

Global Psoriasis Atlas

PHASE III

Annual Report

April 2025 – March 2026



Mission

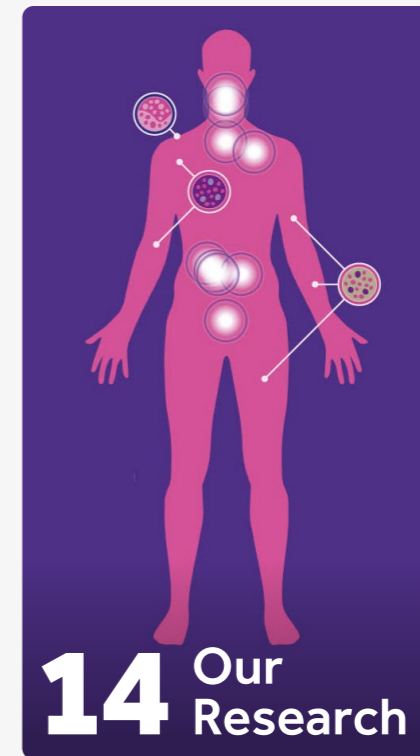
The mission of the GPA is to provide the common benchmark on the burden of psoriasis in all countries and regions throughout the world. The GPA will leverage existing data from publications and registries; where gaps are identified additional studies will be commissioned. The GPA is a long-term project that seeks both to drive continuous improvement in the understanding of psoriasis and uncover how it affects both the individual and society at large.

Vision

The vision of the Global Psoriasis Atlas is to become the leading epidemiological resource globally on psoriasis.

Contents

	page
Foreword	4
The GPA: A Strong Organisation Built to Collaborate	5
Our Team	6
National Coordinator Network	8
Structure and Governance	10
Areas of research focus phase IV	11
Phase III (2023-2026) at a Glance	12
Our Research	14
Third Edition of the GPA	22
Grand Challenges in Global Skin Health	24
IPC Fellowship 2025	26
Digital Developments and Communications	28
News Bulletin	30
Looking Forward	34
Engagement	36
Publications, Presentations and Abstracts	37



Foreword



Welcome to the ninth annual report of the Global Psoriasis Atlas (GPA). It's difficult to believe that we have reached the end of our third and final cycle of continuous funding from the LEO Foundation.

We owe a huge debt of gratitude to the Foundation for having confidence in us and, by so doing, launching not just the GPA but, in due course, three other atlases under the umbrella of the ILDS's Grand Challenges in Global Skin Health. I am immensely proud of all that we have achieved, are achieving, and will achieve with the support of the Foundation, our industry partners, and partner organisations.

This spring, despite the bountiful and inexorable march towards a Northern Hemisphere summer, is beset with the uncertainty of global political turmoil, with new conflicts emerging alongside long-standing ones such as the civil war in Myanmar. The GPA was able to support the long-awaited and hugely successful 2nd International Dermatology Meeting of the Burma Skincare Initiative, held in Yangon, Myanmar, in February; it had been six long years since the charity held its first international meeting.

The GPA has a fantastic worldwide network of 150 keen-as-mustard Regional and National Coordinators representing more than 140 countries. The first major output from this network will be our regional access-to-care monographs. We continue to publish papers and present at international and national scientific meetings, most recently at the annual meeting of the American Academy of Dermatology in Denver.

A major loss to not just the GPA but to world dermatology was the untimely demise of our great friend and advocate Professor Wayne Gulliver of St John's, Newfoundland in September of last year – he will be missed.

The only thing we were unable to accomplish this year was our field survey with the other Atlases and the Skin Observatory in Bogo City, Philippines. Natural disasters in the form of earthquakes and typhoons forced us to postpone until January 2027. We have other field surveys in the planning stages, such as in Senegal and the Solomon Islands.

This year's report is a cornucopia of success and achievement, all due to the fabulous team I am privileged to work with.

With best wishes,

Professor Chris Griffiths OBE
Director, Global Psoriasis Atlas

The GPA: A Strong Organisation Built to Collaborate

The GPA is a collaboration between three leading international organisations in world dermatology: IFPA (International Federation of Psoriatic Disease Associations); the International League of Dermatological Societies (ILDS); and the International Psoriasis Council (IPC) with The University of Manchester (UoM) as the host academic institution.

The GPA project success is a result of the strong, integrated partnerships between our academic institution and these global leaders in psoriasis care and dermatology.

