



INTERNATIONAL FEDERATION
OF PSORIASIS ASSOCIATIONS



GLOBAL
PSORIASIS
COALITION

COVID-19

“
**TOGETHER
WE WILL
OVERCOME**
”

Integrating psoriasis into the
response to COVID-19



The disruptive effects of COVID-19

Understanding the deeper consequences

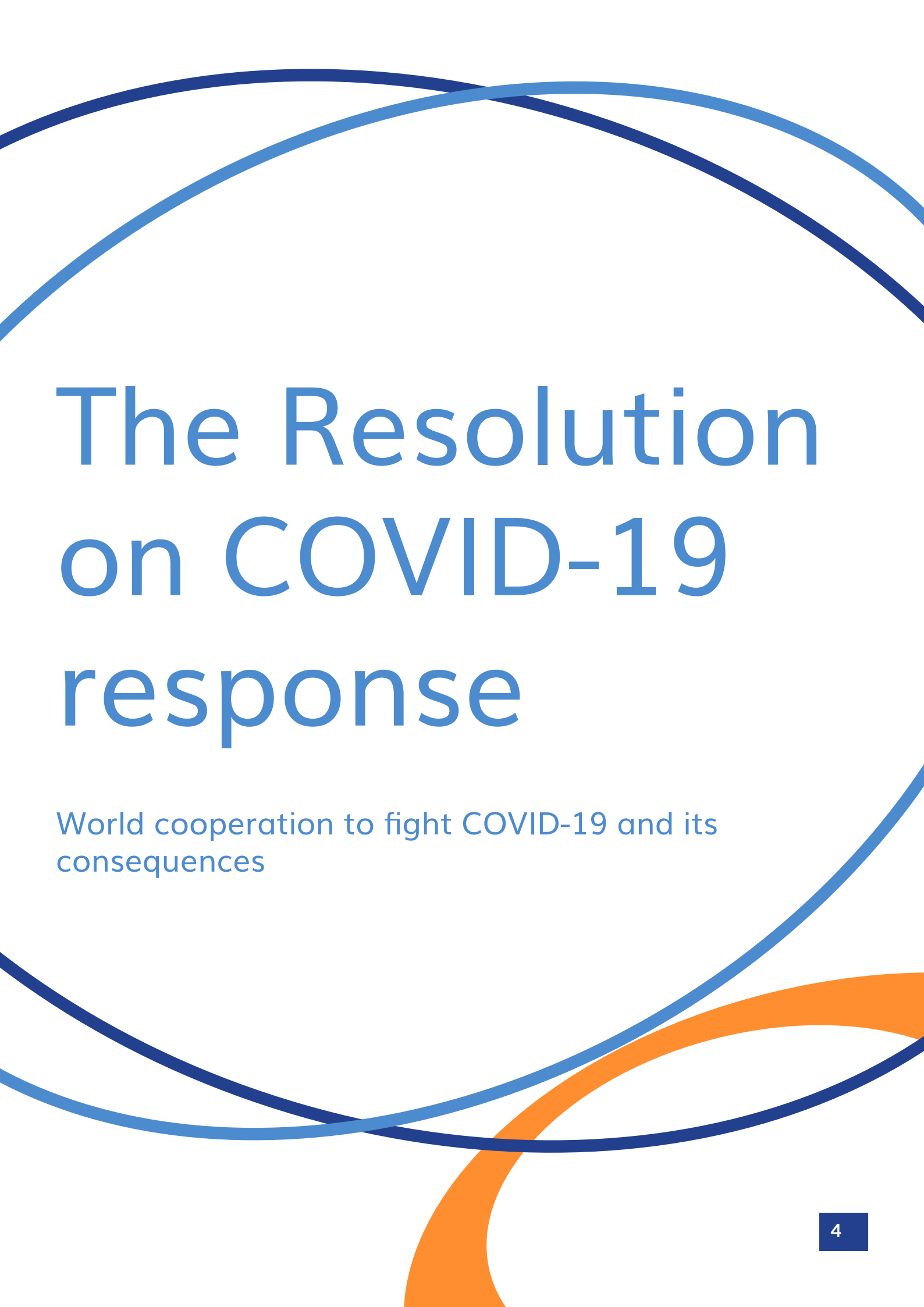
COVID-19 is affecting the lives of millions of people around the world, in terms of physical health, mental health, freedom and economic stability. The ongoing health emergency is turning the spotlight on the fragility of many countries' health systems. Social and personal dynamics have been deeply affected. Vulnerable populations are now even more vulnerable.

