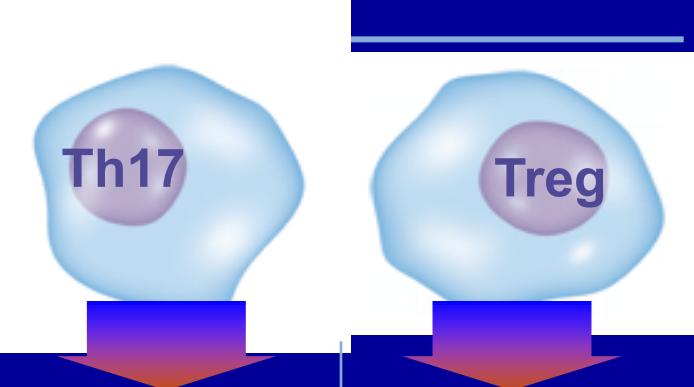
◆1. Lande R, et al. *Nature*. 2007; 449:564-9.

# helper Environment in Psoriasis<sup>1,2</sup>



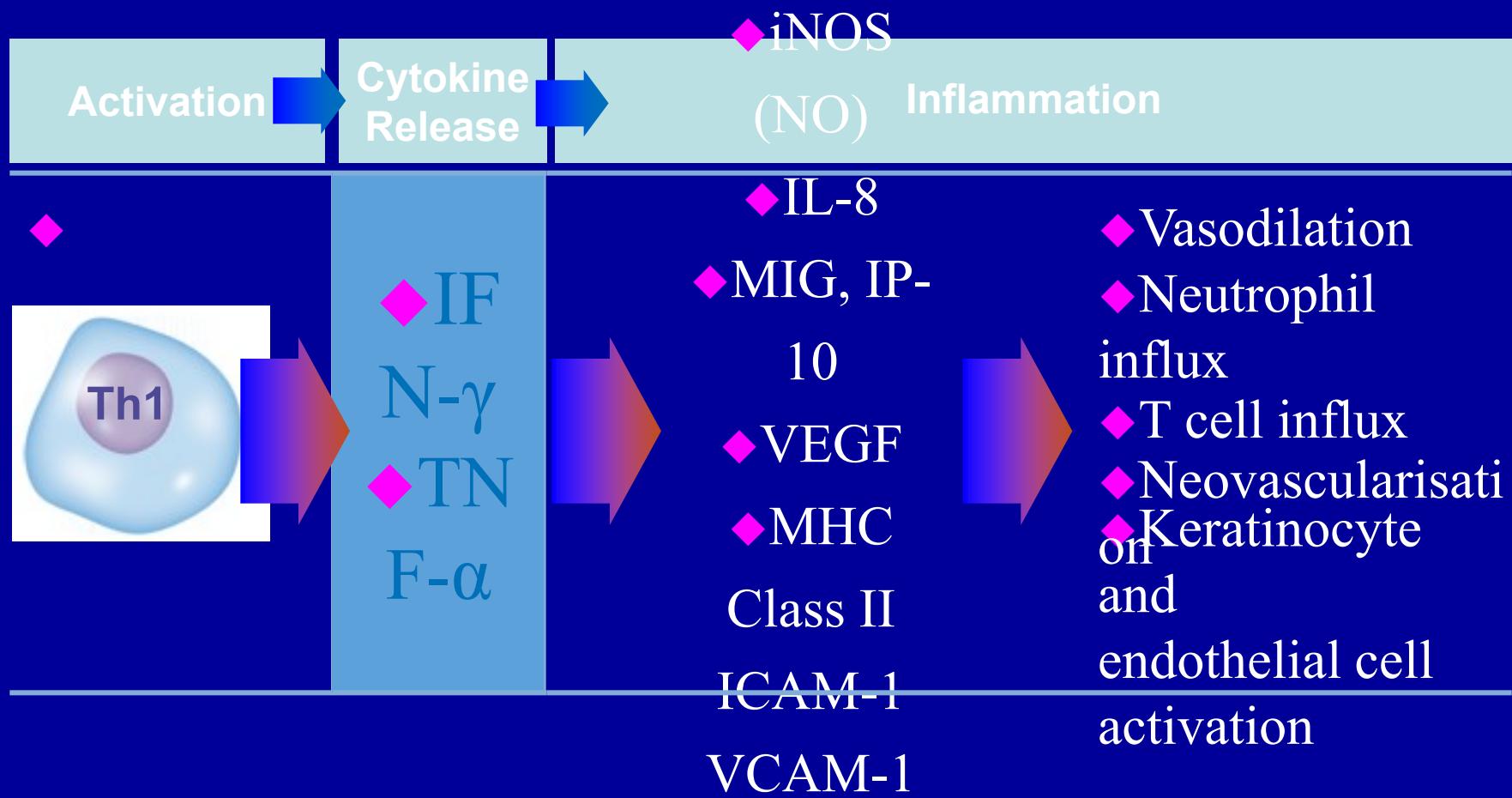
◆ 1. Gately MK, et al. Annu Rev Immunol. 1998; 16:495-521. 2. Wilson NJ, et al. Nat Immunol. 2007; 8:950-7.

# Plaques: Th1 and Th17<sup>1,2</sup>

◆ Subset			
◆ Defining Cytokines <sup>3-5</sup>	◆ IFN- $\gamma$	◆ IL-4 ◆ IL-17 ◆ IL-22	◆ IL-10 ◆ TGF- $\beta$
◆ Found in psoriatic plaque <sup>6</sup>	◆ Yes	◆ No	◆ Yes ◆ Low level

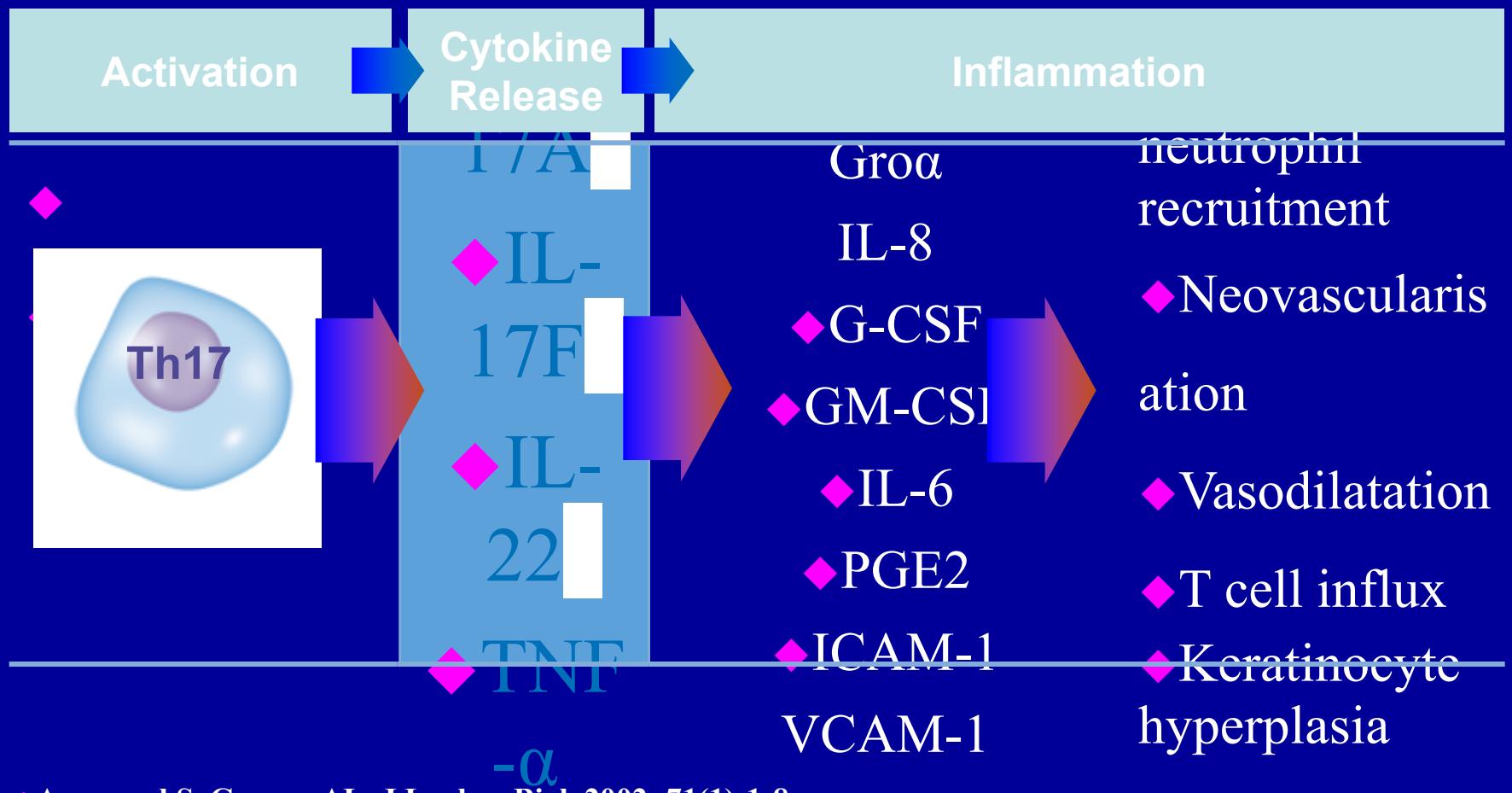
- ◆ 1. Austin LM, et al. J Invest Dermatol. 1999;113:752-9. 2. Sabat R, et al. Exp Dermatol. 2007;16:779-98. 3. Janeway CA, et al. Immunobiology. 5th ed. New York: Garland; 2001. 4. Wilson NJ, et al. Nat Immunol. 2007;8(9):950-7. 5. Kagen MH, et al. Ernst Schering Res Found Workshop. 2006(56):193-209.
- 6. Lowes MA, et al. J Invest Dermatol. 2008. EPub 2008 Jan 17.

# Inflammatory Processes in the Psoriatic Plaque



♦Adapted from: Lowes MA, et al. Dermatol Clin. 2004; 22:349-69, vii.

