Exploring practitioners’ personal models about psoriasis: ‘We understand but we forget’

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BACKGROUND: Psoriasis, an inflammatory long-term condition, is associated with significant psychological and physical impact. Illness beliefs or ‘personal models’ underpin psoriasis patients’ mood and self-management and it is likely that healthcare practitioners’ beliefs may also be influential in the management of psoriasis. However, little is known about how healthcare practitioners’ beliefs inform their clinical management of psoriasis. We therefore aimed to identify health professionals’ personal models about psoriasis.

METHODS: Semi-structured interviews were conducted with 23 primary and secondary care clinicians managing people with psoriasis. Data analysis was informed by Leventhal et al’s Common Sense Model, using principles of Framework Analysis.

RESULTS: Five overarching themes emerged from the data: 1) Seeing the complexities of psoriasis: practitioners recognised complex links between psoriasis, psychological and lifestyle factors, and acknowledged interactions with mood and coping; 2) Skin first: despite understanding these complexities, practitioners demonstrated a narrow skin-focus in clinical management; 3) Patient first: A minority of practitioners demonstrated sophisticated, congruent models where they recognised psoriasis-related complexity and felt responsible for addressing this in practice; 4) Episodic care: practitioners reported discharged patients after skin improvement rather than managed within a LTC model. 5) Emotional response: Practitioners with ‘skin first’ models reported frustration and lack of control when psoriasis patient consulted, whereas those with sophisticated models reported positive affect towards patient improvement.

CONCLUSION: Most practitioners demonstrated inconsistent personal models within which conflicting beliefs about psoriasis were reported alongside skin-focused care. Existing knowledge of psoriasis-related complexities may not translate to optimal management of psoriasis without further training.