

PSORIASIS

Who does it affect?

Psoriasis affects around 6% of the population although people with mild symptoms do not always recognise that they have it. Psoriasis can begin at any age but it is most commonly diagnosed between the ages of 15 and 35. There is no apparent sex link but it is a group of conditions that run in families. If both parents have it, there is a 60% chance that the children will have it.



The incidence is low in dark skinned West Africans, Native Americans, Japanese and Eskimos. This is partly genetic and partly associated with diet. The Japanese and Eskimos eat a high proportion of oily fish supporting the theory that Omega 3 Fatty acids are beneficial to psoriasis sufferers whereas Omega 6 is not. Research suggests that people who are prone to psoriasis cannot metabolise fully the Arachidonic fatty acid that is the by-product of digesting animal fats. However, fatty acids are essential for life so it is not just a case of getting rid of them all!!! It is a case of modifying the balance.

The Nature of the Condition:

Psoriasis occurs in different forms but it invariably involves the thickening of the skin because skin cells reproduce on average every 3 or 6 days as opposed to the normal skin replenishment cycle of 28 days. The immature skin cells migrate to the surface forming the thickened patches characteristic of the condition.

There is also a build up of white blood cells called T-cells under the skin which release leukotrienes that cause inflammation so there is increasing support for the theory that it is a form of allergic reaction. Omega 6 fatty acids stimulate T-cells & leukotriene production. However, it is a very different reaction to that associated with Atopic dermatitis (eczema) and the incidence of eczema in psoriasis sufferers is much lower than in the population as a whole.

Most people who have psoriasis have it for life but it comes and goes for no apparent reason and the severity of the flare-up can vary. This article in the series details skincare that can help alleviate the symptoms but also looks at lifestyle choices that reduce the incidences of this very distressing skin reaction.

Types of Psoriasis & Symptoms:

- **Plaque (discoïd)** – the most common form (90% of sufferers)
- **Localised pustular** – More common in adults than children
 - Clearly defined patches of pink or red skin called plaques
 - Dry, silvery scales which flake off
- **Guttate** – Usually children & adolescents
 - Small round red spots on body, limbs or scalp usually after infection & antibiotic treatment
 - Suggestive of a predisposition so needs lifestyle awareness to ensure temporary & not permanent
- **Flexural** – most common older people especially women
 - Red, inflamed patches in the folds of the body
 - Usually no scaling
- **Nail** – More common in people over 40 & linked with development of psoriatic arthritis
 - Nails become ridged & may lift away from the finger
- **Localised pustular** – More common in adults than children
 - Pus filled spots on palms & soles
 - Painful and might resist therapy
- **Erythrodermic** – Rare & very serious in need of Medical Consultation
 - Large areas of the body become inflamed & scaly
 - Patients lose ability to control body temperature
 - Nutrient & fluid loss
- **Psoriatic arthritis** – Around 6% of psoriasis sufferers
 - Stiff painful & inflamed joints
 - Normally affects finger or toe rather than individual joints
 - Common sites are hands, feet, spine & neck

Causal factors:

- **Genetic** i.e. an inherited trait
- **Diet**
- **Auto-immune disorders**
- **Stress**
- **Environmental factors**
- **Hormones**
- **Infections & Drugs**



Fish – the Psoriasis sufferer's best friend!

You cannot change your genes (at least at present whilst stem cell therapy is in its infancy!) but you can control your diet. In the case of psoriasis sufferers, it is a case of moderation and variety so it does not mean the impossible fad diet.

