

Let's Do Our Part

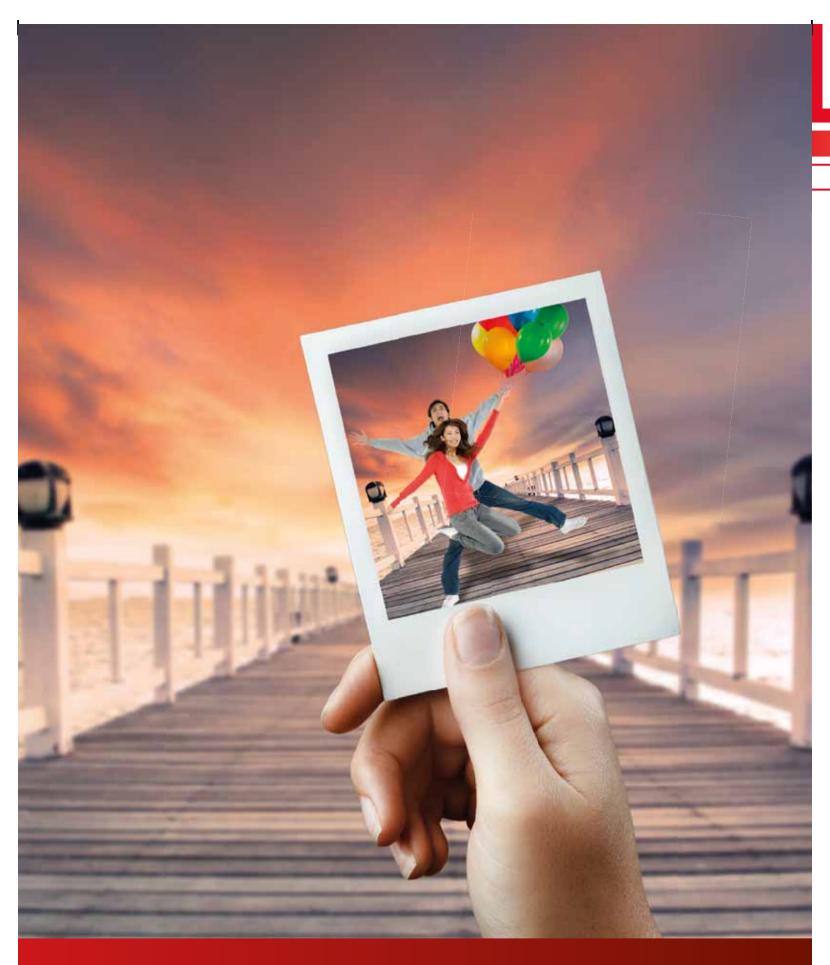




Please obey Home Quarantine Orders and Stay-Home Notices



Do not spread rumours. Get the latest on the COVID-19 by signing up for



Helping people living with psoriasis.



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President's Message May 2020

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We are in difficult times right now, with the Covid-19 pandemic escalating across the world. In Singapore, we have been fortunate to have a good government with a great health care system. With the early careful measures taken and extensive contact tracing and isolation, we have managed to avoid a huge spike in numbers and we have a lower mortality rate form the virus, but we are only at the start of a long journey.

All of us must play our part in preventing the spread of the virus. I am particularly concerned for our elderly members, many of whom have other medical or health issues and those who are on immunosuppressive therapies for their psoriasis, as the risk of a severe Covid-19 infection for them is far greater.

How do we play our part? We must be socially responsible and follow strictly the recommendations by the government. Social distancing is very important and we should avoid gathering in large numbers. Avoid going out if feeling unwell and wear a mask and seek medical treatment if you have a fever or cough. Avoid close contact with people who are feeling unwell. Observe strict hand hygiene – frequent hand washing and use of hand sanitizers is the most effective protection against the infection.

As a result of the recommendations to avoid large gatherings, our usual AGM will likely be postponed or we may be have to hold a virtual AGM meeting for the first time. Do wait for further announcements on this matter.

Together, we can help prevent the spread of the infection! The PAS stands united with Singapore in our fight against Covid-19. Stay strong and stay healthy!

God bless,

Golin Theng

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COVID-19 and its implications for psoriasis patients on immunosuppressive agents and biologics by Dr Koh Hong Yi & Dr Tham Siew Nee

Since the announcement of the first confirmed case of infection by the novel coronavirus, COVID-19, in Singapore on 23 January 2020, the number of cases in Singapore has risen to 106 cases, with 30 active cases. World-wide, the number of people infected have risen to more than 88,000 and more than 3,000 reported to have died from the illness. The virus has spread to more than 50 countries and more reports of spread keep coming in daily. When the Singapore government raised DORSCON to orange on 2 February 2020, it caused anxiety among many people. Among those who are infected, it is found that men with heart conditions and pre-existing illness are at a greater risk. For patients who are on immunosuppressive agents, it is of concern that they will be more prone to any form of illnesses although in normal circumstances, the risk of infection especially among those on biologics are low. What do we know about the condition so far and what can such patients do to protect themselves?

Covid-19 appears to be quite infectious and even healthy people can die from it. Although the death rate is lower than SARS, it is more severe than typical seasonal influenza. Therefore, it is prudent to take measures to protect ourselves.

1. Practice good hand hygiene. So far, most evidence suggest Covid-19 is spread by droplets. When droplets land on surfaces, we may touch these surfaces and accidentally transfer them to our face. Studies show that we touch our face many times a day subconsciously. Therefore, wash our hands more frequently each day with soap and water, and after coming home from outside. You can search for Youtube for 7-steps of Handwashing on the proper way to wash your hand like the way healthcare workers do. MOH has also advised that we wash for



20 seconds (about 2x the time to sing happy Birthday song). Be careful with high contact points eg lift buttons and door knobs.

