SIMPLIFIED PSORIASIS INDEX Introduction for people with psoriasis

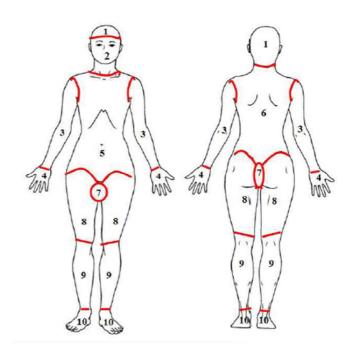
The Simplified Psoriasis Index (SPI) was created to help people with psoriasis and their doctors track how their disease is behaving and how it is affecting them. It was developed at the Dermatology Centre, Salford, Greater Manchester, UK, by simplifying an earlier psoriasis scoring system, the Salford Psoriasis Index. Two versions are available, one for doctors or nurses (professional version: proSPI) to complete and one enabling people with psoriasis to score themselves (self-assessment version: saSPI). The only difference is that the self-assessment version avoids using medical language. It is not necessary to read this introduction for you to be able to score your psoriasis but it will explain a little more about SPI.

SPI has three separate parts.

- SPI-s (current severity) provides a score from 0 to 50 to record how bad your psoriasis is at present.
- **SPI-p** (psychosocial impact) allows you to judge how much your psoriasis is affecting you in your day-to-day life. This is scored very simply by making a mark on a horizontal line with 0 at one end (no effect) and 10 at the other (worst imaginable).
- SPI-i (history and interventions) is a very simple record about your psoriasis and how it has behaved and been treated in the past.

SPI-s (current severity)

If your psoriasis has been scored using PASI (Psoriasis Area and Severity Index) you will find that SPI is very different because of the way the extent of the psoriasis is scored. A fist-sized patch of psoriasis over your face is likely to have a very different impact on you from one on your back. This is recognised in SPI by giving half of the psoriasis extent score (0-10) to five special areas, the scalp, the face, the genital area and anus (back passage), the hands (+ fingernails) and the feet (+ toenails). This is to ensure that the importance of psoriasis in these special areas is recognised in the score. With



SPI there is no attempt to guess what percentage of the skin is affected by psoriasis (something which is almost impossible to do but which is required for PASI). The two versions of SPI-s, the self-assessment severity score, **saSPI-s** and the professionally-assessed score **proSPI-s** are generally very similar.

The SPI extent score is very straightforward. For each of the ten body areas you are asked to circle whichever of the three options shown here you feel best applies to you.

0	clear or so minor that it does not bother me (0)
±	obvious but still leaving plenty of normal skin (1/2)
+	widespread and involving much of the affected area (1)

		0	1/2	1
1	Scalp and hairline	0	±	+
2	Face, neck and ears	0	±	+
3	Arms and armpits	0	±	+
4	Hands, fingers and fingernails*	0	±	+
5	Chest and abdomen	0	±	+
6	Back and shoulders	0	±	+
7	Genital area and/or around anus (back passage)	0	±	+
8	8 Buttocks and thighs		±	+
9	Knees, lower legs and ankles	0	±	+
10	Feet, toes and toenails*	0	±	+
* even if the skin of the hands or feet is unaffected you can score ± for severe psoriasis of at least 2 and + for 6 or more finger or toenails Total extent score: maximum 10 points			SÜM	

The **overall average severity score** of your psoriasis is scored from 0-5

PART 1B Please circle whichever of these choices best describes the overall state of your psoriasis today. Your score should reflect the average of all of your psoriasis, not just the worst areas.					
0	Clear or just slight redness or staining				
1 Mild redness and/or scaling with no more than slight thickening 2 Definite redness, scaling and/or thickening					
			3	Moderately severe with obvious redness, scaling and/or very thick	
4 Very red and inflamed, very scaly and/or very thick					
5	Intensely inflamed skin with or without pustules (pus spots)				
	Average severity score: maximum 5 points 1B				
You may be given some photographic images to help you score your psoriasis.					

