

**VALUE IN PSORIASIS:
PROPOSING A PATIENT-DRIVEN CORE OUTCOME SET FOR DAILY CLINICAL PRACTICE**
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INTRODUCTION

- It is of key importance to understand what value encompasses for psoriasis patients – knowing which outcomes matter the most.
- To date, there is no core outcome set (COS), a consensus-driven minimum set of outcomes, available that can be used when managing psoriasis in daily clinical practice.

OBJECTIVE

To develop an actionable outcome set for daily clinical practice.

RESULTS

- **STEP 1:** resulted in 23 patient-relevant outcomes.
- **STEP 2:** two outcomes were deemed inappropriate.
- **STEP 3:** the outcomes scored as most important were *symptom control*, *treatment efficacy* and *confidence in care* (Table 1). A significant difference was shown between the ranking of the outcomes. A preliminary COS was defined (Figure 1).
- **STEP 4:** review still ongoing.

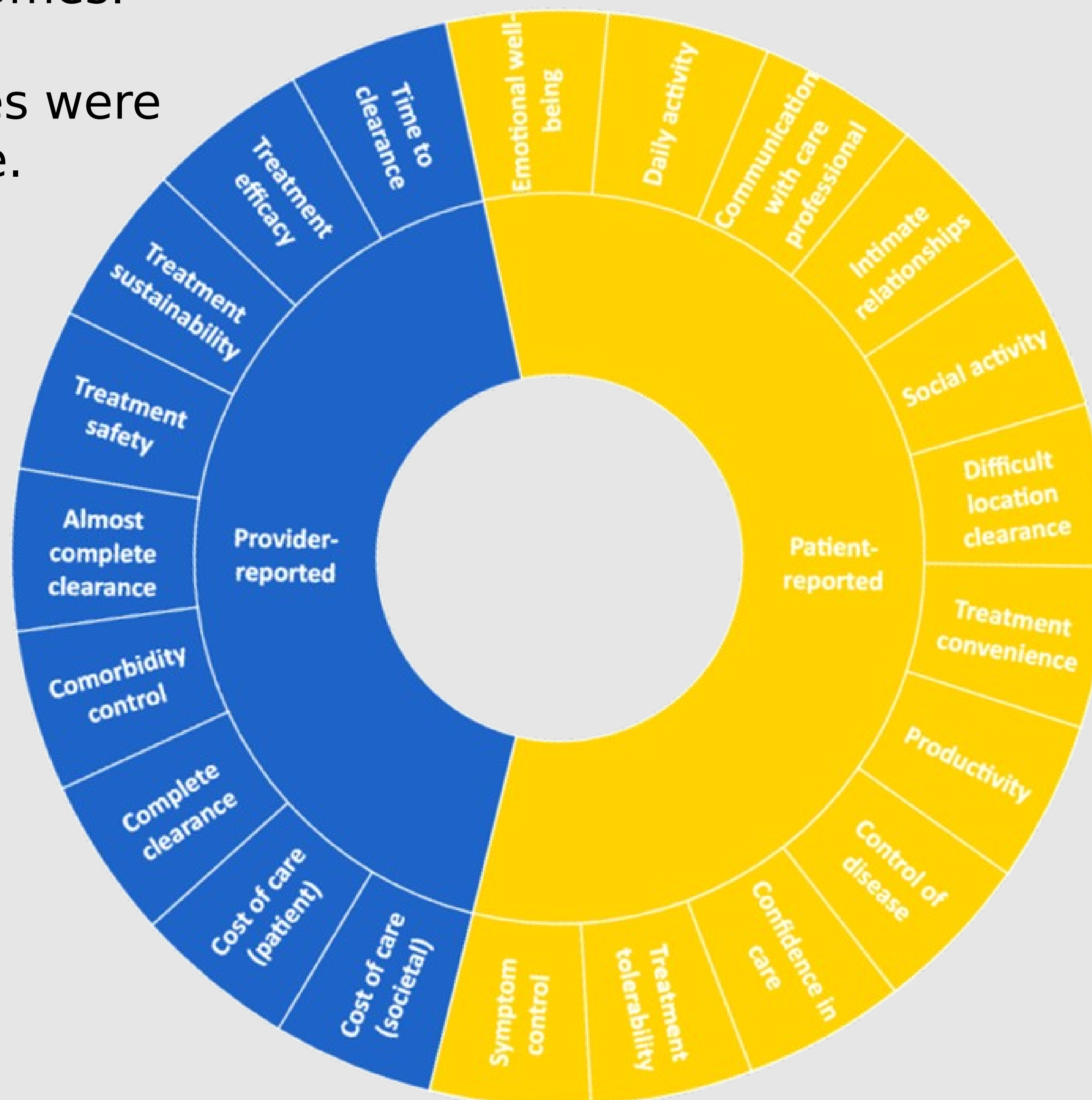


Figure 1: Preliminary Outcome Set

METHODOLOGY

- STEP 1:** systematic review assessing patient-relevant outcomes.
- STEP 2:** modified nominal group technique with patients (n=8) to establish if these results represented all relevant outcomes.
- STEP 3:** ranking of outcomes by patients (n=120) using cards with formation of COS.
- STEP 4:** literature review to obtain suitable instruments that can be used to assess the outcomes in the COS.

Table 1: Ranking of Outcomes (with the highest ranked one receiving 21 points and the lowest receiving only 1 point)

Outcome	Mean score (SD)*
Symptom control	15.8 (4.5)
Treatment efficacy	13.9 (5.8)
Confidence in care	13.5 (5.1)
Control of disease	13.4 (4.8)
Complete clearance	12.9 (7.1)
Treatment sustainability	12.7 (4.9)
Difficult location clearance	12.3 (5.9)
Almost complete clearance	11.9 (5.8)
Treatment safety	11.8 (5.2)
Communication with care professional	11.5 (5.7)
Daily activity	11.5 (6.2)
Emotional well-being	11.0 (6.1)
Time to clearance	10.7 (5.5)
Treatment tolerability	10.3 (5.0)
Treatment convenience	10.3 (5.7)
Intimate relationships	9.6 (5.7)
Social activity	9.2 (5.8)
Comorbidity control	9.0 (5.6)
Productivity	8.0 (5.7)
Cost of care (patient)	6.3 (5.4)
Cost of care (societal)	5.5 (4.6)

The Friedman test showed a significant difference between the ranking of the outcomes P<.001. *data not normally distributed. SD: Standard Deviation.

CONCLUSIONS

- We propose the first outcome set that can be used to direct psoriasis care in a value-based manner.
- Measuring these outcomes can enable us to critically appraise and improve current care thereby increasing value for the patient.
- Further international validation will be necessary and is ongoing.

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