

Features of the metabolic syndrome common in persons with psoriasis

December 20 2010

Individuals with psoriasis have a high prevalence of the metabolic syndrome, according to a report posted online today that will appear in the April 2011 print issue of *Archives of Dermatology*.

According to background information in the article, individual features of the [metabolic syndrome](#) include obesity, [high blood pressure](#), diabetes and high total cholesterol and triglycerides. Additional background information notes that while past studies have suggested a link between [psoriasis](#) and individual components of the metabolic syndrome, there is little data available regarding the association between psoriasis and the metabolic syndrome as a whole.

Using data from the National Health and Nutrition Examination Survey, Thorvardur Jon Love, M.D., of Landspítali University Hospital, Reykjavik, Iceland, and colleagues, examined the association between psoriasis and the metabolic syndrome. The study included 6,549 individuals, and the mean (average) age of participants was 39, half were men and the mean [body mass index](#) (BMI) was 28.

Overall, 40 percent of individuals with psoriasis also had features of the metabolic syndrome, compared with 23 percent among controls. The most common feature of the metabolic syndrome among individuals with psoriasis was abdominal obesity (63 percent), followed by high triglyceride levels (44 percent) and low levels of high-density lipoprotein (HDL) or "good" cholesterol (34 percent). High triglyceride levels are defined as at or above 150 milligrams per deciliter, and low HDL levels

are defined as less than 40 milligrams per deciliter in men and less than 50 milligrams per deciliter in women. No elements of the metabolic syndrome were found in 28 percent of individuals without psoriasis compared with 13 percent of those with psoriasis.

"In conclusion, these findings from a nationally representative sample of U.S. adults show a doubling in the prevalence of the metabolic syndrome among patients with psoriasis independent of age, sex, race/ethnicity and C-reactive protein levels," the authors write.

"Given its associated serious complications, this comorbidity needs to be recognized and taken into account when treating individuals with psoriasis," they conclude.

More information: *Arch Dermatol*. Published online December 20, 2010. [doi:10.1001/archdermatol.2010.370](https://doi.org/10.1001/archdermatol.2010.370)

Provided by JAMA and Archives Journals

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