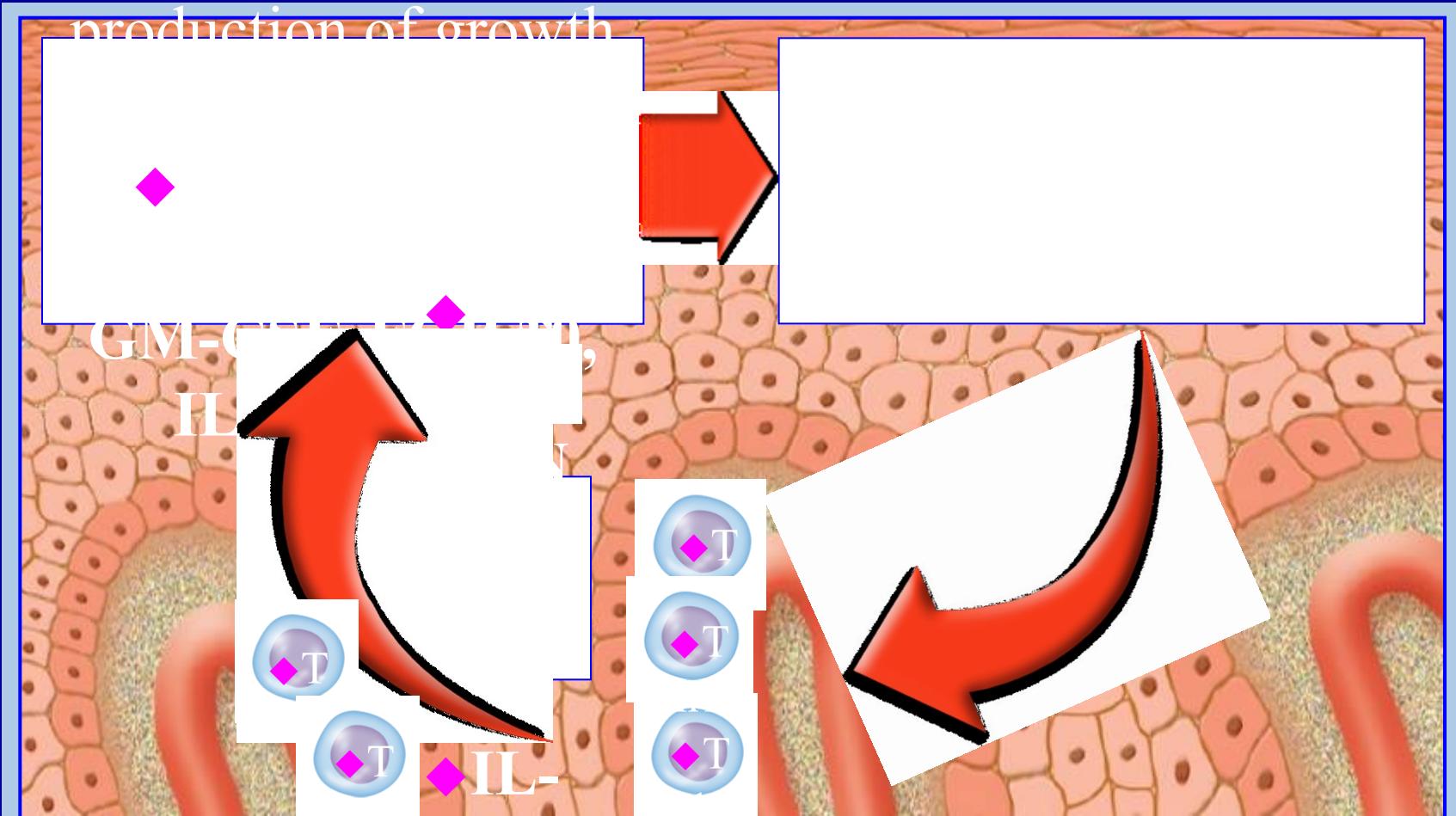
# Inflammation and Keratinocyte Hyperplasia in Psoriatic Plaque



# T-cell Cytokines Stimulate Keratinocyte Hyperplasia<sup>1,2</sup>

## ◆ Dysregulated KC

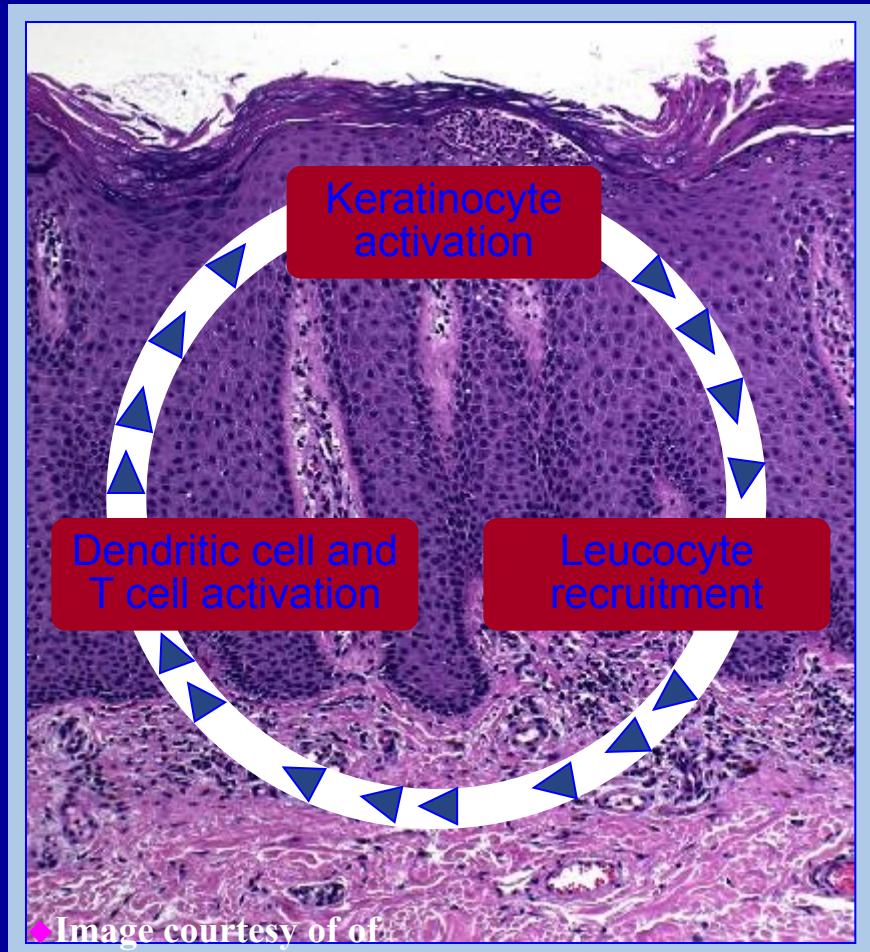
## production of growth

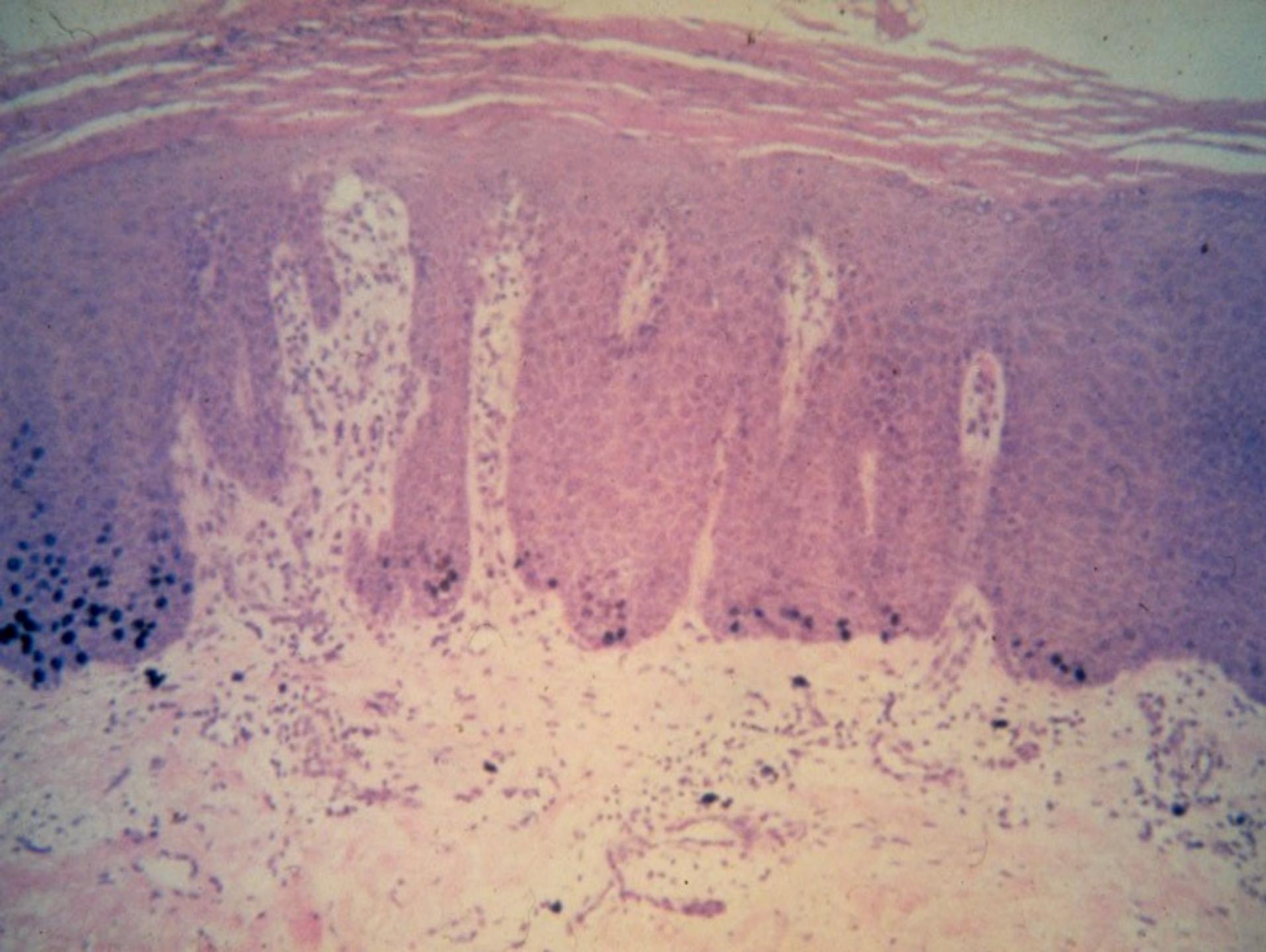


◆ 1. Albanesi C, et al. Clin Dermatol. 2007; 25:581-8. 2. Weinstein GD et al. J Invest Dermatol. 1985; 85:579-83.

# and Epidermal Hyperplasia: the Vicious Cycle of Psoriasis

– Dendritic cells, lymphocytes, and keratinocytes interact in a "vicious cycle" to establish and perpetuate the inflammatory phenotype







