

Unmet educational needs and clinical practice gaps in the management of generalized pustular psoriasis: Global perspectives from the front line

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Dr Paolo Romanelli was not able to approve the final poster ahead of submission.

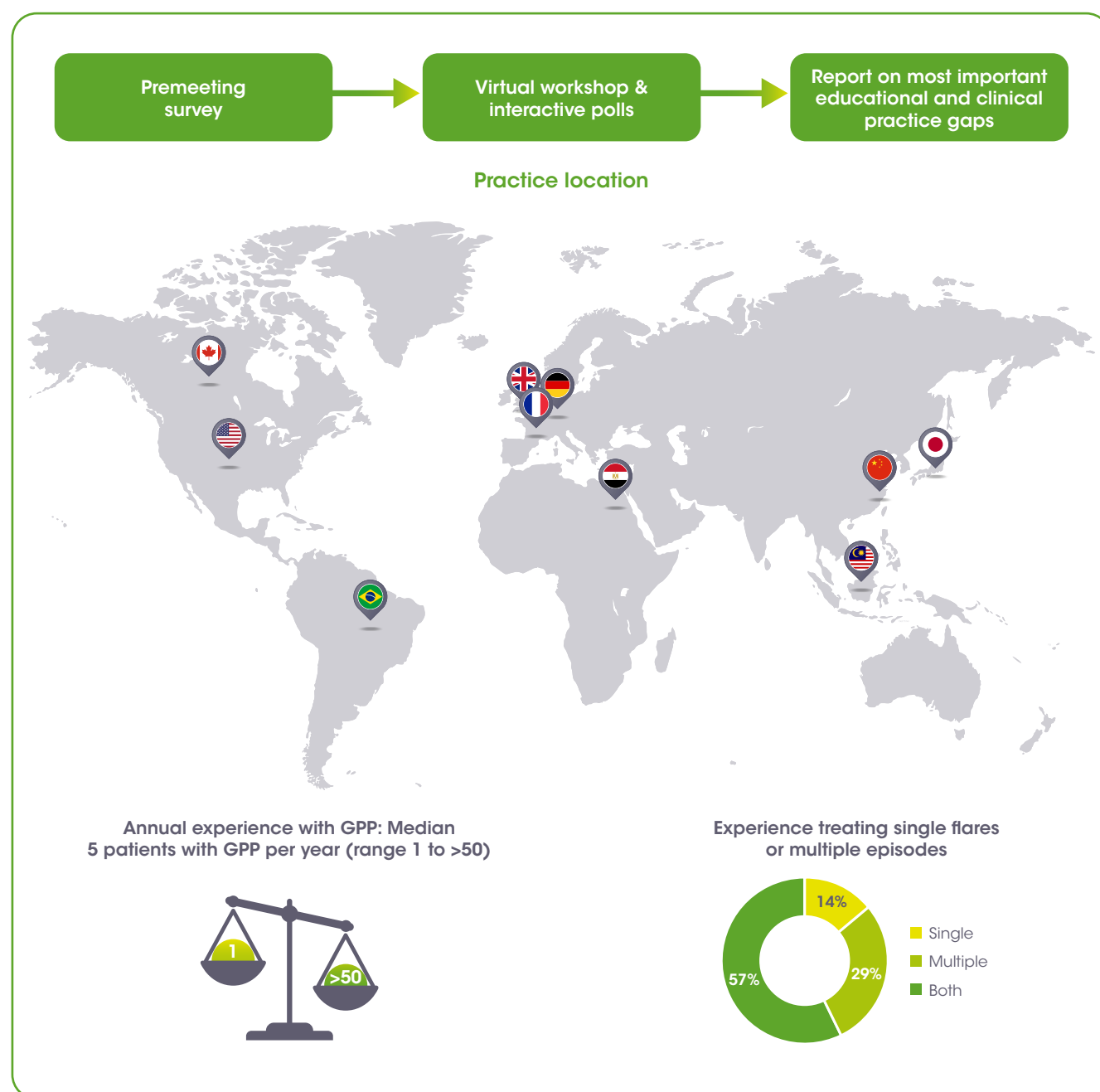
Background

- Generalized pustular psoriasis (GPP) is a rare, neutrophilic, autoinflammatory skin disease characterised by episodes (or flares) of widespread sterile, macroscopically visible pustules that can occur with or without systemic inflammation¹⁻³
 - GPP is associated with a significant clinical burden, with a detrimental effect on patient quality of life, and can be life-threatening if left untreated
- Successful management of GPP flares requires rapid treatment with the most appropriate agent
- Lack of experience often means that GPP is neither diagnosed promptly nor referred appropriately, resulting in treatment delays that can have a negative impact on response
 - There is a need for more widespread awareness of this debilitating disease²

