

Understanding and Addressing MENTAL HEALTH CONCERNS in Patients With DERMATOLOGIC CONDITIONS

Psychocutaneous Disorders



Over one-third of patients with skin conditions have psychological comorbidities

- More common among patients with psoriasis, atopic dermatitis, eczema, and leg ulcers



Chronic dermatologic conditions are associated with **higher rates** of depression, anxiety, and suicidal ideation

Classification

Psychophysiological disorders:

Skin conditions exacerbated by stress (eg, psoriasis, acne vulgaris, atopic dermatitis, rosacea)

Primary psychiatric disorders:

Self-induced skin manifestations (eg, trichotillomania, body dysmorphic disorder, dermatitis artefacta, neurotic excoriations)

Cutaneous sensory syndromes:

Unpleasant cutaneous sensations, such as itching, burning, or stinging, without a clear dermatological or psychiatric diagnosis

Secondary psychiatric disorders:

Emotional problems resulting from having a visible skin disease (eg, acne, vitiligo, psoriasis)

Location of Skin Disease and Associated Psychosocial Distress

Hair and scalp involvement

Decreased self-confidence and altered social poise

Directly visible facial lesions

Greatest concern for distress, anxiety, and depression

Lesions of trunk and limbs

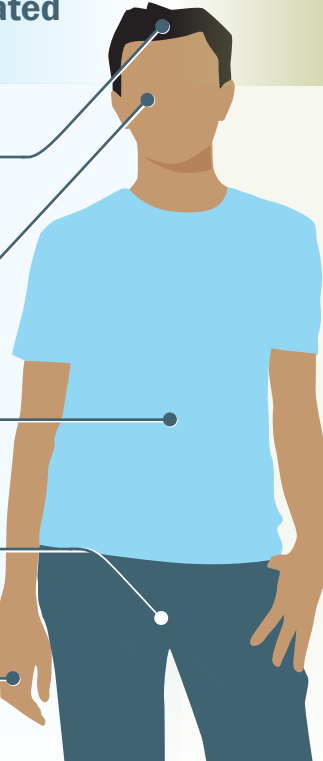
Source of concern in public areas like the gym or beach

Genital lesions

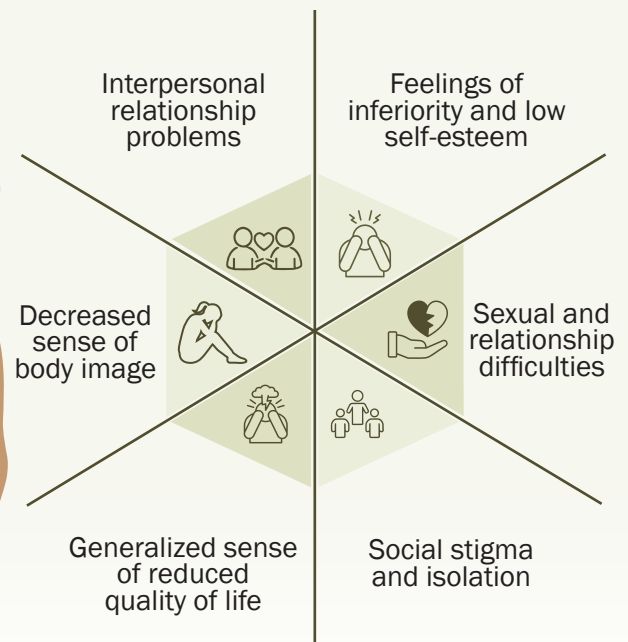
Embarrassment and interference with sexual intimacy

Lesions of hands and nails

Potentially disabling in certain occupations (eg, retail)



Common Psychosocial Issues in Dermatology



PATIENT COUNSELING AND MANAGEMENT

Pearls of Management

High suspicion of underlying psychopathology

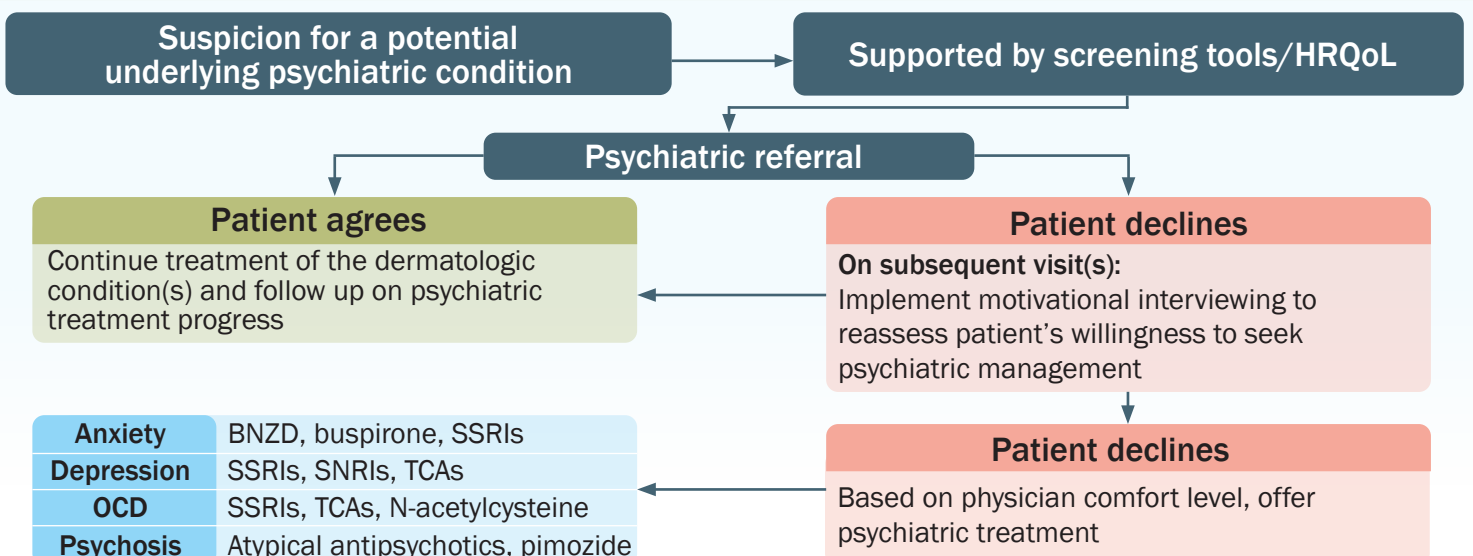
Strong physician-patient alliance

Neutral, non-judgmental, and non-confrontational interview

Screening tools for anxiety and depression: BDI-II, GAD-7, PHQ-9

HRQoL measurement to assess impact of disease and guide treatment

Psychotherapy and pharmacological interventions



BDI-II: Beck Depression Inventory-II; BNZD: benzodiazepine; GAD-7: Generalized Anxiety Disorder-7; HRQoL: Health-Related Quality of Life; OCD: obsessive-compulsive disorder; PHQ-9: Patient Health Questionnaire-9; SNRI: serotonin and norepinephrine reuptake inhibitor; SSRI: selective serotonin reuptake inhibitor; TCA: tricyclic antidepressant. Jafferany M. *Psychiatric News*. 2025;60. Zagami M, et al. *Skin Health Dis*. 2023;3:e211.

Med Learning Group makes every effort to develop activities and tools that are scientifically based. Users have the responsibility to utilize this information together with all available scientific information, guidelines, and advice from their clinician(s) before applying any information, whether provided here or by others.

This activity is supported by an educational grant from UCB, Inc.