0274

10Kv

×2,500

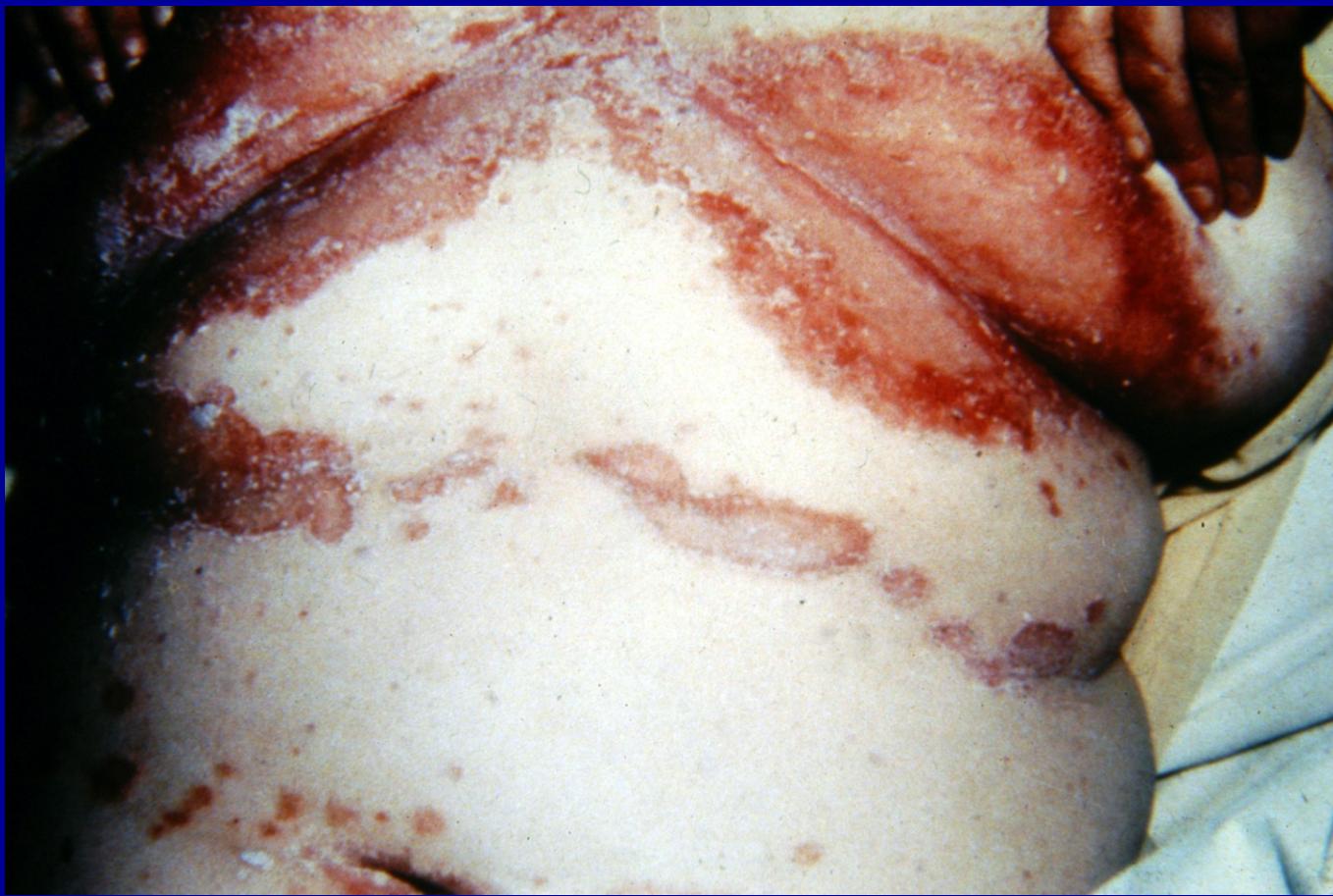
10µm WD











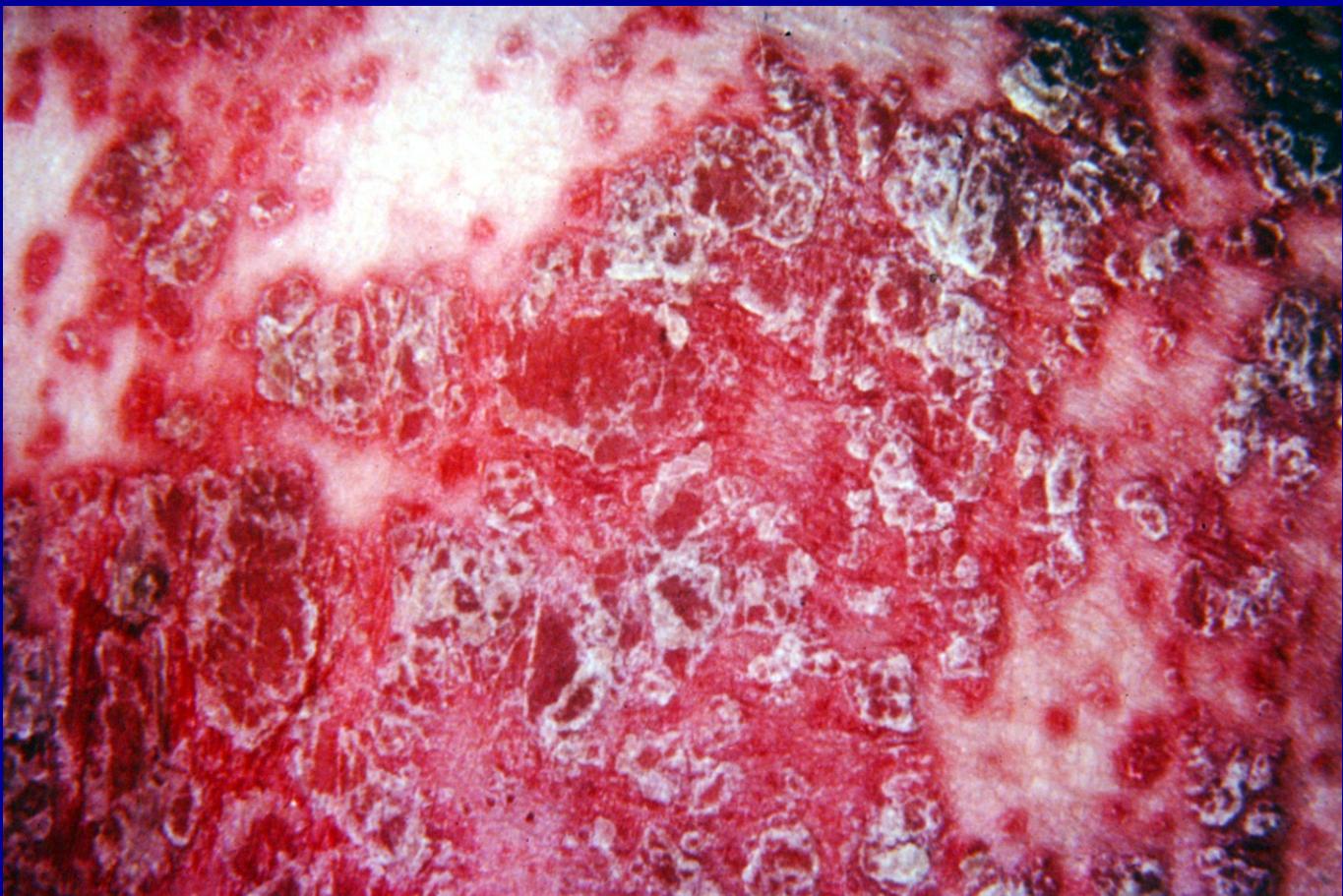






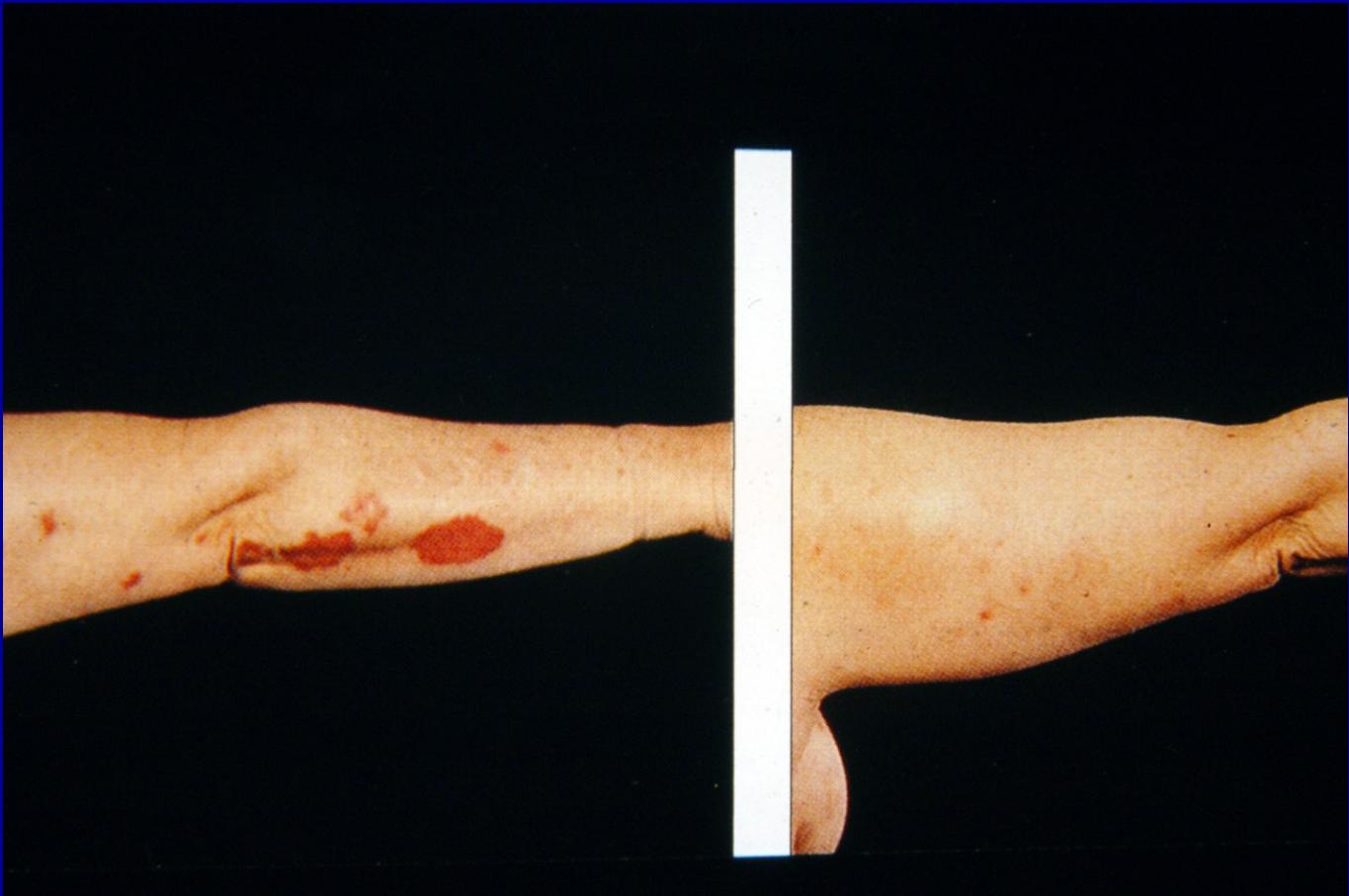




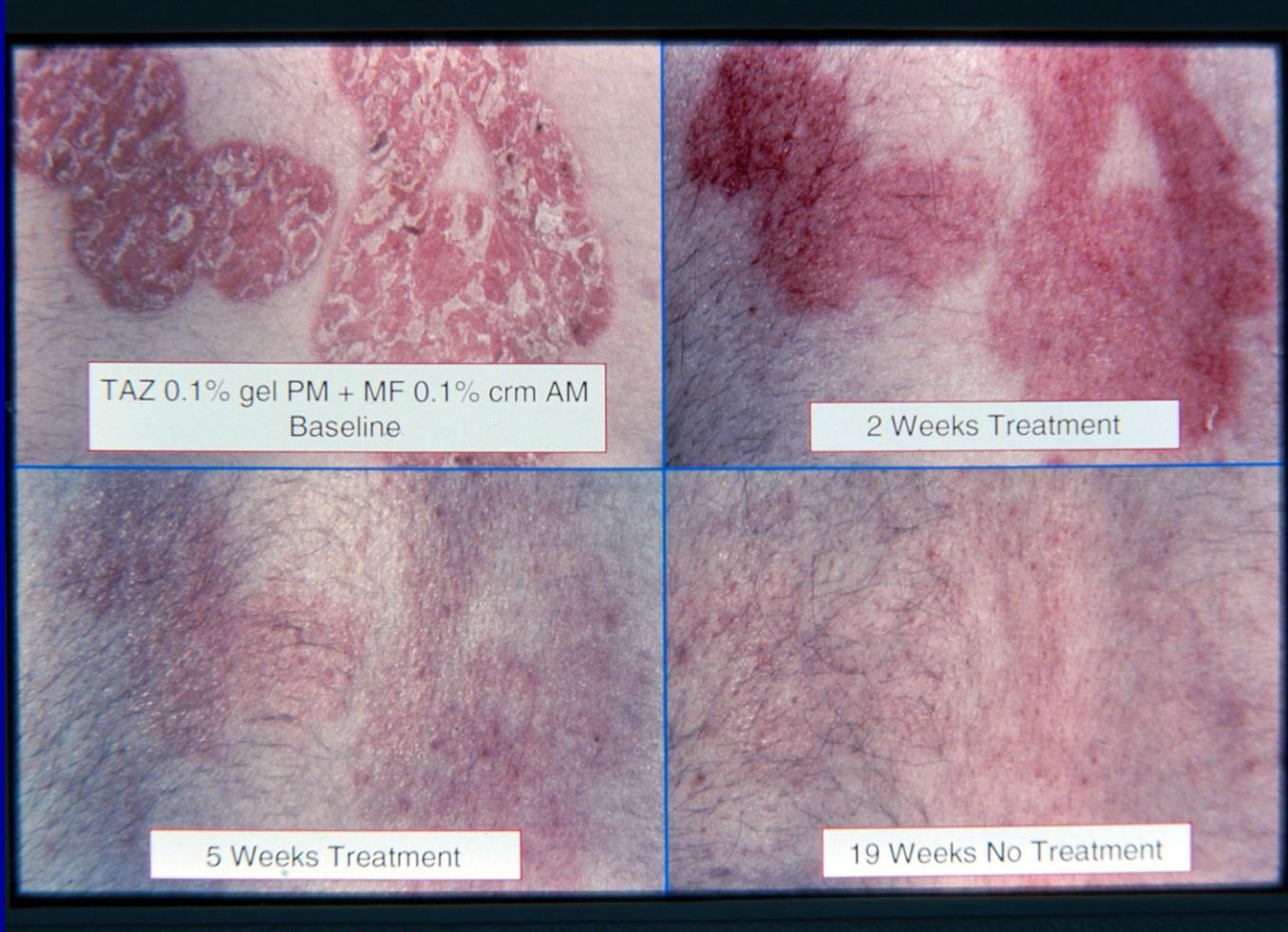


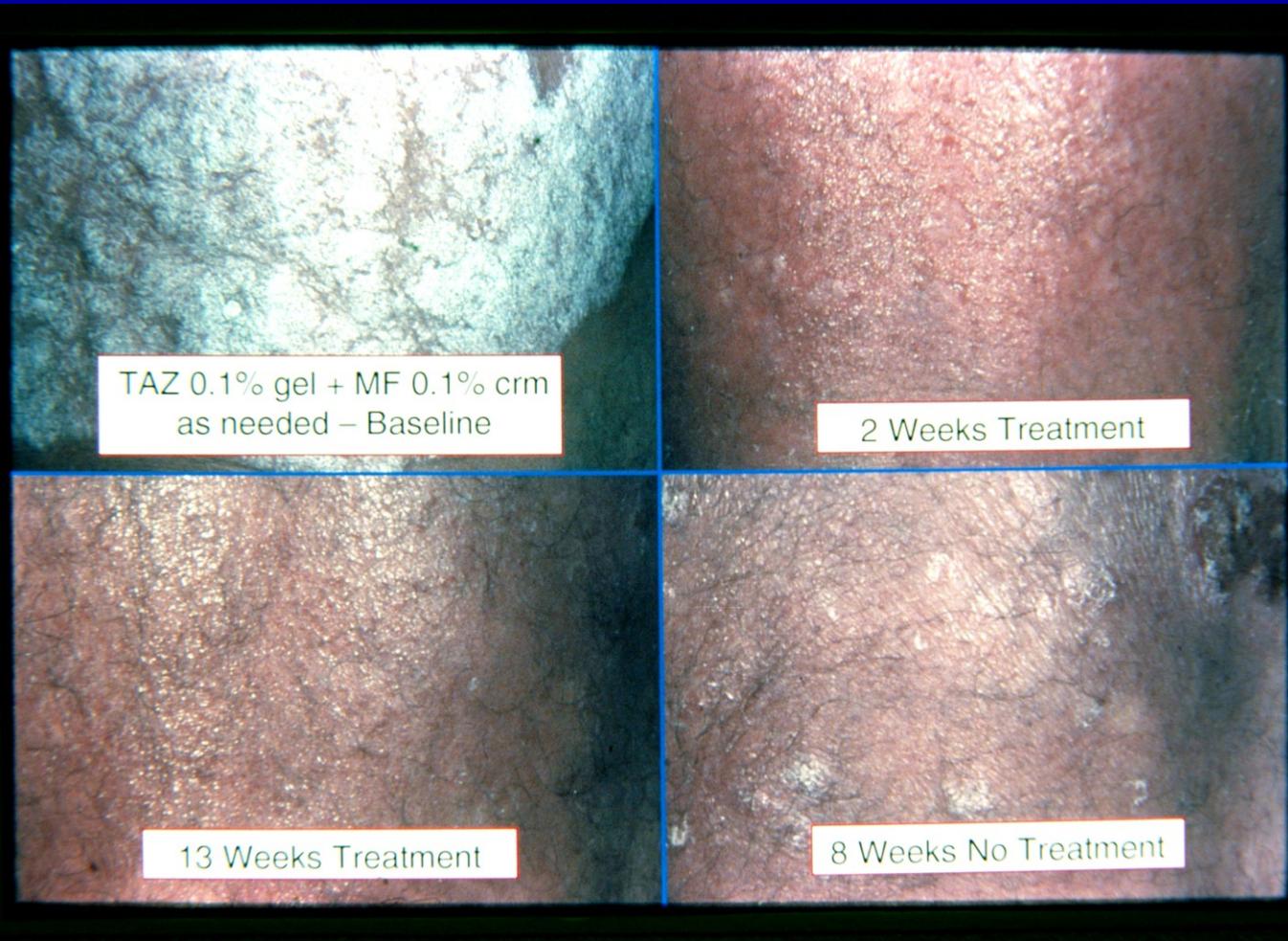