These organisations represent psoriasis associations around the world, international dermatology societies and the education and empowerment of global key opinion leaders in psoriasis

IFPA is a non-profit umbrella organisation uniting all people living with psoriatic disease – regardless of where they live, what type of psoriatic disease they have, or how it impacts their lives. IFPA was founded in 1971 and, together with international member associations, represents and advocates for millions of people around the world. Read more about IFPA, members and activities at www.ifpa-pso.com

"IFPA, together with global member organizations, is honored to collaborate with ILDS and IPC on the Global Psoriasis Atlas (GPA) project. The GPA provides essential data on the global burden of psoriasis, mapping disease prevalence and its impact on quality of life. This evidence supports IFPA's advocacy mission to improve the lives of individuals with psoriatic disease. By leveraging this data, IFPA can drive global recognition and action, ensuring that the needs and voices of those affected by psoriasis are acknowledged and addressed."

The International League of Dermatological Societies has been promoting skin health around the world for over 80 years. Through its official relations with the World Health Organization (WHO), the ILDS advocates for the inclusion of skin health in global health policy. It is committed to advancing education, clinical care, research, and innovation to improve skin health outcomes worldwide. The ILDS represents dermatology at the highest level, with 232 member organisations from 110 countries representing over 200,000 dermatologists worldwide. www.ilds.org

"The International League of Dermatological Societies is honored to collaborate with the Global Psoriasis Atlas (GPA) and deeply appreciates their ongoing commitment to advancing the understanding of psoriasis. This

partnership is crucial in driving continuous progress and enhancing patient care worldwide."

The International Psoriasis Council (IPC) is a global, nonprofit organization led by more than 200 physician experts and researchers from 50 countries. IPC provides education for healthcare professionals, fosters international research collaboration, and advocates for improved psoriasis care worldwide. www.psoriasisCouncil.org

"The International Psoriasis Council is proud to collaborate with global leaders to improve care for people with psoriasis worldwide. Through education, research, and advocacy, IPC brings together physician experts to support clinicians, strengthen the evidence base, and help translate research into real-world practice."

The University of Manchester is the GPA's host academic institution. The University is a powerhouse of research and is ranked first in Europe and second in the world for social and environmental impact (Times Higher Education Impact Rankings 2025). From tackling cancer and poverty to finding the energy solutions of the future the University's research helps make a real difference to the quality of people's lives across the globe. This research is internationally recognised, with current rankings placing The University of Manchester among the world's leading universities. www.manchester.ac.uk/research



Our Team

Research Team

 Professor Chris Griffiths
GPA Director
The University of Manchester

 Professor Darren Ashcroft
GPA Director of Research
The University of Manchester

 Thomas Rogers
GPA Programme Manager
The University of Manchester

 Dr Alison Wright
GPA Research Fellow
The University of Manchester

 Dr Paul Dimmock
GPA Research Associate
The University of Manchester

 Alice Silk
GPA Administrator
The University of Manchester


Collaborating Organisations

 Arpita Bhose
ILDS Chief Executive Officer
United Kingdom


 Jennifer Kilmer
ILDS Global Health Project Lead
United Kingdom


 Christy Langan
IPC Chief Executive Officer
USA


 Frida Dunger
IFPA Executive Director
Sweden

 Dr Sicily Mburu
IFPA Scientific Officer
Sweden

Board of Governors

 Professor Henry Lim
Chair of the Board of Governors,
President of the ILDS
USA

 Ingvar Ágúst Ingvarsson
President of IFPA
Iceland

 Dr Claudia de la Cruz
Vice-President of the IPC
USA

Regional Coordinators




 Professor Ricardo Romiti
Brazil

 Dr Elena Netchiporouk
Canada

 Dr Claudia de la Cruz
Chile

 Dr Wilson Liao
USA




 Professor Asja Prohic
Bosnia and Herzegovina

 Professor Mahira El Sayed
Egypt

 Professor Sunil Dogra
India

 Professor Arnon Cohen
Israel

 Professor Jacek Szepietowski
Poland

 Professor Ncoza Dlova
South Africa

 Professor Nejib Doss
Tunisia



 Professor Chris Baker
Australia

 Professor Min Zheng
China

 Professor Xuejun Zhang
China

 Professor Vermen Verallo-Rowell
Philippines

 Dr Hazel Oon
Singapore

 Dr Colin Theng
Singapore

National Coordinators

GPA Regional and National Coordinators are a global network of passionate experts committed to understanding the epidemiology and burden of psoriasis and facilitating access to the best care for people living with the disease worldwide.

