- Danish citizens aged 18 years or older from January 1, 1997, to December 31, 2011
- Population of 5,536,422
- If + family history of MACE, there is increased incidence rate ratios of MACE in both mild and severe psoriasis

- Danish citizens aged 18 years or older from January 1, 1997, to December 31, 2011
- Increased incidence rate ratios of autoimmune hepatitis in mild psoriasis but not severe psoriasis

- Population-based cohort study from 2003 to 2011 from Taiwan National Health Insurance Research Database
- 23 million population, 48,430 patients with psoriasis, 37,993 patients with mild psoriasis, 10,437 patients with severe psoriasis
- Increased hazard rate ratios of chronic pancreatitis in mild psoriasis and severe psoriasis

- Population-based cohort study from 2003 to 2011 from Taiwan National Health Insurance Research Database
- 23 million population, random sample of 1 million in 2000, 28,268 patients with psoriasis, 113,072 subjects without psoriasis
- Increased hazard rate ratios of avascular necrosis in mild psoriasis and severe psoriasis


- Prospective study of 29 consecutive patients with moderate to severe psoriasis who completed 6 months of adalimumab
- Assessed endothelial function by brachial artery reactivity measuring flow-mediated dilatation
- There was improvement in brachial artery reactivity after 6 months of adalimumab
- Assessed carotid arterial stiffness by pulse wave velocity
- Reduction of pulse wave velocity after 6 months of adalimumab

- In those without initial calcified atherosclerotic plaques, 13 of 16 had significant IMT decrease (P = .0002)
- In those with calcified atherosclerotic plaques, 3 of 16 patients had non-significant IMT increase
- Prospective study of 28 severe psoriasis patients given adalimumab, etanercept, infliximab, or ustekinumab
- Clinically effective treatment with biologic agents was associated with reduced coronary artery disease progression

- Methotrexate was associated with reduced risk of MACE compared to other therapies.
- There was no protective effect seen with cyclosporine or retinoids.
- When all biologics were grouped together, there was a comparable but non-significant protective effect.
- When biologics are further examined based on mechanism of action, TNF inhibitors were associated with reduced event rates.

- Retrospective claims-based analysis using data from the Truven Health Analytics MarketScan® Databases (Q1 2000 – Q3 2011)
- 382,059 psoriasis patients
- Significant reduction of major CV events in those treated with TNF inhibitors versus methotrexate (HR, 0.55, 95% CI, 0.45-0.67)

- The group treated with TNF inhibitors + MTX was associated with a clinically and statistically significant decrease in CRP compared to baseline. This was not seen in the MTX group.

- HDL isolated from patients with psoriasis showed a significantly impaired capability to mobilize cholesterol from macrophages
- Psoriasis therapy recovered HDL composition and function, but there was no effect on HDL levels.

- The National Psoriasis Foundation recommends that every 2 years, blood pressure, pulse, and BMI measurements should be checked.
- Every 5 years or every 2 years if patient has additional risk factors, fasting blood glucose and lipid levels should be checked.