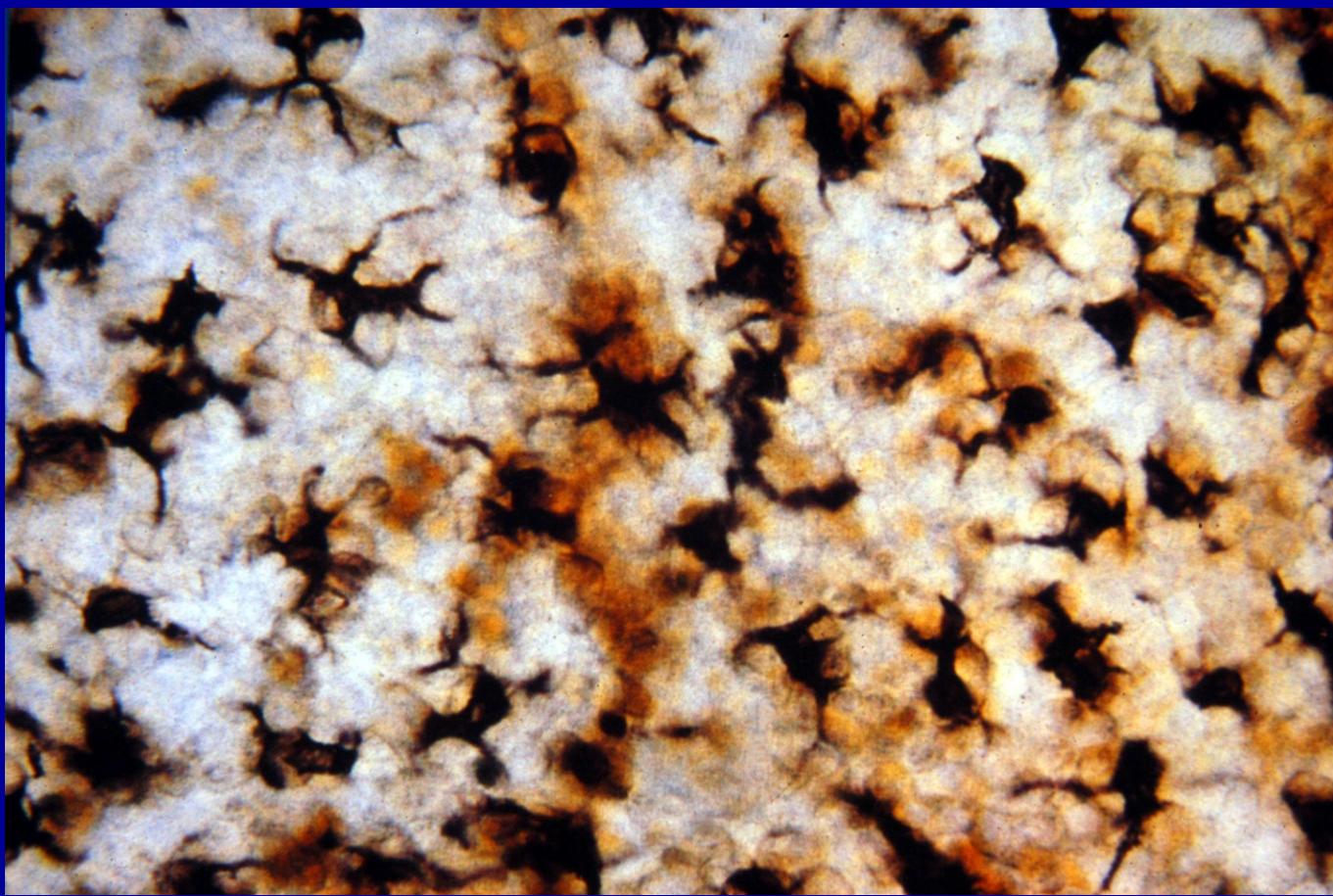


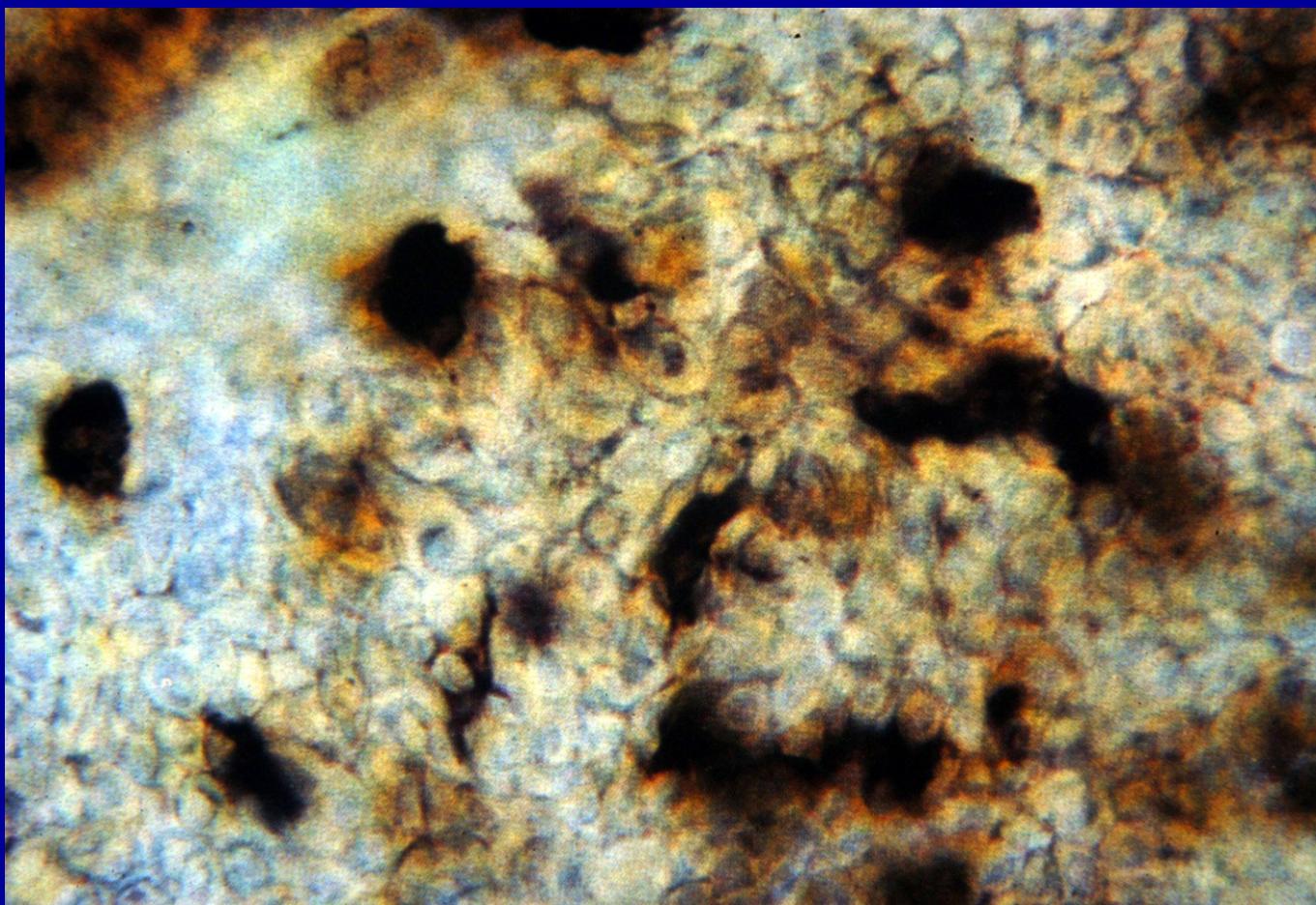






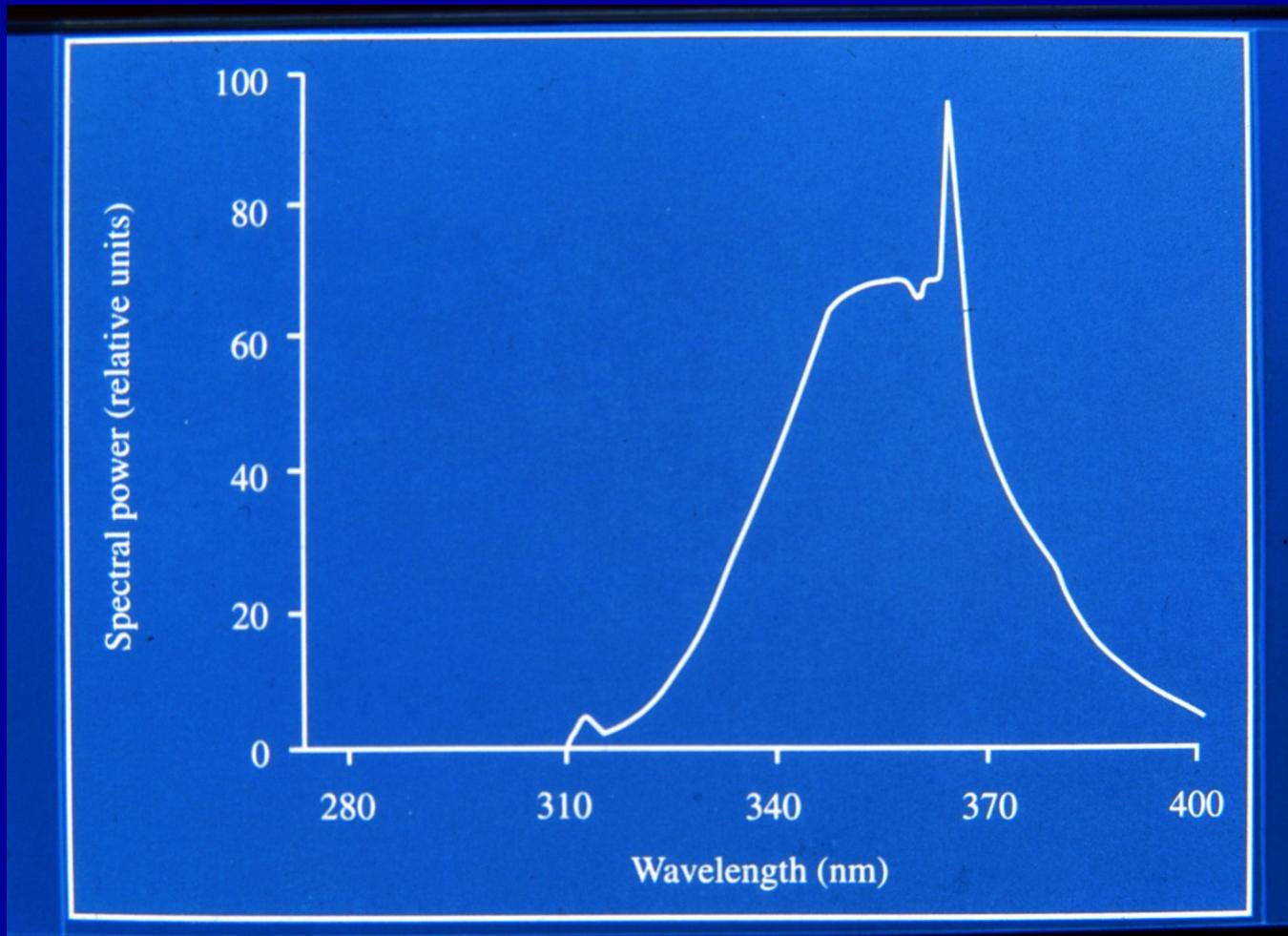




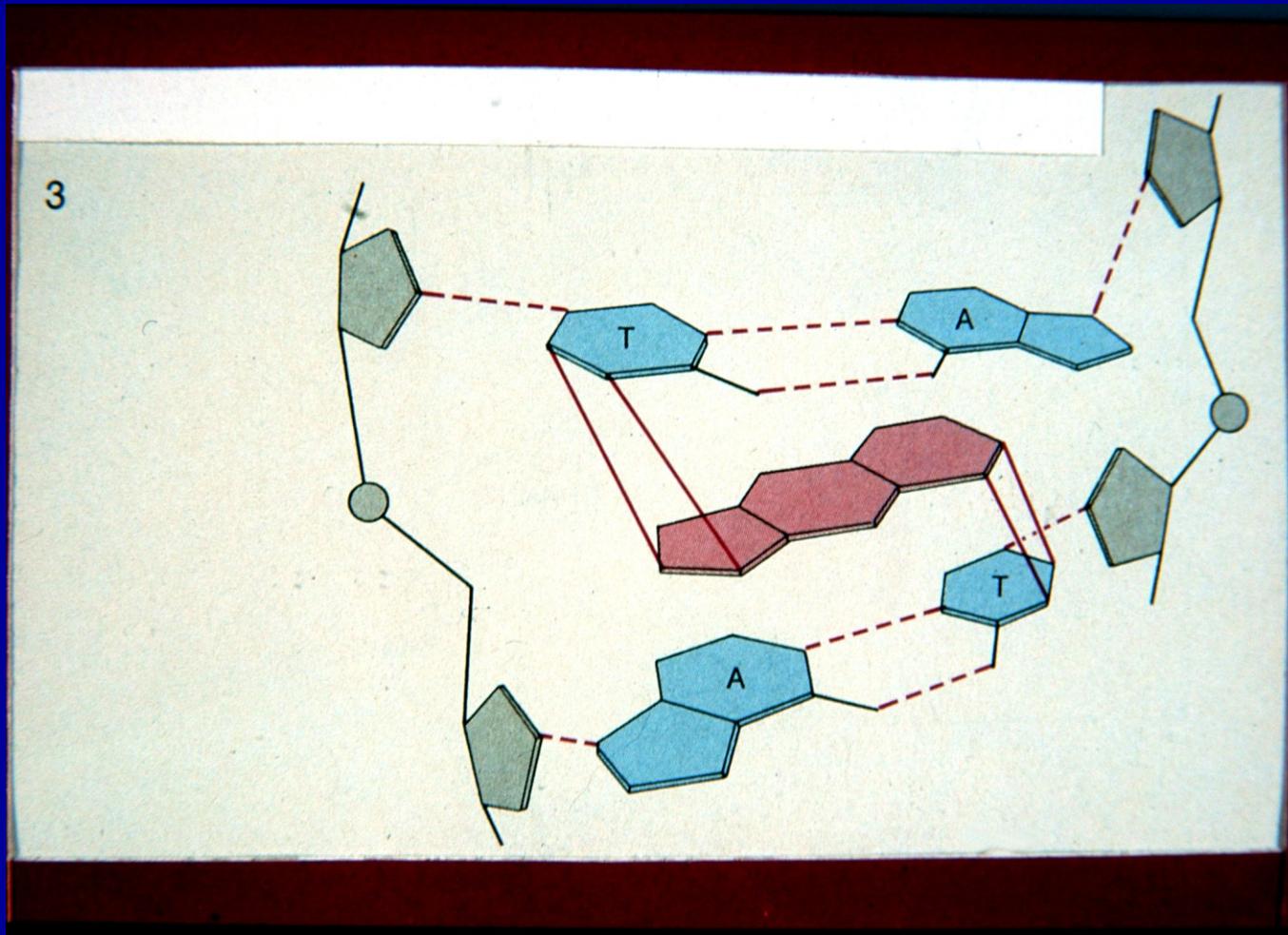




# Fotochemoterapie - PUVA



# Fotochemoterapie - PUVA





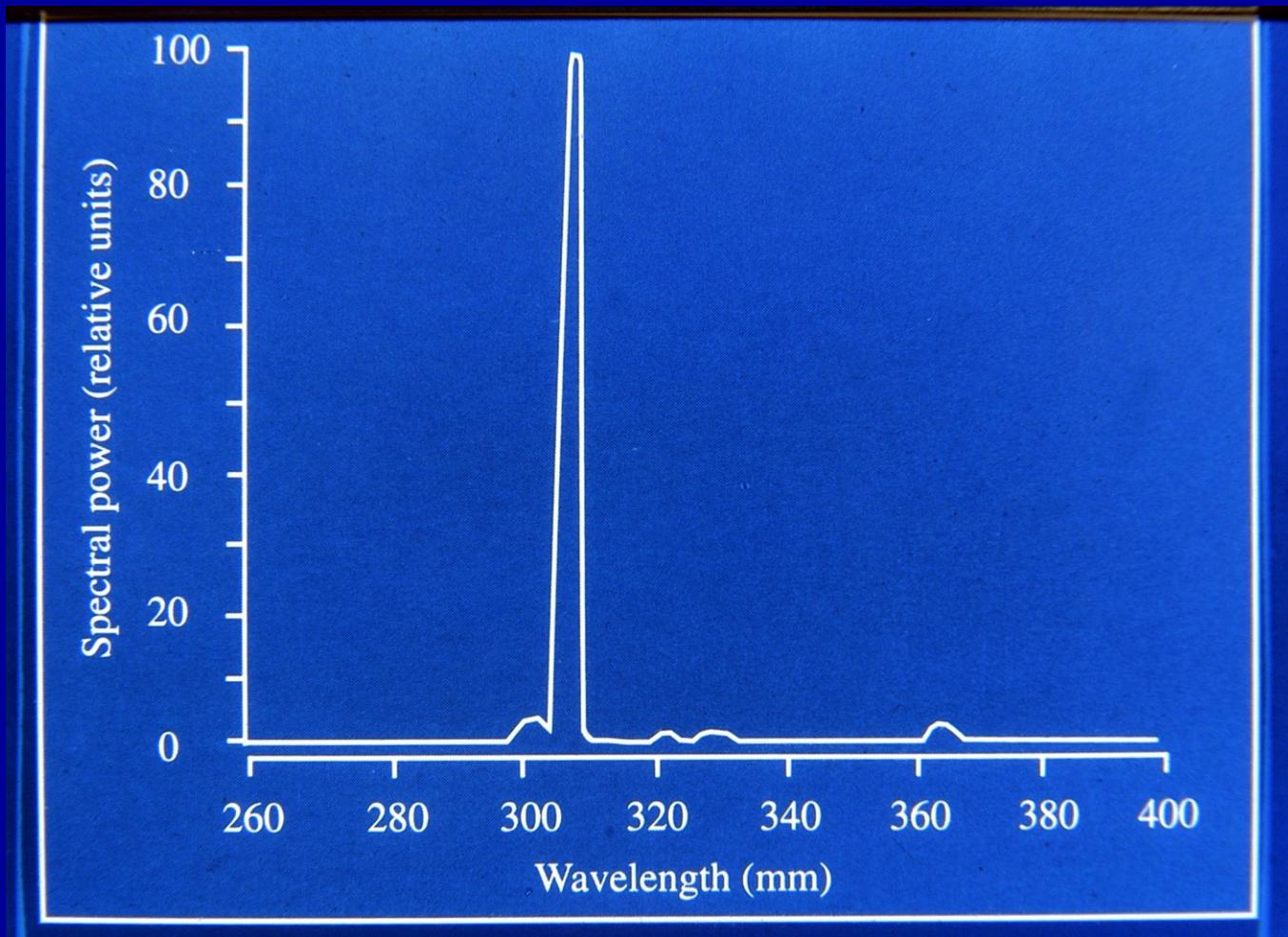