A recent report from the World Health Organization (WHO) shows the impact of COVID-19 on services for non-communicable diseases (NCDs)¹. The report paints a grim picture of the status of NCD services. Even before the pandemic, improvements on halting the progression of NCDs have slowed down in the last decade—despite NCDs being a growing burden worldwide—and the world is off-track for reaching the Sustainable Development Goal 3.4. Now, during the pandemic, many countries participating in the WHO survey reported partial or complete disruption of health services for NCDs, such as services for hypertension (53% of countries reporting disruptions), diabetes (49% of countries reporting disruptions) cancer (42% of countries reporting disruptions) and cardiovascular emergencies (31% of countries reporting disruptions). Rehabilitation, often wrongly considered a non-essential health service, has been impacted the most (63% of countries reporting disruptions). Roughly one third of countries (66%) have included NCD services in national COVID-19 plans and some (17%) have allocated additional funding for provision of NCD services.

Sustainable Development Goal 3 – Ensure healthy lives and promote well-being for all at all ages

“Target 3.4: By 2030, reduce by one third premature mortality from non-communicable diseases through prevention and treatment and promote mental health and well-being”





The Resolution on COVID-19 response

World cooperation to fight COVID-19 and its
consequences

The Resolution on COVID-19 response was adopted by the 73rd World Health Assembly on May 18, 2020². The resolution aims at covering many aspects of countries' response to COVID-19, including efforts to control the pandemic and equitable distribution of COVID-19 diagnostics, vaccines, and health technologies.



Non-Communicable Diseases

Solid evidence shows that the virus causing COVID-19 is especially dangerous to certain segments of the population: old persons, persons with certain NCDs, people living with tuberculosis, and people living with disabilities are some of the categories that are particularly susceptible to the effects of COVID-19^{3,4}. The Resolution uses the term “pre-existing health conditions” to designate vulnerable segments of the population, affected by certain diseases, who are at higher risk of becoming seriously ill from COVID-19. Moreover, the Resolution recognizes the need to protect and ensure access to testing, treatment, and palliative care:

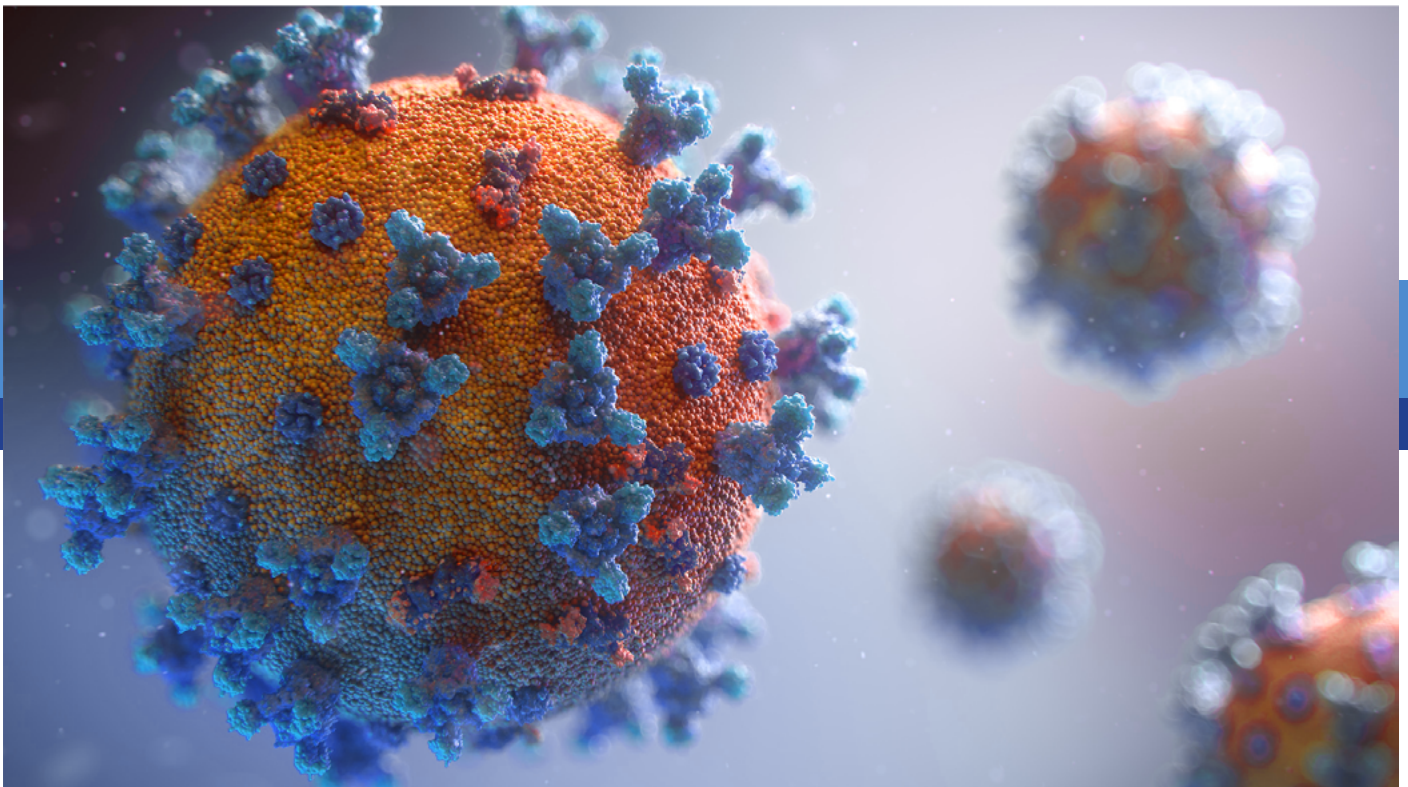
OP7.7 Provide access to safe testing, treatment, and palliative care for COVID-19, paying particular attention to the protection of those with pre-existing health conditions, older persons, and other people at risk, in particular health professionals, health workers and other relevant frontline workers;

The risk of infection and the risk of becoming severely ill from COVID-19 for people with psoriasis and psoriatic arthritis is unknown⁵, but the paragraph reported above can still be used to advocate for more attention for people living with psoriasis, as conditions associated with poorer outcomes from COVID-19 are also common psoriasis co-morbidities.

Health Services

As mentioned in the introductory paragraph, health services for people living with NCDs have been disrupted during the pandemic¹. The consequences of the disruptions will most likely be long-lasting and costly for people living with NCDs, as well as for health systems. The Resolution recognizes the importance of maintaining uninterrupted provisions of services, emphasizing that their access must be guaranteed and safe. The Resolution specifically mentions NCDs and mental health. In OP9.4, WHO member states ask for WHO's assistance in ensuring that provisions of services be maintained:

OP7.5 Maintain the continued functioning of the health system in all relevant aspects, in accordance with national context and priorities, necessary for an effective public health response to the COVID-19 pandemic and other ongoing epidemics, and the uninterrupted and safe provision of population and individual level services, for, among others, communicable diseases, including by undisrupted vaccination programmes, neglected tropical diseases, noncommunicable diseases, mental health, mother and child



health and sexual and reproductive health and promote improved nutrition for women and children, recognizing in this regard the importance of increased domestic financing and development assistance where needed in the context of achieving UHC;

OP9.4 [WHO to] Provide assistance to countries upon their request, in accordance with their national context, to support the continued safe functioning of the health system in all relevant aspects necessary for an effective public health response to the COVID-19 pandemic and other ongoing epidemics, and the uninterrupted and safe provision of population and individual level services, for, among others, communicable diseases, including by undisrupted vaccination programmes, neglected tropical diseases, noncommunicable diseases, mental health, mother and child health and sexual and reproductive health and promote improved nutrition for women and children;

People living with psoriasis and psoriatic arthritis are also experiencing disruptions in care, and examples from around the world show that it is possible to maintain functioning health services for NCDs during the pandemic. Adapted health care facilities physically separating COVID-19 patients from non-COVID-19 patients were implemented in Italy⁶, teleconsultation was strengthened in Portugal⁷. These easier-to-implement solutions should go hand in hand with more profound rethinking of the way health systems manage chronic conditions, such as NCDs, including psoriasis and psoriatic arthritis. A person-centered model of care with a strengthened primary care role in the management of psoriasis would allow hospitals to respond to health emergencies, while ensuring that people with chronic conditions not be left behind.

