Psoriasis and psoriatic arthritis (together called psoriatic disease) are chronic (lifelong) diseases related to the immune system. When you have psoriatic disease, your immune system becomes overactive, resulting in inflammation. Psoriasis causes lesions (abnormal changes to the skin in the form of plaques, pustules or areas of redness and swelling) on the skin. Psoriatic arthritis causes pain, stiffness and swelling in your joints as well as in areas where tendons and ligaments connect to bone.

Psoriatic disease can start at any age. Children typically experience their first psoriasis flare after an illness such as strep throat, an ear infection, bronchitis, tonsillitis or a respiratory infection. About 1 in 3 people who have psoriasis also develop psoriatic arthritis. For these adults, psoriatic arthritis usually follows psoriasis. However, children may often develop both at the same time.

### What are the symptoms?

**Psoriasis symptoms include:**
- Lesions
- Itch, irritation or pain
- Flaking and scaling
- Bleeding from dried or cracked plaques
- Nail changes like separation from nail bed, pitting or the appearance of a fungal infection

**Psoriatic arthritis symptoms include:**
- Stiffness, pain, swelling and tenderness in joints, tendons or ligaments
- Reduced range of motion in joints
- Fatigue
- Swollen fingers and toes
- Nail changes
What are psoriatic treatment options for children and teens?

There are safe and effective treatments for psoriatic disease. Speak with your pediatric specialist (dermatologist or rheumatologist) about a treatment plan that is most appropriate for your child.

**Topicals** are first-line treatment options (generally the first treatments recommended according to care standards) for mild psoriasis. Topicals come in many forms, ranging from over-the-counter (OTC) to prescription strength. It is typically safer to start with lower-strength topicals. Prescription strength options, such as topical steroids, should be used as directed by a health care provider.

**Phototherapy** is the second-line treatment option that uses ultraviolet light for mild-to-moderate psoriasis.

- There are 2 types of ultraviolet light B (UVB) treatments: broadband and narrowband.
- PUVA combines ultraviolet light A (UVA) with a medicine (called psoralen) taken orally or applied topically. Oral PUVA can be used only for teens 12 and older. For younger children, topical PUVA may be an option for certain areas, such as the hands and feet.

**Systemic treatments** may be considered for treating moderate-to-severe psoriasis or psoriatic arthritis. They include biologics and oral treatments. Although there are a few biologics currently approved for treating psoriatic disease in children and teens, other systemic treatments may often be used off-label. (See sidebar for more information about using treatments off-label.)

- Biologics are medicines made from living sources that are given as an injection or by intravenous (IV) infusion (a slow drip of medicine medication into the vein). The FDA has approved 2 biologics for treating children and teens with psoriasis. These include Enbrel (etanercept) for children 4 and older, and Stelara (ustekinumab) for teens 12 and older.
- Oral treatments are taken by mouth and treat the body from the inside out. There are currently no oral FDA-approved treatments for children or teens with psoriasis or psoriatic arthritis.

Why are there fewer treatment options for children and teens?

Treatment plans for children and teens are typically less aggressive than those for adults. The U.S. Food and Drug Administration (FDA) approves many psoriatic treatments for adults only. Often, there is not enough research and understanding of the possible long-term or delayed side effects for anyone younger than 18. However, ongoing research is examining the possible side effects in children and teens, which will hopefully lead to more FDA approvals of safe, effective treatments for younger patients.

Your child’s health care provider may prescribe treatments for off-label use in children and teens. Using a medicine off-label means you’re using it for a disease, health condition or age group other than the one for which the FDA approved it.

What should I do next?

- For more information on psoriatic disease for children, teens and parents, go to [psoriasis.org/our-spot](http://psoriasis.org/our-spot).
- Contact our Patient Navigation Center to find providers, prepare for appointments, discuss treatments and get help with accessing treatments [find contact information below].