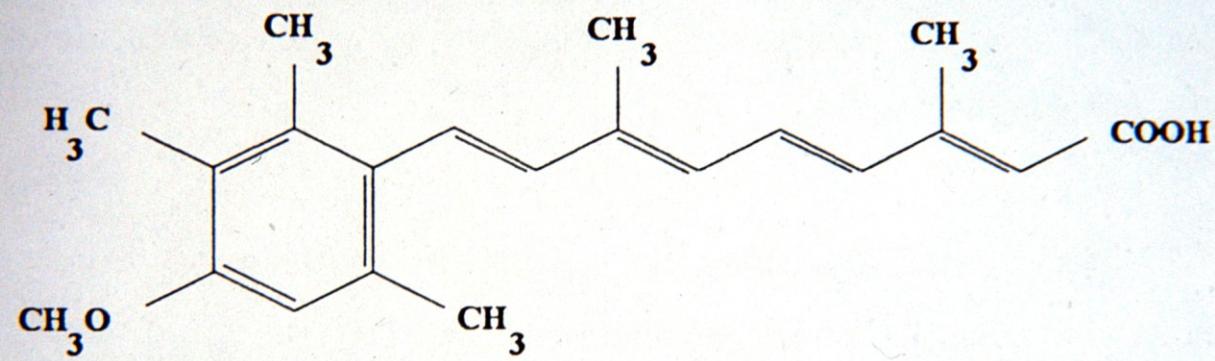


# UVB – „Narrow band lamp“





















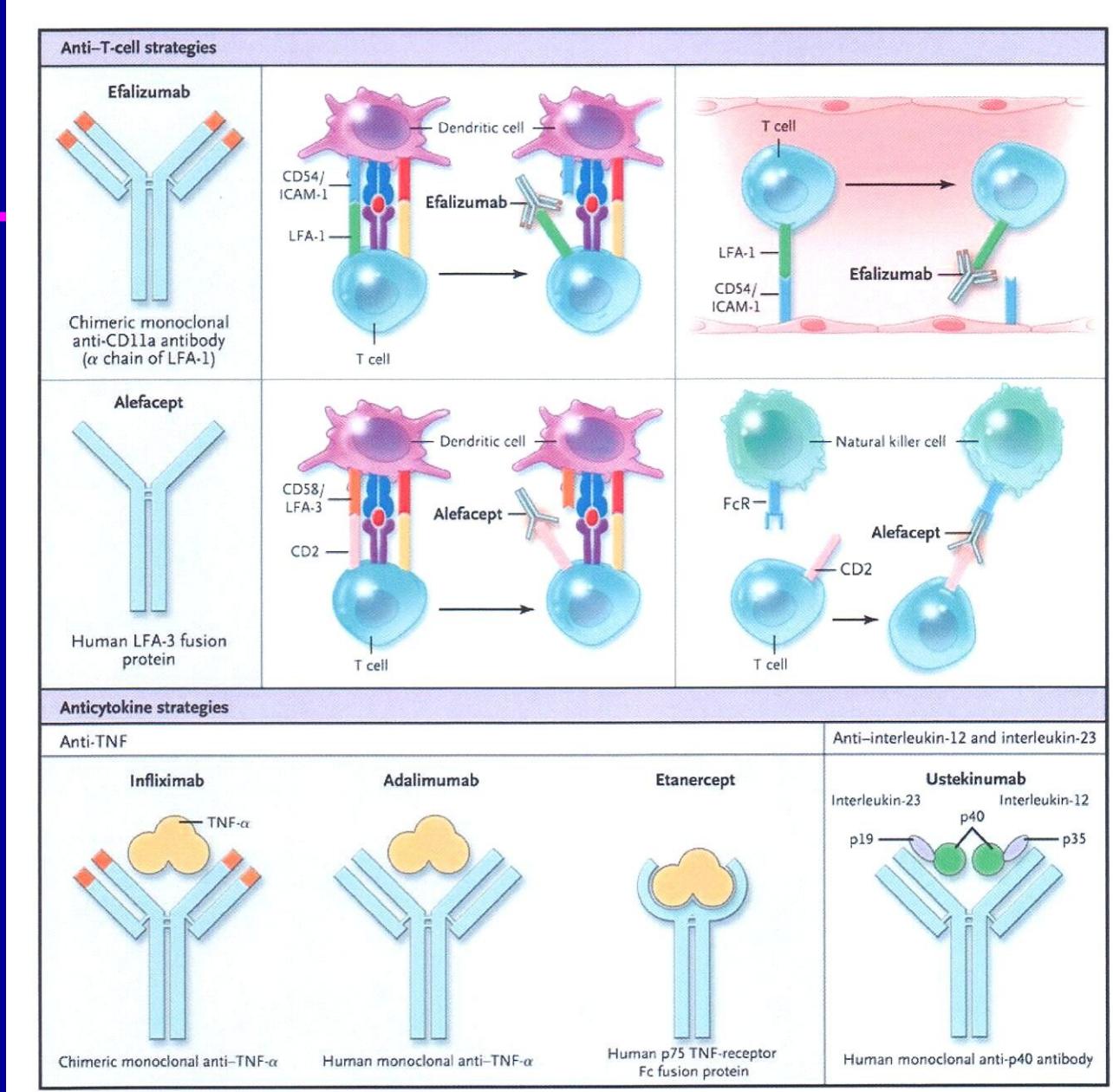




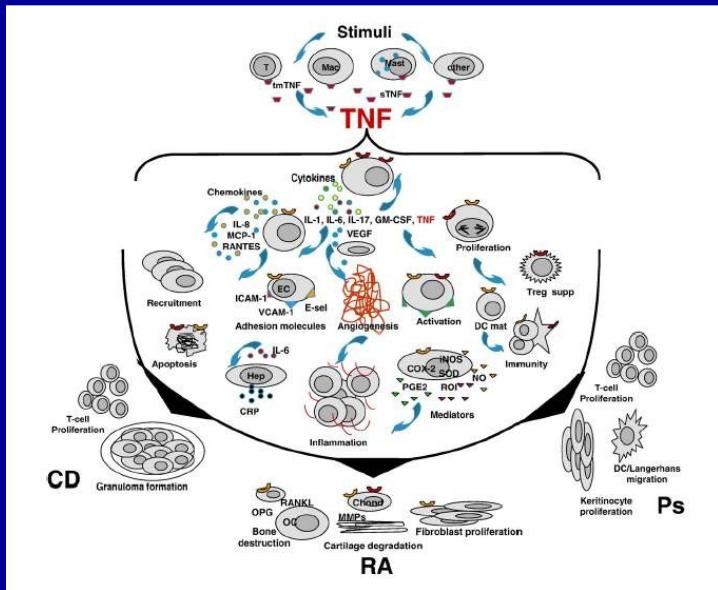








# Tumor Necrosis Factor-Alpha (TNF- $\alpha$ )



