

Transcript Details

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Let's Get Serious About Scalp Psoriasis

Announcer:

This is ReachMD, and you're listening to *Psoriasis: What's Beneath the Surface*, sponsored by Lilly.

Dr. Birnholz:

From the ReachMD studios, I'm Dr. Birnholz, and on this episode, we spoke to dermatologist, Dr. Stefan Weiss. Dr. Weiss explains his clinical approach to scalp psoriasis and how he counsels patients toward effective, personalized treatments. Here's what he told us from his office in Hollywood, Florida.

Dr. Weiss:

In terms of the scalp psoriasis, obviously one aspect of it that's different is it is almost entirely hair-bearing areas, and so because of that, your choice of treatment is more limited. So again, as mentioned previously—for instance, on the elbow you have the option of ointment, cream, lotion, foam, solution, virtually any vehicle that you could possibly want. In the scalp your vehicles are much more limited to essentially solution or foam.

Now, the upside is that you have 2 very good vehicles to use in this case. One, the solution tends to get a little bit messier than the foam, but both options are quite reasonable for patients. The hard part is individuals' hairstyles, lengths, textures, can be very different, so not all scalps when taken into consideration with hair type will respond to these vehicles, so somebody with longer hair or thicker hair, it may be harder to apply some of these different treatments that we now have available to us. So I think when we think of scalp psoriasis, from a topical treatment paradigm, it's very important to understand how the vehicle is going to be accepted. I like to say to patients, "The treatment does absolutely no good if it's just sitting on the counter, so we need to make sure that whatever is prescribed is something that you are willing to use." And in that situation it's very nice to be able to have a patient test it out right in the office with a sample, because then you'll know that if he or she is unwilling to apply that vehicle regularly, he or she is never going to get the response that one would hope for.

The alternative is obviously systemic treatments, and the scalp, if totally involved by definition, would qualify for systemic therapy. But then you have that discussion with patients: "The psoriasis is localized to the scalp. Are you willing to accept the side effect profile of a systemic medicine to clear it?" And some patients are and some patients are not. So the upside to the disease limited to the scalp is you do have multiple options, again getting involved in a discussion with the patient about what his or her priorities are in the therapeutic choice, and the nice part is that there are multiple therapeutic choices, both convenience from a vehicle standpoint and number of systemics that can be quite effective.

Dr. Birnholz:

That was dermatologist, Dr. Stefan Weiss. For ReachMD, I'm Dr. Birnholz, encouraging you to be part of the knowledge.

Announcer:

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