- 2. Do not touch your face unnecessarily with your hands, especially the mucosal surfaces. So, no touching of mouth, rubbing of eyes or picking of nose!
- 3. Get influenza vaccine most clinics use the inactivated (dead virus) vaccine. This doesn't prevent Covid-19 but is good advice generally for people with lower immunity.
- 4. Wear surgical mask in crowded areas. There is less evidence whether surgical mask protects the wearer from droplets from other people. Surgical masks are mostly to prevent the wearer from spreading his/her droplets to others. It can offer some protection if someone coughs/sneezes directly in your face. Considering the shortage of masks and the need to conserve, it is better to follow the government's advice to wear only when sick, or wear only in crowded places.
- 5. Avoid crowded places, especially enclosed air-conditioned spaces e.g. cinemas.
- 6. Good control of pre-existing illnesses e.g. diabetes or hypertension.
- 7. Finally monitor your temperature twice daily and see a doctor if you are sick.

During this difficult period while waiting for the virus to be controlled, it is prudent to be careful and avoid crowded places. Follow the above steps and your risk of being infected will reduce.



Members' Questions on Social Media

By Dr Koh Hong Yi

You have been active on our Facebook page! In this segment we will address some of the queries members have posted. Note that we cannot provide specific medical advice here and what we say here are not a substitute for formal medical advice – please consult your doctor for these questions. Overall, we will try to keep the Facebook page as a platform for members to share information and experience with other members, so keep posting!

Question 1:

Chng Wendee

Good morning all!

Any good recommendations if lotion/remedy for these post-psoriasis patches? Hoping to have an even skin tone...

Guo Rui Fa Perhaps some sun to help tan skin n lots of moisturisers may help. Btw how did u get your patches cleared?

Answer:

Generally, pigmentary changes after skin inflammation will improve with time. Counter-intuitively, sun exposure may in fact accentuate the colour difference between normal and affected skin. Many dermatologists will advise patients with such problems to avoid excessive sun exposure. If in doubt, please talk to your doctor.

Question 2: Dionysius Ang

Hi guys, can I ask if you have tried using Vizomet? I was prescribed it by NSC. The doctor said that it wasn't a steroid and have lesser side effects. I was wondering what are its effects and why wasn't it prescribed earlier seeing how it has lesser side effects.

Answer:

Vizomet contains mometasone furoate which is a steroid. There have been studies on mometasone furoate which found that when applied on the skin, the level of absorption into the blood stream is very low. It can cause skin thinning and other side effects associated with steroid creams, but the rates of side effects have been shown to be low when used appropriately. Some doctors have hence preferred to use mometasone furoate compared to other steroids, but the choice of which steroid to use is influenced by many factors including the severity of the skin condition and which part of the body the steroid is to be applied, so it is best that you discuss with your dermatologist.

Question 3:

Fandy Sastrawijaya Liang

Hi all,

My shin specialist gave me two medications for my psoriasis; Diavobet and Vizomet. He told me to use Diavobet first and when it gets better start with Vizomet.

I know i should asked the doctor about this question last time, but anybody can tell me what kind of skin condition that could be described as better (suitable for Vizomet usage)? Is it when the skin are not flaky anymore or.....?

How about the soap? And how often do we need to shower?



Members' Questions on Social Media

Answer:

Psoriasis is characterized by itch, redness, skin thickening and scaling (flakes). Hence improvement is when these features improve or disappear. The time to decrease the strength of topical medication depends on many factors including the initial severity of the skin condition, how regular the treatment is and the location of the lesion. For example, very severe or thick psoriasis areas may need to be treated with a stronger topical medication for a longer period before significant improvement is seen. Most patients will gain experience with managing their different topical medications and psoriasis with time. You should continue follow-up with your doctor, so that he or she can advise you if you are using your creams correctly (whether too much or too little), and whether the creams are working or causing side effects.

Question 4:

Aung Phyoe

Anyone knows how much per Stelara injection will cost? And how we can get it cheaper?

Answer:

The cost of biologics is generally similar across clinics or institutions, though there may be slight variations. In Singapore, some subsidy is available for Singaporeans, provided they meet certain criteria such as suitability to use biologic and income levels below a certain threshold. Note that currently, not all biologics are eligible for all forms of subsidy. Some pharmaceutical companies offer programs where patients can get some injections free after paying for a few injections. Your doctor will be able to advise you.

Question 5:

Aung Phyoe

What's everyone's take on steriod creams? I hear it will cause withdrawal symptoms and I haven't been using them for a few months.

Does anyone know any alternatives? I hear sulphur soap helps and plenty of moisturizer on affected area can help peel the skin off faster

Answer:

Psoriasis is a chronic disorder. Hence for most patients, psoriasis will recur after treatment is stopped. Topical steroids are the most common medication used to treat psoriasis because of their proven effectiveness, long experience of use, and lower cost compared to many other medications. Topical steroids can be used safely in appropriate conditions. As with all medications, there may be side effects which your doctor can advise and help monitor.

Moisturizers have been shown to improve the efficacy of topical medications used to treat psoriasis. There are other topical medications for psoriasis such as topical vitamin D analogues, topical calcineurin inhibitors and topical coal tar preparations. Your dermatologist would be able to discuss with you the pros and cons of each treatment.