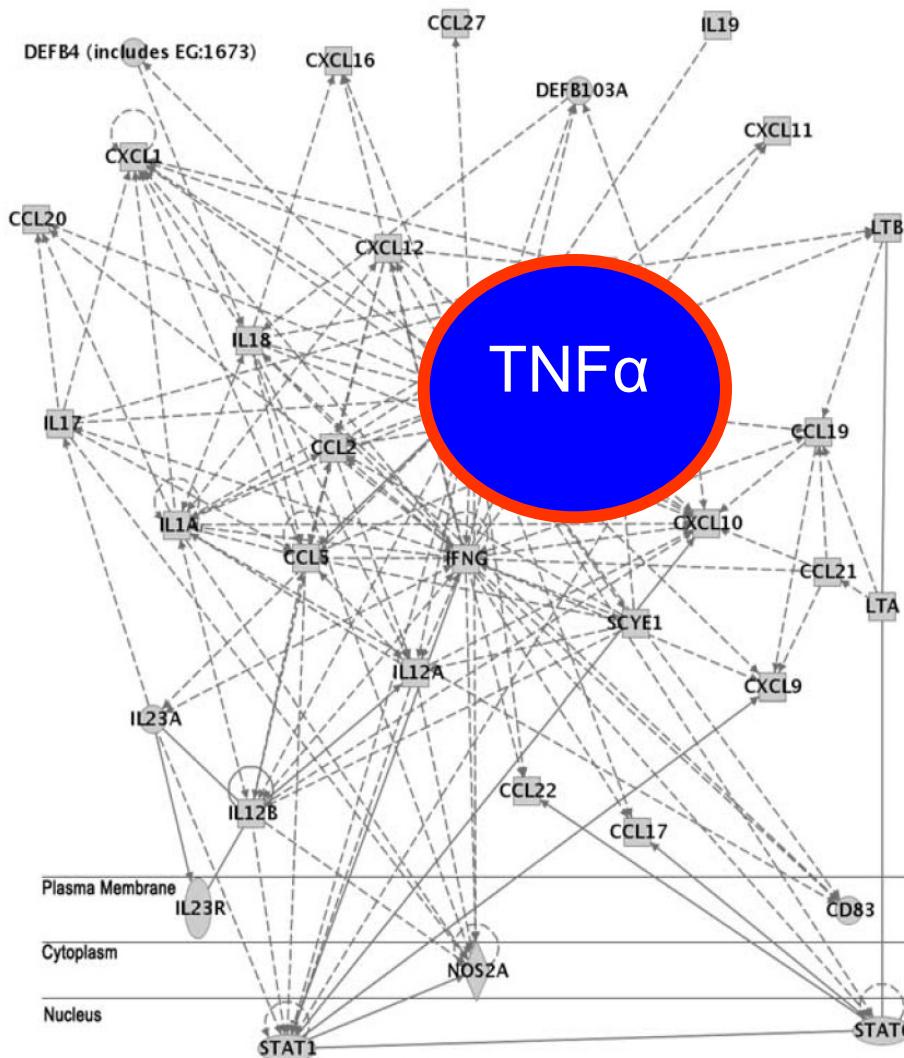
- ◆ A cytokine and major mediator of inflammation.
- ◆ Primarily produced by macrophages, but also by T cells, NK cells and mast cells.
- ◆ Both soluble and membrane-bound forms of TNF- $\alpha$  have biologic activity.