Food & Drink TO LIMIT

Fatty meat especially pork
Whole grain
Sugars
foods
Cows milk
Margarine

Vegetable oils
Nuts
Most baked, processed

Candy & sweets
Alcohol

Foods TO EAT

Salmon
Tuna
Halibut
Mackerel
especially
Trout
Herring
Sardines (in brine)
Butter

Nut oils (esp. walnut)
Olive oil (olives are fruit)
Garlic
Fresh fruit & vegetables

apricots, oranges, guava,
mango, passion fruit,
blackberries, cabbage,
potato, tomatoes, sweet
peppers & broccoli

The foods listed not only generate low level of Arachidonic acid but also contribute essential elements that tend to be low in psoriasis sufferers namely Selenium, Chromium, Zinc, Vitamin A, C, D & E. The diet is essentially Mediterranean. According to Danish workers, oral treatments with vitamins & minerals are not a substitute for the natural diet and do not evoke the same clinical responses in controlled experiments.

In addition, some psoriasis sufferers are intolerant of gluten so unfortunately most breads, pizzas & pastas are not for daily consumption!! The best sources of carbohydrates are rice, potatoes & buckwheat. Millet bread is a good alternative to wheat or rye breads. Corn & cornstarch can be used as energizers and thickeners and sorghum based sweeteners are a natural alternative to sucrose. Lean turkey, chicken, kidney, liver & liver pate are all "neutral" meats that can be used to provide variety in the diet. Lean beef and lamb are for occasional use.

Other Positives, Intolerances & Sensitivities in Psoriasis Sufferers

Psoriasis sufferers are intolerant of alcohol, cigarette smoke, infection, drugs, stress & chemicals in toiletries. Furthermore, around one-half of psoriasis sufferers are allergic to dustmite so routine control with Bio-Life HomeCleanse™ & FabriCleanse™ is recommended. Alcohol should be limited to an occasional glass of wine and lifestyle is critically important to their health.

Psoriasis sufferers do respond positively to sunshine (without burning!!) and seawater. In fact, the regular use of chemical friendly sea salt in the bath would be recommended. Alternatively, regular holidays & dips in the sea!

TREATING THE SYMPTOMS

In the event of an outbreak, the sufferer needs to alleviate the symptoms as well as treat the cause. To restore the skin to health and prevent further thickening, irritation, secondary infections and scarring, Bio-Life International Ltd have developed the [MediCleanse™](#) range. The toiletries and treatments are chemical friendly and contain essential natural ingredients that deal with the symptoms.

Salix alba from Willow Bark

Willow bark is a natural source of Salicylic acid that help remove the thick layers of overgrown skin common to all forms of Psoriasis.

Usnea barbata or Lichen extract

Usnic acid is proven to reduce the rate of cell reproduction so helps restore the natural cycle of skin cell regeneration. In addition, it is a natural non-sensitising antibiotic and an analgesic so helps to reduce pain and discomfort.

Phytic Acid from Wheat Bran & Flax Seeds

Wheat bran and flax seeds are rich in antioxidants that further inhibits the reproduction of the cells that causes the thickening & cornification and promotes healing without scarring.

Tarchonanthus camphoratus or Leleshwa

This Kenyan essential oil is a natural anti-inflammatory and antimicrobial so reduces the inflammation and irritation as well as preventing secondary bacterial & yeast infections.

The products are based on Jojoba and Coconut oil cleansers and do not contain SLES, Parabens, Alcohol, Fragrances, Mineral oils, waxes, coal tar, sulphates or other known irritants. The MediCleanse range is powerful enough to relieve the symptoms of psoriasis but gentle enough for routine use to prevent a psoriasis outbreak. The Leleshwa essential oil is also an aromatherapy that is characteristically uplifting & calming so if all other attempts to de-stress fail, a long warm soak in the bath can work wonders!!

Products Available from Bio-Life

PACK	MEDICLEANSE™ PRODUCTS
Starter Pack: Face & Body	Bath & Shower Gel, Face Cleanser, Treatment Gel & Moisturising Lotion
Starter Pack Hair & Scalp	Shampoo & Conditioner
MediCleanse™ Face Cleanser	
MediCleanse™ Bath & Shower Gel	
MediCleanse™ Pure Essence Spray for moist itchy “hotspots”	
MediCleanse™ Hand & Patch Gel for thickened skin & scar tissue	
MediCleanse™ Moisturising Lotion (Face & Body) to promote healing without scarring	