Methods

- On 24 July 2020, 13 dermatologists (practicing in private and public settings in Brazil, Canada, China, Egypt, France, Germany, Japan, Malaysia, the UK and the US) attended a global virtual workshop to share experiences with the diagnosis, treatment and management of patients with GPP (Figure 1)
- Educational needs and clinical practice gaps grouped according to healthcare system level ("macro", regulatory/economic factors; "meso", organisation/hospital factors; "micro", individual healthcare provider [HCP] factors) were discussed and ranked using interactive polls
- The aims of the workshop were:
 - to review current real-world standards of care in GPP (and variation between countries)
 - to identify educational needs and clinical practice gaps in GPP management that HCPs may have

Figure 1. Workshop flow and participating dermatologists



Results

Standards of care in GPP: Perspectives and challenges

- The key perspectives and challenges that were identified in the premeeting survey and discussed in the workshop are summarised in Table 1

Table 1. Key perspectives and challenges identified by workshop participants in diagnosis, treatment and management of GPP

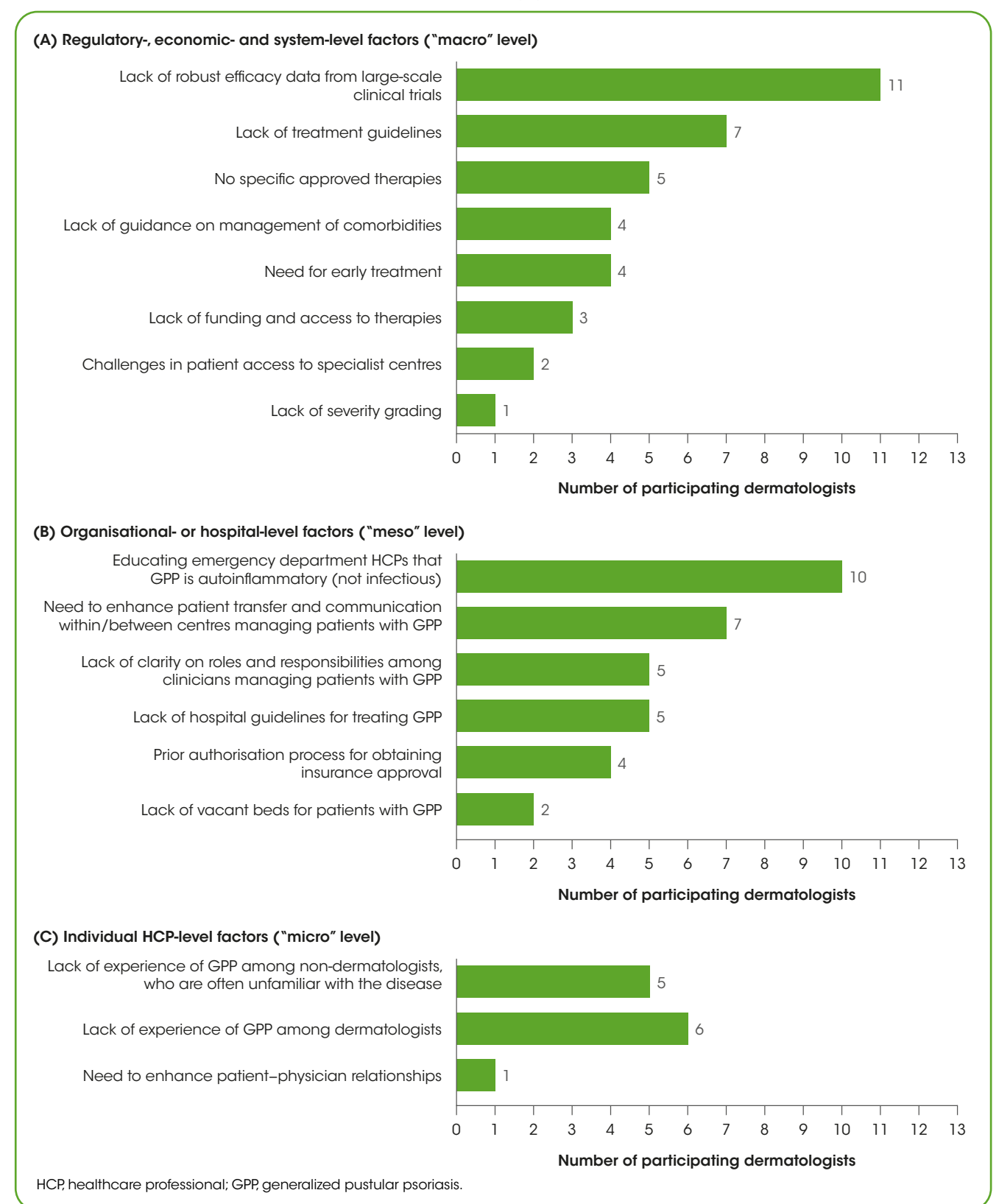
Category	Key Perspectives and Challenges
Diagnosis	<ul style="list-style-type: none"> Differential diagnosis is a key challenge in obtaining an accurate GPP diagnosis Misdiagnosis is frequent among non-dermatologists, which can cause delays in referral and the initiation of appropriate GPP treatment Both the ERASPEEN and JDA definitions of GPP are associated with some limitations Less experienced dermatologists and non-dermatologists encounter GPP very rarely so they often have a poor understanding of appropriate GPP treatment and management
Treatment	<ul style="list-style-type: none"> Retinoids, methotrexate and cyclosporine are the most widely used therapies used to treat GPP, but the availability of biologics in some countries has improved the management of the disease Dermatologists' expectations of GPP treatment responses vary depending on the selected therapy Biologics are promising options for the treatment of GPP Prohibitive costs and insurance limitations can prevent patients with GPP from accessing the most effective treatments Although MDT collaboration is often preferred in GPP management, shared decision-making is associated with its own unique challenges The lack of guidelines to support GPP treatment selection is a crucial unmet need in supporting disease management
Ongoing management	<ul style="list-style-type: none"> The development of GPP disease severity guidelines and validated assessment tools would streamline patient assessments for dermatologists Educating patients on their role in disease management is key to delaying the occurrence of GPP flares Managing comorbidities of GPP is a considerable challenge in patient care and warrants further guidance and investigation Psychological follow-up is an important (but frequently overlooked) aspect of long-term care for patients with GPP Regional nuances and socioeconomic factors can present challenges in access to care for patients with GPP