# The future in the biological treatment

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- Prognostic biomarkers
- Personalized medicine
- New molecules
- Wide knowledge of genetic background of psoriasis

# TNF $\alpha$ Plays a Central Role in the Pathogenesis of Psoriasis



Genes and Immunity (2007) 8, 1–12  
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[www.nature.com/gene](http://www.nature.com/gene)

## REVIEW

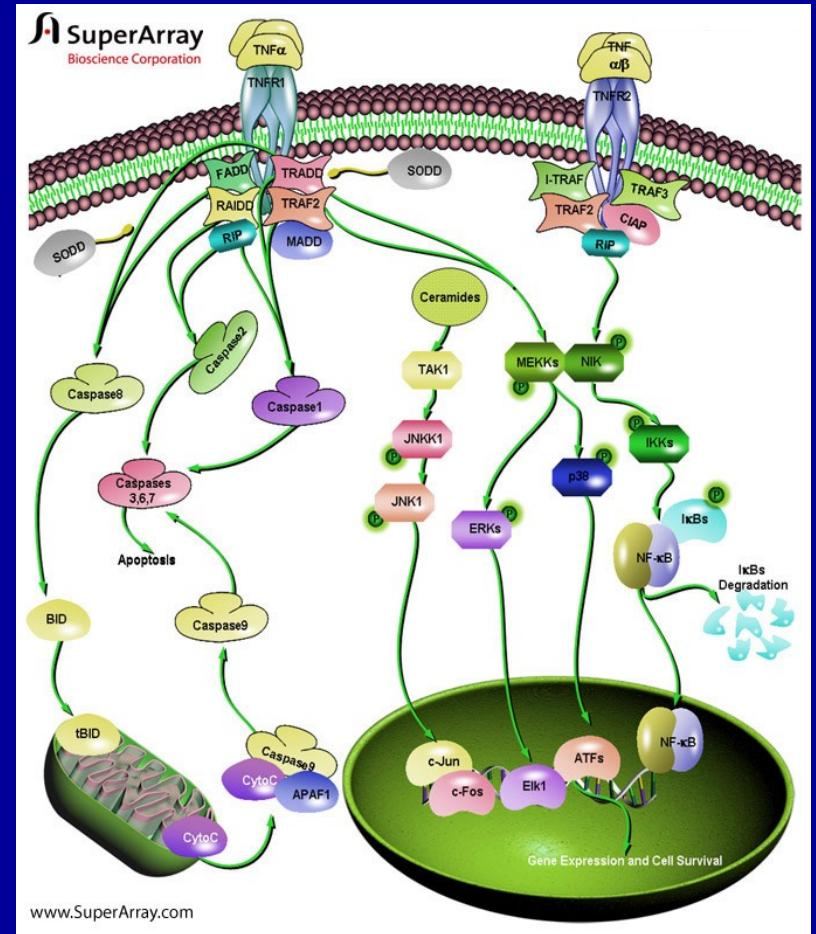
### *Psoriasis: genetic associations and immune system changes*

Y Liu<sup>1</sup>, JG Krueger<sup>2</sup> and AM Bowcock<sup>1,3</sup>

<sup>1</sup>Department of Genetics, Washington University School of Medicine, St Louis, MO, USA; <sup>2</sup>Laboratory for Investigative Dermatology, The Rockefeller University, New York, NY, USA and <sup>3</sup>Departments of Pediatrics and Medicine, Washington University School of Medicine, St Louis, MO, USA

# TNF

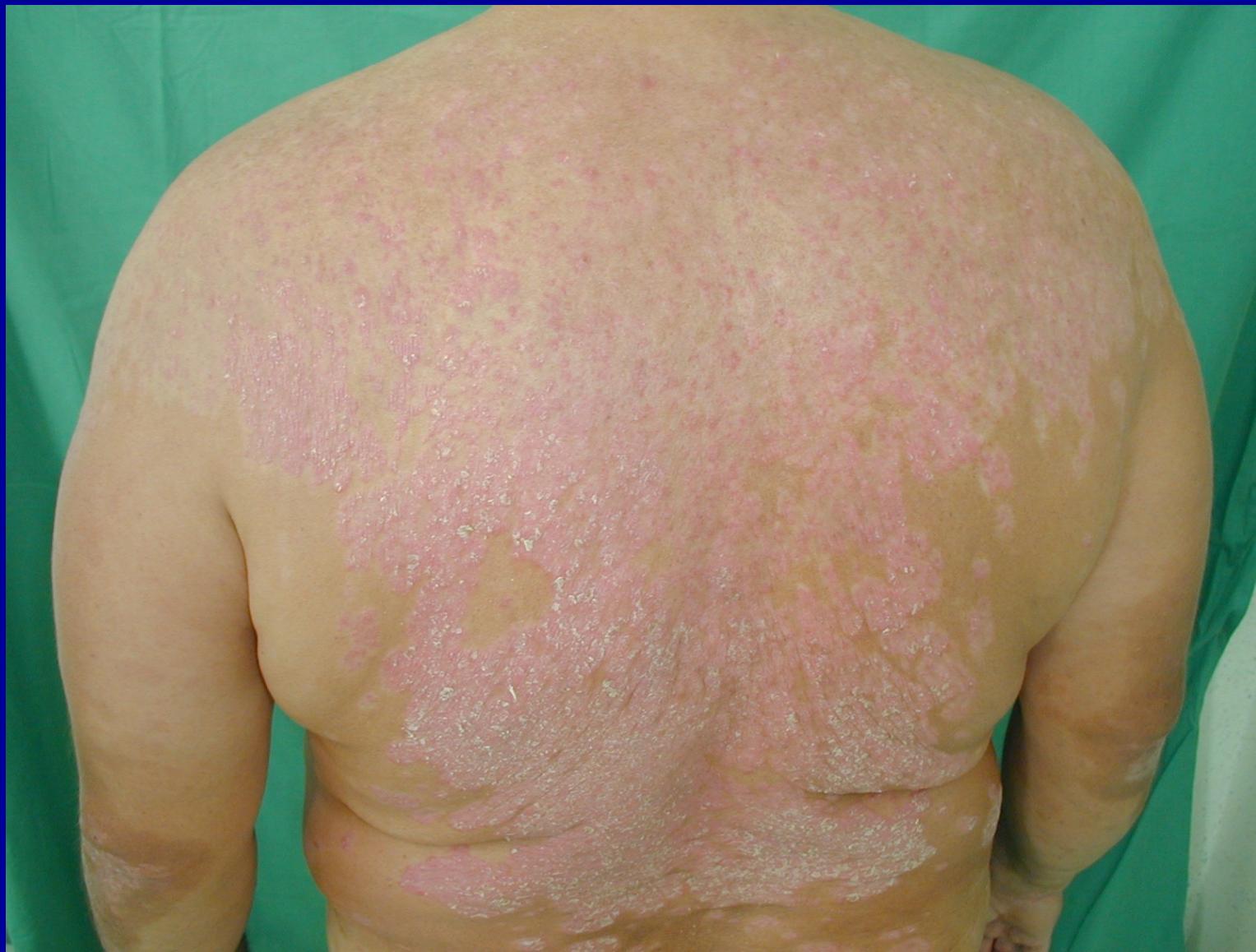
Multifunctional proinflammatory cytokine



