

Scottish Parliament

Cross Party Group on Psoriasis and Psoriatic Arthritis

18th June 2013

Minutes

- 1) Present: Janice Johnson, PSALV; Polly Buchanan, Galderma; Lorna McHattie, Robert Gordon University; Sheila Robertson, Dermatology Liaison NHS Fife; Pat Evans, PSALV; Ruth Burns, PSALV; Dr Hoda al Mahrouki, Southern General Hospital; Dr Iain Campbell, GP/trainer; Margaret Mitchell MSP; Dave Thompson MSP; Dr Stewart Douglas, SCCS; Dr Andrew Affleck, Consultant Dermatologist, Tayside; Dr Victoria Scott-Lang. Later, Linda Fabiani MSP attended
- 2) Minutes of the meeting on 17th April 2013 agreed, proposed by Iain Campbell, seconded by Janice Johnson. No matters arising
- 3) Dr Andrew Affleck gave a presentation entitled The Psychological Effects of Skin Disorders.

Main points; 350 suicides per annum are attributed to stress/depression from psoriasis. The Griesemer index describes triggers for stress.

Questions were asked about training (Victoria Scott-Lang) and guidelines for drugs e.g. Methotrexate (Hoda al Mahrouki), Iain Campbell asked about approaches for patients with less severe conditions, adding that there is not enough time to explore properly.

Dr Affleck described the necessity to explore what precisely is affecting the patient, what is happening from day-to-day. Need to challenge exaggerated beliefs and reframe thinking and behavior. He said that specialist nurses may have more time. Iain Campbell said that doctors should be targeting those we can help with the resources we have (effectively triaging)

Dr Affleck described the DALLAS programme, an online resource for self-help but said that one in 20 patients requires extra, psychological help.

Lorna McHattie said that SIGN 121 should have an annual review part of which would be the psychological effects of psoriasis, asking if there were counselors in dermatology departments.

Dr Affleck responded that there are none at Ninewells & that the number is very limited. Holding measures are needed until there are more resources.

Polly Buchanan asked how this group could help the rest of the dermatology world.

Clearly, SIGN 121 brushes the surface with regard to capacity/awareness. There should be psychological help available in all departments with patients triaged to a psychologist, psychiatrist or a nurse. For most patients such help would be a minimal requirement.

Polly added that two senior nurses in dermatology have attended an Edinburgh course to develop knowledge and skills. Galderma is looking at a course to be extended to the whole of Scotland.

Janice said that Daniel Kemmett had said in the past that there were very poor resources in Lothian, whose patients have to go to their GPs. In-patients can ask for psychiatric liaison.

Dr Affleck said that there is a 2 – 3 year waiting list! The effect on psychological health can be as serious as conditions such as cystic fibrosis or HIV.

Iain Campbell said, 'We have no resources, we could open a can of worms and without resources make matters worse.'

Dr Affleck said that he did not entirely agree – patients can be helped if a doctor sympathises. Iain added that GPs can recommend it but have no influence on whether or not a patient gets psychological help.

Ruth asked what role charities have. Dr Affleck said none but that they could conduct research. Pat said that people must know what they are doing with regard to psych help.

Stewart Douglas – community mental health services are tailored very much to alcohol & substance abuse problems. Could there be an initiative to widen services to include more conditions?

Mary Blackford agreed to contact the Westminster All Party Group. Apparently the NICE document on psoriasis includes standards of care including an annual review. Final recommendations to be published in August 2013. These will be brought to the next meeting for consideration.

Lorna suggested the CPG should host a dermatology best/latest practice conference. She, Polly and Mary agreed to meet to take this further.

Date of next meeting 25th September 2013, to include a presentation from the Ninewells Hospital Home Phototherapy Unit.