The GPA Coordinators play key roles in helping advance the collaboration, data collection and impact of the GPA. Their expertise is crucial for understanding and developing a comprehensive global picture of psoriasis.

Region of the Americas



- Dr Enrique Loayza**
Ecuador
- Dr David Zepeda**
El Salvador
- Dr Lone Storgaard Hove**
Greenland
- Dr Enrique Rivas**
Guatemala
- Dr Heather Wilson**
Guyana
- Dr Elmer López-Lutz**
Honduras
- Dr Mario Amaya**
Mexico
- Dr Silvia Urcuyo**
Nicaragua
- Dr Reynaldo Arosemena**
Panama
- Dr Romina Contreras**
Paraguay
- Dr Farah Novoa Boza**
Peru
- Dr Claudia Guebenlián**
Uruguay
- Dr María Alejandra Rodríguez**
Venezuela
- Dr Cristina Echeverría**
Argentina
- Dr Andrew Forde**
Barbados
- Dr Jorge Lopez**
Belize
- Prof Juan Carlos Diez de Medina**
Bolivia
- Dr Andre Carvalho**
Brazil
- Prof Fernando Valenzuela**
Chile
- Dr César González**
Colombia
- Dr Benjamín Hidalgo**
Costa Rica
- Dr Olaine Regla Gray Lovio**
Cuba
- Dr Solange Reynoso**
Dominican Republic

European Region



- Prof Monika Fida**
Albania
- Dr Armine Adilkhanyan**
Armenia
- Prof Peter Wolf**
Austria
- Dr Senan Karimov**
Azerbaijan
- Prof Jo Lambert**
Belgium
- Dr Kosara Drenovska**
Bulgaria
- Prof Romana Čević**
Croatia
- Dr Nicole Sakka**
Cyprus
- Prof Petr Arenberger**
Czechia
- Prof Claus Zachariae**
Denmark
- Dr Kyli Kingo**
Estonia
- Prof Veli-Matti Kähäri**
Finland
- Prof George Galdava**
Georgia
- Prof Matthias Augustin**
Germany
- Dr Dimitrios Ioannides**
Greece
- Prof Roland Gyulai**
Hungary
- Dr Jónas Aðalsteinsson**
Iceland
- Prof Brian Kirby**
Ireland
- Prof Paolo Gisondi**
Italy
- Prof Allma Kocinaj**
Kosovo
- Prof Ilona Hartmane**
Latvia
- Prof Skaidra Valiukevičienė**
Lithuania
- Dr Liam Mercieca**
Malta
- Dr Iulia Emet**
Moldova
- Dr Ana Popovic**
Montenegro
- Prof Elke de Jong**
Netherlands
- Prof Andrej Petrov**
North Macedonia
- Dr Mari Løset**
Norway
- Prof Tiago Torres**
Portugal
- Prof George-Sorin Tiplica**
Romania
- Dr Sergey Skrek**
Russia
- Dr Yulia Molochkova**
Russia
- Prof Zeljko Mijušković**
Serbia
- Dr Slavomir Urbancek**
Slovakia
- Dr Anna López Ferrer**
Spain
- Prof Enikő Sonkoly**
Sweden
- Prof Curdin Conrad**
Switzerland
- Prof Burhan Engin**
Turkey
- Dr Aleksander Litus**
Ukraine
- Prof Shahnoza Mavlyanova**
Uzbekistan