ERASPEEN, European Rare and Severe Psoriasis Expert Network; GPP, generalized pustular psoriasis; JDA, Japanese Dermatological Association; MDT, multidisciplinary team.

Clinical practice gaps and educational needs

- Specific key clinical practice gaps and educational needs that participating dermatologists identified as presenting the most significant challenges to GPP management are summarised in Figure 2
- At the individual level, a lack of experience of GPP diagnosis and/or management among HCPs was identified as the highest priority clinical practice gap
 - Limited understanding of the presentation and pathogenesis of GPP among non-specialists means that misdiagnosis is common
 - In countries where patients may present to general practitioners or emergency departments rather than to specialists, GPP is often mistaken for an infection
 - Among dermatologists who can accurately diagnose GPP, limited knowledge of treatments and follow-up may still necessitate referral to a colleague with more experience in GPP management
- At the organisational level, educating emergency department HCPs to recognise GPP as an autoinflammatory disease was regarded as a high priority, along with improved communication, cooperation and definition of roles and responsibilities within multidisciplinary teams involved in the treatment and ongoing support of patients with GPP
- At the regulatory level, the need for robust clinical trial data was identified as the highest priority, followed by the need for clear and consistent treatment guidelines and approved therapies

Figure 2. Key identified gaps: Individual HCP-level factors (A); organisational- or hospital-level factors (B); and regulatory-, economic- and system-level factors (C)



Conclusions

- The rarity of GPP makes it impossible for all clinical centres to develop an adequate level of experience in the management of this disease
- The most important educational need is that both non-dermatologists and dermatologists appreciate that GPP can be life-threatening if the initiation of correct treatment is delayed, and that they understand when to refer patients to a specialist for diagnosis and/or treatment and ongoing management
- Academic- and community-based practices that regularly see patients with GPP should strive to efficiently learn from their experience and to develop further in their capabilities such that they can serve as specialist centres that are able to collaborate with others to ensure delivery of consistent best practice treatment for patients with GPP

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Disclosures

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