

Personalized Approach to Chronic Plaque Psoriasis Treatment in an Elderly Woman: A case report

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Abstract

Background:

Psoriasis is a chronic inflammatory skin disease driven by genetic predisposition and autoimmune factors. The most common form, known as psoriasis vulgaris or plaque-type psoriasis, is characterized by recurring flare-ups and remissions, significantly impacting patients' quality of life. This condition presents as erythematous plaques covered with silvery scales, affecting different areas of the body.

Case Presentation:

A 62-year-old female with a 25-year history of moderate chronic plaque psoriasis visited SOL Integrative Wellness Centre with generalized red, scaly patches involving her body and face, along with fatigue and lethargy. Affected areas included the forehead near the eyebrows, both hands, knees, and shins. The patient underwent a comprehensive treatment regimen integrating conventional medications (Vitamin D3 K2, probiotics, prebiotics) with alternative therapies, including colon hydrotherapy, coffee enemas, infrared sauna sessions, and supplementation with alpha-lipoic acid and vitamin C. After three months of treatment, significant improvement was observed with a reduction in plaque severity, erythema, and scaling.

Conclusion:

This case highlights the efficacy of a personalized and multidisciplinary approach in managing moderate chronic plaque psoriasis, emphasizing the importance of addressing underlying factors and optimizing treatment outcomes for enhanced patient well-being. Regular follow-up and collaborative care are essential for sustained disease remission and improved long-term outcomes in patients with chronic psoriasis.

Keywords: Chronic plaque psoriasis, Colon hydrotherapy, Coffee enema, Infrared sauna, Alpha-lipoic acid

Introduction

According to the World Psoriasis Day consortium, over 125 million people worldwide are diagnosed with psoriasis [5], which accounts for 2 to 3 percent of the total population when it comes to people with this condition. [6] Psoriasis is a long-lasting, noncontagious autoimmune disease characterized by patches of abnormal skin. [3][4] Psoriasis vulgaris (also known as chronic stationary psoriasis or plaque-like psoriasis) is the most common form and affects 85–90% of people with psoriasis. [1] Plaque psoriasis typically appears as raised areas of inflamed skin covered with silvery-white, scaly skin. These areas are called plaques and are most found on the elbows, knees, scalp, and back. [1][2] Its management often requires a personalized approach considering patient-specific factors and a combination of conventional and alternative therapies. Here, we present a detailed case report of a 62-year-old female with moderate chronic plaque psoriasis who underwent a comprehensive treatment regimen combining conventional medications and alternative therapies.

Case Presentation

A 62-year-old female, presented with a history of chronic plaque psoriasis of moderate severity, diagnosed 25 years ago. She complained of red scaly patches generalized over her body and face, along with symptoms of fatigue and lethargy. The affected areas included her forehead, near eyebrows, bilateral hands, knees, and shin regions. There was no reported family history of autoimmune diseases, and the subject had no significant comorbidities aside from psoriasis.

Given her age, specific considerations were made regarding medication response and treatment efficacy, emphasizing the importance of lifestyle and dietary factors in managing her condition. The Subject was currently on a regimen of Vitamin D3 K2, Probiotics, and Prebiotics. She underwent multiple treatments including Colon Hydrotherapy (4 sessions weekly), Coffee Enema (4 sessions weekly), Infrared Sauna (8 sessions, Biweekly sessions over a four-week period), and Alpha Lipoic Acid with Vitamin C (4 times weekly).



Figure 1: Pre-Treatment Image

Figure 1 displaying characteristic skin lesions before receiving any treatment. The red, inflamed patches covered with silvery scales are prominently visible on the lower legs, emphasizing the severity of the condition.



Figure 2 Post-Treatment Image

Figure 2 showing signs of improvement after treatment. The redness and silvery scales have diminished, indicating progress

Over 3 months, the Subject psoriasis severity showed improvement, with reduced plaque severity, erythema, and scaling. Laboratory investigations revealed her PASI scores as follows: (H)-1, (A)-1, (T)-2, (L)-1. Liver function tests indicated normal levels, with a slightly elevated GGT of 93 U/L and inflammatory markers (CRP) were at 6.6 mg/L indicating reduced systemic inflammation post-treatment.

No major adverse effects were reported during treatment. Moving forward, regular assessments and treatment adjustments were planned to optimize outcomes.

Clinical Laboratory Test Results:

Туре	Pre-Therapy	Post-Therapy
PASI Score	(Head)-1, (Arms)-4, (Trunk)-2, (Legs)-4	(Head)-1, (Arms)-1, (Trunk)-2, (Legs)-1
CRP (C-reactive protein)	6.6 mg/L	8.5 mg/L
Liver Function Test (LFT)	Total bilirubin:10.8umol/L,	Total bilirubin:10umol/L,
	Total protein:71 g/L,	Total protein:68 g/L
	Albumin:40 g/L,	Albumin:42 g/L,
	Globulin :31 g/L,	Globulin :26 g/L,
	ALP: 60 U/L,	ALP:67 U/L,
	AST:26 U/L, ALT:21 U/L, GGT:93 U/L	AST:22 U/L, ALT:22 U/L, GGT:93 U/L

Patient Perspective

The patient experienced gradual improvement in psoriatic lesions and overall well-being following the personalized treatment regimen. Reduced fatigue and improved skin appearance positively impacted her daily life and confidence.

Discussion

The case illustrates the potential efficacy of combining conventional medications with alternative therapies to manage moderate chronic plaque psoriasis in an elderly female patient. The observed improvements in psoriasis severity, including reduced plaque severity, erythema, and scaling, along with normalization of inflammatory markers (CRP), suggest a positive response to the comprehensive treatment regimen. The therapies selected aimed to address potential triggers and exacerbating factors of psoriasis, such as gut dysbiosis and systemic inflammation. Colon hydrotherapy and coffee enemas targeted gut health, while infrared sauna sessions supported detoxification. Alpha lipoic acid with vitamin C provided antioxidant and anti-inflammatory support. The patient's subjective experience of reduced fatigue and improved skin appearance underscores the importance of patient-centered care in chronic skin disorders. Further research, including larger controlled studies, is necessary to validate these findings and assess the sustainability and safety of alternative therapies in psoriasis management.

Conclusion

The diagnosis of Chronic Plaque Psoriasis in our patient was established based on history and clinical symptoms. While psoriasis is treatable, a definitive cure remains elusive for this chronic condition, which can negatively impact the patient's quality of life. This case report highlights the effectiveness of a personalized treatment approach in managing chronic plaque psoriasis. By addressing individualized factors contributing to the disease, including gut health and inflammation, significant improvements in psoriatic lesions and overall well-being were achieved. Regular monitoring and adjustments to the treatment plan are essential for optimizing outcomes in similar cases.

List of Abbreviation

PASI: Psoriasis Area and Severity Index

ALP: Alkaline Phosphatase
AST: Aspartate Aminotransferase
ALT: Alanine Aminotransferase
GGT: Gamma-Glutamyl Transferase

Declaration:

All activities performed on the subject in this case report were conducted in accordance with Good Clinical Practice (GCP) guidelines and under the supervision of a qualified physician. The therapeutic interventions, including Colon hydrotherapy, Coffee enemas therapy and the administration of natural supplements, were carried under the direct guidance of Dr. Dasheni Puvanaendran at SOL Integrative Wellness Centre. The patient's treatment plan and subsequent follow-ups adhered strictly to ethical standards and clinical protocols to ensure patient safety and the validity of the observed outcomes.

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