Algorithm 1: How to assess people with psoriasis

All settings

For people with any type of psoriasis assess:

- disease severity
- the impact of disease on physical, psychological and social wellbeing
- whether they have psoriatic arthritis
- the presence of comorbidities.

When assessing the disease severity in any healthcare setting, record:

- the results of a static Physician's Global Assessment (classified as clear, nearly clear, mild, moderate, severe or very severe)
- the patient's assessment of current disease severity, for example, using the static Patient's
 Global Assessment (classified as clear, nearly clear, mild, moderate, severe or very severe)
- the body surface area affected
- any involvement of nails, high-impact and difficult-to-treat sites (for example, the face, scalp, palms, soles, flexures and genitals)
- any systemic upset (eg in people with erythroderma or generalised pustular psoriasis).

Assess the impact of any type of psoriasis on physical, psychological and social wellbeing by asking:

- what aspects of their daily living are affected by the person's psoriasis
- how the person is coping with their skin condition and any treatments they are using
- · if they need further advice or support
- if their psoriasis has an impact on their mood
- if their psoriasis causes them distress (be aware the patient may have levels of distress and not be clinically depressed)
- if their condition has any impact on their family or carers.

Ask children and young people age-appropriate questions.

Use a validated tool to assess adults for psoriatic arthritis in primary care and specialist settings, for example the Psoriasis Epidemiological Screening Tool (PEST). Be aware that the PEST does not detect axial arthritis or inflammatory back pain.

Specialist settings

In specialist settings, use a validated tool to assess severity of psoriasis, for example the Psoriasis Area and Severity Index (PASI) (in addition to the assessments indicated in recommendation 8).

Be aware that:

- PASI and body surface area are not validated for use in children and young people
- erythema may be underestimated in people with darker skin types, such as skin types V and VI on the Fitzpatrick scale.

Use the Nail Psoriasis Severity Index to assess nail disease in specialist settings:

- if there is a major functional or cosmetic impact or
- before and after treatment is initiated specifically for nail disease.

In specialist settings, and if practical in non-specialist settings, use a validated tool to assess the impact of any type of psoriasis on physical, psychological and social wellbeing, for example the:

- Dermatology Life Quality Index (DLQI) for adults or
- Children's Dermatology Life Quality Index (CDLQI) for children and young people.