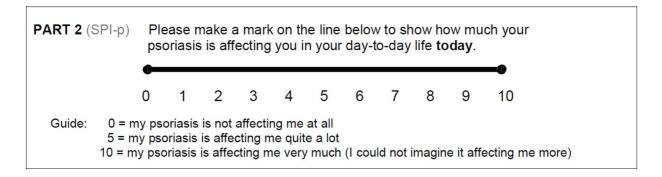
Both **saSPI-s** and **proSPI-s** are derived by multiplying the **extent** score **1A** (range 0-10) by the **overall average severity** score **1B** (range 0-5) to give a maximum score of 50.

SPI-p (psychosocial impact)

People can react very differently to having psoriasis and this does not necessarily always reflect how bad the skin is. For instance, worry about psoriasis getting worse can itself cause a lot of distress and so for some people with a low **SPI-s** score may have a high **SPI-p** score. Scoring SPI-p involves just making a mark on the line as shown below. There is a guide to help you decide how to respond. If it is a doctor or nurse doing the assessment (proSPI) it will still be you who will mark the line yourself using the guidance shown. The maximum score is 10.

0 My psoriasis is not affecting me at all to

10 My psoriasis is affecting me very much – I could not imagine it affecting me more



SPI-i (historical course and interventions)

This provides a little background information about your psoriasis and the treatment you have received for it. You can score up to four points for information about your psoriasis.

About your psoriasis	Please tick each true statement	maximum 4 points		
I have had psoriasis for at least 1	have had psoriasis for at least 10 years			
My psoriasis first developed beformore than 20 years	has been present for			
I have had bright red and very inflamed psoriasis (with or without pus spots) covering all my skin (erythrodermic or generalised pustular psoriasis)				
A rheumatologist (arthritis specialist) has confirmed that I have psoriatic arthritis				

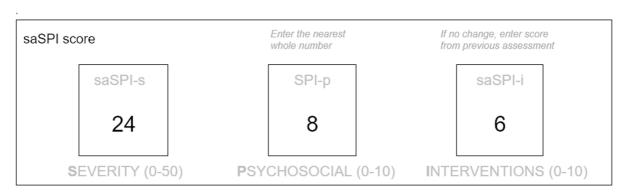
You can score one point if you have ever received ultraviolet light treatment and up to five points for the number of <u>different</u> psoriasis tablets or injections you have ever had.

About your psoriasis treatment How many different psoriasis treatments (excluding creams etc.) have	maximum 6 points e you ever had?	
Ultraviolet light treatment (UVB and/or PUVA)	maximum 1 point	
Psoriasis tablets or injections (1 point for each different active drug)	maximum 5 points	NUMBER

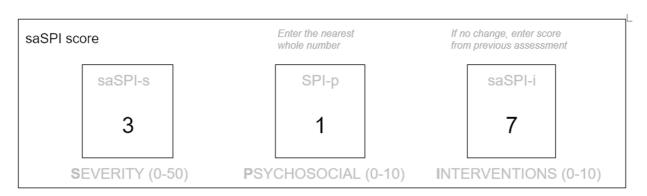
If you wish, you can also record which drugs you have used for your psoriasis by ticking the boxes shown below. If a drug is not listed, you can write it down in one of the blank spaces.

Summary of treatments received (optional) * Please tick each treatment you have ever received. If a treatment is not listed, add it. Please ask doctor or nurse if unsure.					
□ Acitretin	□ Infliximab		:	:	
□ Ciclosporin	□ Adalimumab		□:	□:	
□ Methotrexate	□ Secukinumab		□:	□:	
□ Etanercept	□ Ustekinumab		□:	□:	

Your final score is recorded in the boxes at the foot of the page, which in this example would be 24:8:6.



If you then responded well to a new treatment it might change to 3:1:7. (The saSPI-I score Has gone up because you would now include your new drug.)



SPI makes it possible for you to keep a record of how your psoriasis is behaving and how it is affecting you. The simple scores illustrated above can be sent to your doctor to give him or her an indication of how you are managing, even if you are unable to attend for a consultation.