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LETTERS TO THE EDITOR

Patients With Obstructive Sleep Apnea Are Over Four Times More Likely to Suffer From Psoriasis Than the General Population

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Obstructive sleep apnea (OSA) is characterized by recurrent episodes of apneas during sleep, leading to intermittent hypoxemia. The recently reported prevalence reached almost 61% and 84% in women and men, respectively.[1] Psoriasis is a chronic inflammatory skin condition, characterized by round, erythematous, dry and scaling patches, accompanied by pain and itching, affecting approximately 2% of Europeans.[2] Both OSA and psoriasis are associated with systemic inflammation and activation of inflammatory pathways mediated by OSA may predispose at-risk individuals to the development of psoriasis.[3] However, the link between the two disorders is still unclear.

In our observational study, we examined 245 consecutive patients who underwent a standard night polysomnography and in whom OSA was diagnosed (apnea-hypopnea index > 5 events/h). The diagnosis of psoriasis was based on patients' history or the presence of the typical enanthem. Within this group we identified 21 who suffered from psoriasis (8.7%).

Psoriasis versus no-psoriasis groups were similar regarding age (55.4 ± 11.5 versus 56.8 ± 7.5 years; P = .586), sex (M:F ratio 184:40 versus 18:3; P = .682), body mass index (32.8 ± 5.5 versus 34.2 ± 8.1 kg/m^2; P = .308), and apnea-hypopnea index (37.0, 19.5–56.3 versus 35.5, 20.8–59.8; P = .831).

The prevalence of psoriasis among patients with OSA in the investigated group was 8.7% compared to a reported prevalence of 2%.[2] Thus, the difference in prevalence of psoriasis in patients with OSA and the general population was 6.7% (95% confidence interval, 3.0% to 10.1%).

It has recently been shown by Papadavid et al.[4] in a similarly sized group that the prevalence of psoriasis in patients with OSA in Greece was 9.5%. This supports our hypothesis that the prevalence of psoriasis in patients with OSA is much higher than in the general population. Therefore, it is important to investigate factors that may increase the risk of psoriasis in patients with OSA (eg, sleep loss leading to exacerbation of psoriasis through immune system modulation).[5] Alternatively, obesity rather than OSA may be responsible for increased prevalence of psoriasis in our study group.[6]

Psoriasis itself is associated with sleep problems that partially may be caused by itching and pain.[5] However, a possible diagnosis of OSA should be considered while addressing sleeping problems in this particular group, especially if they exhibit high body mass index, which is a strong risk factor for OSA.[1]

CITATION

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