Disabilities

Disabilities receive particular attention in the Resolution, due to the vulnerability of people with disabilities to COVID-19. As published in the United Nations' "Policy brief: A disability-inclusive response to COVID-19"⁴, people living with disabilities are disproportionately impacted by the pandemic.

PP11 Recognizing further the negative impacts of the COVID-19 pandemic on health, including hunger and malnutrition, increased violence against women, children, and frontline health workers, as well as disruptions in care of older persons and persons with disabilities;

Persons with disabilities⁴:

- are at greater risk of contracting COVID-19 because of barriers in implementing protective measures such as frequent hand washing, reliance on physical contact to support their needs, over-representation in crowded environments such as nursing homes and institutions
- are at greater risk of becoming severely ill from COVID-19 because of the higher incidence of co-morbidities, such as cardiovascular disease and diabetes, in persons with disabilities. These co-morbidities are connected to poorer outcomes of COVID-19
- are more impacted by the socio-economic consequences of the pandemic, such as increased barriers to employment and disruption of support services

PP12 Emphasizing the need to protect populations, in particular people with pre-existing health conditions, older persons, and other people at risk of COVID-19 including health professionals, health workers and other relevant frontline workers, especially women who represent the majority of the health workforce as well as persons with disabilities, children and adolescents and people in vulnerable situations, and stressing the importance of age-, gender-responsive and disability-sensitive measures in this regard;

As psoriasis and psoriatic arthritis can be disabling, these paragraphs of the Resolution can be used for starting a conversation about the necessity of protecting people with psoriasis and psoriatic arthritis during the pandemic and in its aftermath, so that the continuum of care is ensured and the socio-economic effects of the pandemic are mitigated.

Foreseen and Unforeseen Consequences

The outbreak itself and the measures taken by governments to manage it come with foreseen and unforeseen consequences for public health, mentioned in the Resolution paragraph below. Policies put in place to contain the spread of the virus, for example those related to limitation of movements, can have short- and long-lasting consequences for people's health:

PP17 Recognizing further the many unforeseen public health impacts, challenges and resource needs generated by the ongoing COVID-19 pandemic and the potential re-emergences, as well as the multitude and complexity of necessary immediate and long-term actions, coordination and collaboration required at all levels of governance across organizations and sectors, including civil society and the private sector, required to have an efficient and coordinated public health response to the pandemic, leaving no-one behind;

PP18 Recognizing the importance of planning and preparing for the recovery phase, including to mitigate the impact of the pandemic and of the unintended consequences of public health measures on society, public health, human rights and the economy;

Policies adopted by governments to limit the spread of the virus are having an impact on people living with psoriasis and psoriatic arthritis. The consequences of lockdown policies on mental health are apparent. Increased consumption of tobacco and alcohol during these difficult times, aggravated by stress, can cause a psoriasis flare, or can make psoriasis worse. Restrictions in terms of freedom of movement can be detrimental not only to the general health and well-being of individuals, but also to psoriatic arthritis itself. Moreover, the abovementioned paragraph of the Resolution highlights the importance of collaboration between governments and civil society organizations, thus allowing psoriasis and psoriatic arthritis advocates to be meaningfully involved, to tell their stories, and propose solutions.



“Together we
will overcome
this challenge”

-Dr. Tedros Adhanom Ghebreyesus

Conclusions

The world is facing unprecedented challenges in the public health sphere and beyond. Cooperation between countries and within countries is of utmost importance if we want to fight this pandemic and its consequences. A profound reflection on how to rebuild health systems that are resilient and capable of facing health emergencies must be done in the aftermath of the pandemic. But, as the WHO Director General said in the closing remarks at the 73rd World Health Assembly⁸, “Together we will overcome this challenge. Nothing will be difficult to address when the human spirit wills it.”

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