# Před léčbou



# Před léčbou



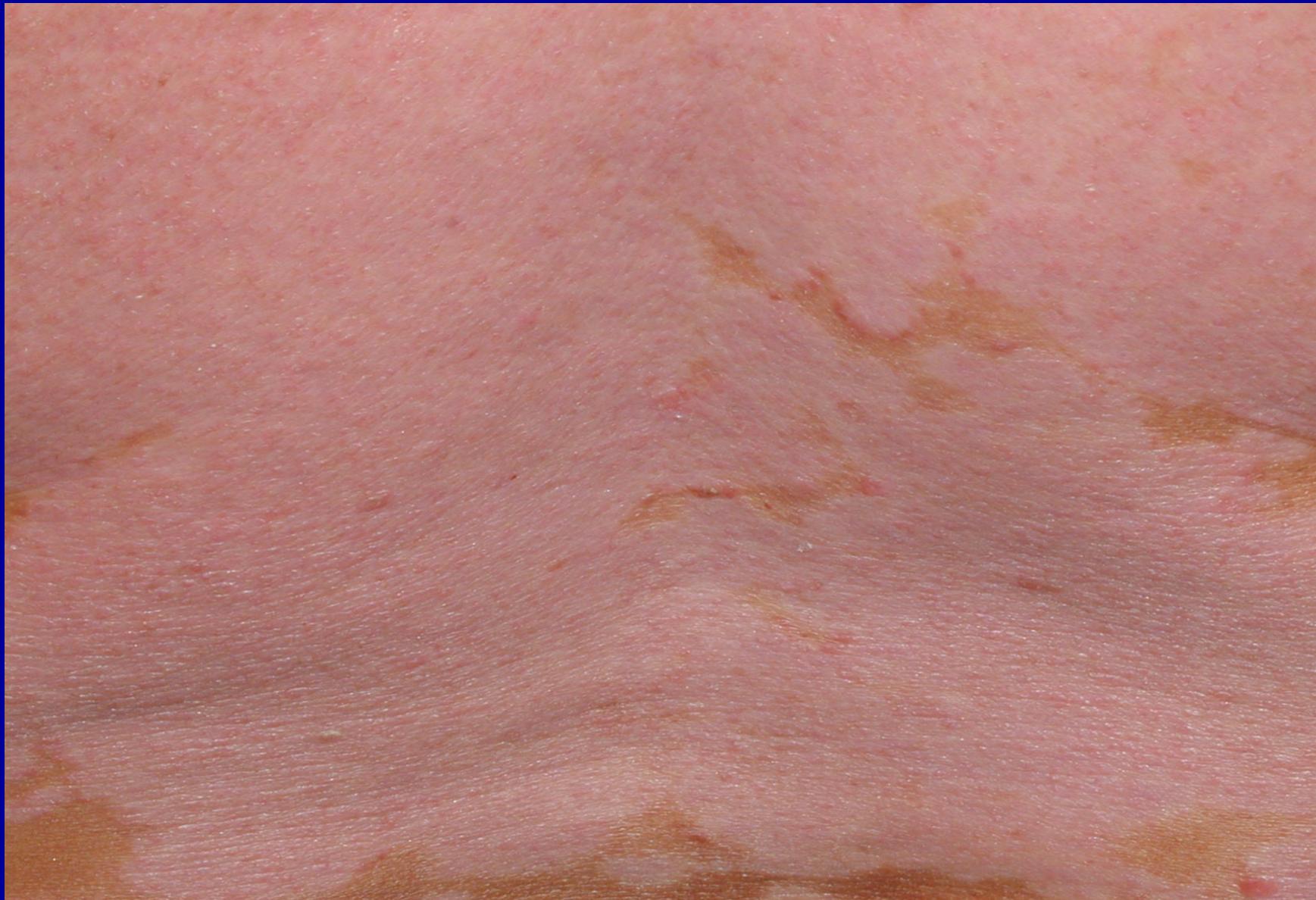
# Před léčbou



Po 4 týdnech léčby



**Po 4 týdnech léčby**



Po 24 týdnech léčby



Po 24 týdnech léčby



# Před léčbou



# Po 4 týdnech léčby



# Po 24 týdnech léčby



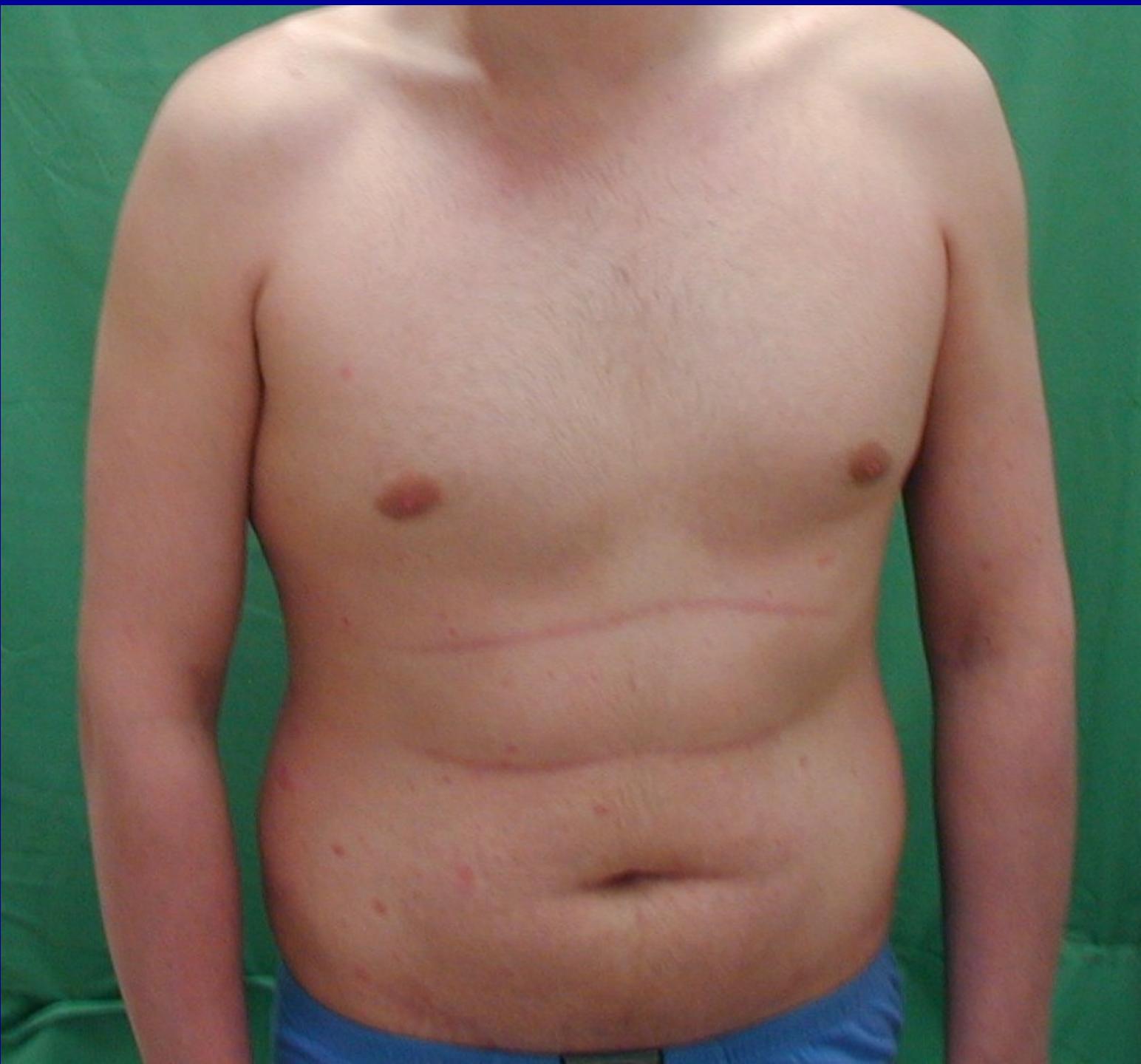


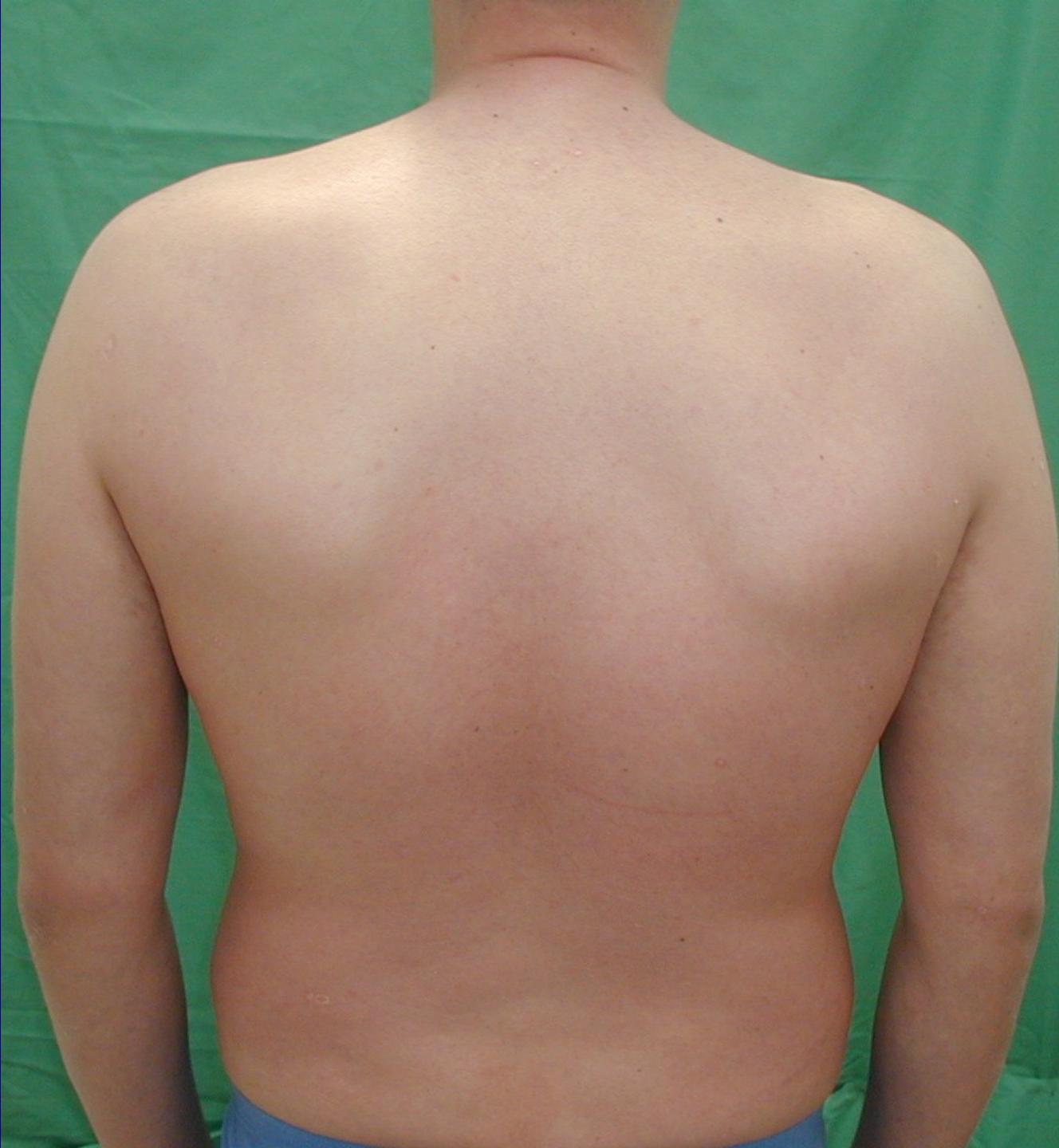


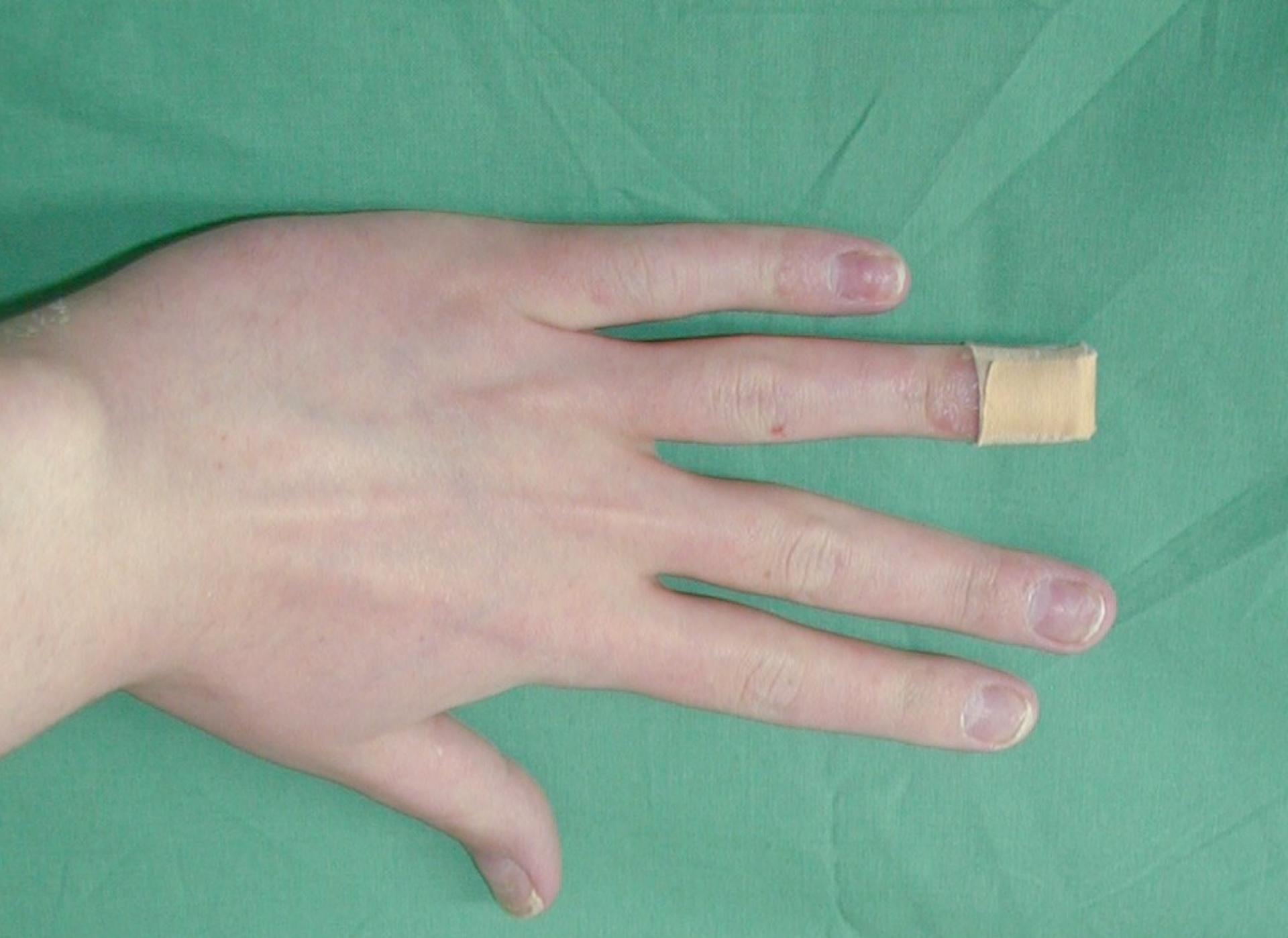














Buchdruckerei  
MARKUS KRAL