



ORIGINAL RESEARCH PAPER

Dermatology.

EFFICACY OF METHOTREXATE ALONE AND AS ADD ON TO TOPICAL CALCIPOTRIOL IN PLAQUE PSORIASIS.

KEY WORDS:

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INTRODUCTION

Psoriasis is a common, chronic inflammatory and proliferative skin disorder in which both genetic and environmental factors have a critical role. The objective of treatment of psoriasis is to gain initial and rapid control of the disease, maintain long term remission and to improve quality of life. Methotrexate is a well established systemic drug and calcipotriol is a topical medicine. Calcipotriol act on nuclear receptor of epidermal cells and form a complex with the receptor. This complex has a strong immune regulatory action by suppressing the production of pro-inflammatory cytokines. Calcipotriol is used as lone topical therapy or in combination with systemic agents like phototherapy, cyclosporine and other biologicals. The basis of combination therapy in psoriasis is, different agents have different mechanism of action that allows them to be combined at lower dosages to, thereby increasing effect of medicines as well as reducing the side effects.

Keeping the rationality in mind, we planned the present study to do a situation analysis of effectiveness of Methotrexate alone versus addition of topical calcipotriol with Methotrexate on plaque psoriasis.

OBJECTIVES

The study was to evaluate and compare the efficacy of Methotrexate versus Methotrexate and calcipotriol in patients of plaque psoriasis.

METHODS

The study population consisted of plaque psoriasis patients (n=47) recruited from OPD of MJNMCH, Coochbehar. In group A (Methotrexate) 25 patients were included and in group B (Methotrexate+ calcipotriol) 22 patients included.

Inclusion Creteria= 1) age >18 years in either gender. 2) patients of plaque psoriasis. 3) Receiving Methotrexate. 4) Willing patients to participate.

Exclusion Creteria= 1) pregnant and lactating women. 2) Immunocomprised. 3)impaired liver and kidney function .4) Concomitant anti-psoriatic treatment of topical/systemic agents or PUVA.

Each patient was followed up for a period of 4 months at 0 week, 4weeks, 8weeks and 16 weeks, it is studied monthly interval with PASI scores.

RESULTS

	Group A(n=25)	Group B(n=22)	P-value (between groups)
Baseline	7.5	7.95	0.153
1 st follow up	7.5	7.6	0.672
2 nd follow up	7.4	6.93	0.127
3 rd follow up	6.9	5.79	0.003
p-value (within group)	<0.001	<0.001	

DISCUSSION

The results of this study shows clearly that the addition of calcipotriol ointment to Methotrexate results in significant less PASI score (p value= 0.0013) at the end of 16 the weeks of therapy. A signifantly reduced PASI at 1st follow-up (p-

value=0.024) and final follow up (p-value=0.042) in the Methotrexate plus calcipotriol also demonstrate a greater reduction PASI score than methotrexate alone.

CONCLUSION

Our study shows that the combination of Methotrexate and topical calcipotriol is useful, effective treatment for chronic plaque psoriasis

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