Our website uses cookies to enhance your experience. By continuing to use our site, or clicking "Continue," you are agreeing to our Cookie Policy I Continue

JAMA Network

JAMA Dermatology

Full Text

Share

## Consensus Statement

January 2015

## Treatment of Nail Psoriasis Best Practice Recommendations From the Medical Board of the National Psoriasis Foundation

Jeffrey J. Crowley, MD<sup>1</sup>; Jeffrey M. Weinberg, MD<sup>2</sup>; Jashin J. Wu, MD<sup>3</sup>; et al

Author Affiliations

JAMA Dermatol. 2015;151(1):87-94. doi:10.1001/jamadermatol.2014.2983

## **Abstract**

Importance Nail psoriasis can be difficult to treat and has a significant effect on quality of life. Relatively few controlled trials evaluating treatments for nail psoriasis have been published. There is an unmet need for treatment recommendations to guide therapeutic decisions.

Objective To develop treatment recommendations for nail psoriasis from the Medical Board of the National Psoriasis Foundation.

Evidence Review A PubMed search for publications on nail psoriasis treatments was performed from January 1, 1947, through May 11, 2014, without language restrictions.

Findings Treatment recommendations for 4 clinical nail psoriasis scenarios were developed based on the evidence reviewed in this study and expert opinion of the Medical Board of the National Psoriasis Foundation. Treatment of nail psoriasis should balance consideration of the extent of skin disease, psoriatic arthritis, and severity of nail disease with concomitant impairment of quality of life. All patients should be evaluated for onychomycosis because this may complicate psoriatic nail disease. For disease limited to the nails, high-potency topical corticosteroids with or without calcipotriol are initial options. For patients with significant nail disease for whom topical therapy has failed, treatment with adalimumab, etanercept, intralesional corticosteroids, ustekinumab, methotrexate sodium, and acitretin are recommended. For patients with significant skin and nail disease, adalimumab, etanercept, and ustekinumab are strongly recommended, and methotrexate, acitretin, infliximab, and apremilast are recommended. Finally, for a patient with significant nail, skin, and joint disease, adalimumab, etanercept, ustekinumab, infliximab, methotrexate, apremilast, and golimumab are recommended.

Conclusions and Relevance Treatment of nail psoriasis poses a clinical challenge. Clinical trial data are limited, and results are reported inconsistently, making comparisons among treatment options difficult. The treatment recommendations from the Medical Board of the National Psoriasis Foundation will help guide treatment decisions for clinicians who are treating patients with nail psoriasis.



## **Read More About**

Nail Disorders Consensus Statements Psoriasis Dermatology Guidelines

? Artificial Intelligence Resource Center

Others Also Liked