African Region



- Dr Samira Zobiri**
Algeria
- Prof Isabel Neto**
Angola
- Dr Christiane Koudoukpo**
Benin
- Dr Maitseo Nwako-Mohamadi**
Botswana
- Prof Nomtongo Amina Ouédraogo**
Burkina Faso
- Dr Doriane Sabushimike**
Burundi
- Dr Raquel Fernandes**
Cabo Verde
- Dr Emmanuel Armand Kouotou**
Cameroon
- Dr Bienvenue Solal Noubadinan**
Chad
- Dr Zahara Salim**
Comoros
- Dr Sarah Hamdan Kourouma**
Côte d'Ivoire
- Dr Tripathie Sindani**
DR Congo
- Dr Dumi Mabundza**
Eswatini
- Dr Yared Getachew Mekonnen**
Ethiopia
- Dr Martin Agyei**
Ghana
- Dr Mohamed Soumah**
Guinea
- Dr Silvio Caetano Coelho**
Guinea Bissau
- Dr Cyndy Muliro**
Kenya
- Dr Ranks Lehloenyana**
Lesotho
- Dr Ibrahim Al Mukahal**
Libya
- Dr Mendika Fifaliana Rakotoarisaona**
Madagascar
- Dr Kelvin Mponda**
Malawi
- Prof Ousmane Faye**
Mali
- Dr Mariem Kébé**
Mauritania
- Dr Lukshana Ramanna**
Mauritius
- Prof Amal Said**
Morocco
- Dr Gilda Luciano**
Mozambique
- Dr Hileni Taleni Nangolo**
Namibia
- Dr Kadidia Issa Abdou**
Niger
- Prof Olusola Ayanlowo**
Nigeria
- Prof Ida Aurélie Lenga Loumingou**
Republic of the Congo
- Dr Jean Bosco Ndagijimana**
Rwanda
- Dr Keyla Sousa**
São Tomé and Príncipe
- Prof Fatimata Ly**
Senegal
- Dr John Stevens Mbete**
Sierra Leone
- Dr Mohamud Mohamed Abdulkadir**
Somalia
- Dr Sulafa Abdalla**
Sudan
- Dr Gloria Masenga**
Tanzania
- Dr Abass Mouhari-Touré**
Togo
- Dr Houda Hammami**
Tunisia
- Dr Grace Kitunzi Mulyowa**
Uganda
- Dr Malan Malumani**
Zambia
- Dr Hafidh Hassan**
Zanzibar
- Dr Mwatsveruka Nokuzola Munhutu**
Zimbabwe

South-East Asian Region



- Prof Mohammad Rafiqul Mowla**
Bangladesh
- Dr Ambika Pradhan**
Bhutan
- Dr Mohamed Haikal Abdhulrahman**
Maldives
- Prof Khine Khine Zaw**
Myanmar
- Dr Shristi Shrestha**
Nepal
- Dr Janaka Akarawita**
Sri Lanka
- Dr Leena Chularojanamontri**
Thailand

Western Pacific Region



- Dr Ratanak Thay**
Cambodia
- Dr Martin Chung**
Hong Kong
- Dr Shinta Trilaksmi Dewi**
Indonesia
- Prof Akimichi Morita**
Japan
- Dr Siew Eng Choon**
Malaysia
- Prof Enkhtur Yadamsuren**
Mongolia
- Dr Marius Rademaker**
New Zealand
- Prof Seong Jin Jo**
Republic of Korea
- Prof Tsen-Fang Tsai**
Taiwan

Eastern Mediterranean Region



- Prof Mahmood Gu Khodamani**
Afghanistan
- Dr Omid Zargari**
Iran
- Dr Nawaf Al-Mutairi**
Kuwait
- Prof Abdul Ghani Kibbi**
Lebanon
- Dr Ahmed Al Waily**
Oman
- Prof Naeem Raza**
Pakistan
- Dr Mohamed Allam**
Qatar
- Dr Mohammad Munshi**
Saudi Arabia
- Dr Samir Al Mahfound**
Syria
- Dr Hassan Galadari**
United Arab Emirates
- Prof Mutaia Abuarij**
Yemen

Structure and Governance

Board of Governors

Professor Henry Lim
Chair of Board of Governors,
President of the ILDS



Ingvar Ágúst Ingvarsson
President of IFPA



Dr Claudia de la Cruz
Vice President of the IPC



The Board of Governors membership includes: the Presidents of the three Collaborating Organisations and other non-voting members. The Board of Governors is chaired by the ILDS President.

Steering Committee

The GPA Steering Committee is chaired by the GPA Director and is composed of a lead from each of the Collaborating Organisations (IFPA, ILDS and IPC), along with the members of the Project Management Team comprising the GPA Research Director, GPA Programme Manager and GPA Administrator.

Regional and National Coordinators
Part of the GPA Steering Committee.

Collaboration Team

Membership includes executives and members from the Collaborating Organisations and the GPA Programme Manager.

Researchers

Research Fellows and Research Associates.

Scientific Advisory Board

The GPA Scientific Advisory Board (SAB) provides the Board of Governors with independent and international scientific oversight of the work of the GPA. They are responsible for reviewing research priorities and advising on significant developments which may affect the GPA.



Professor Luigi Naldi



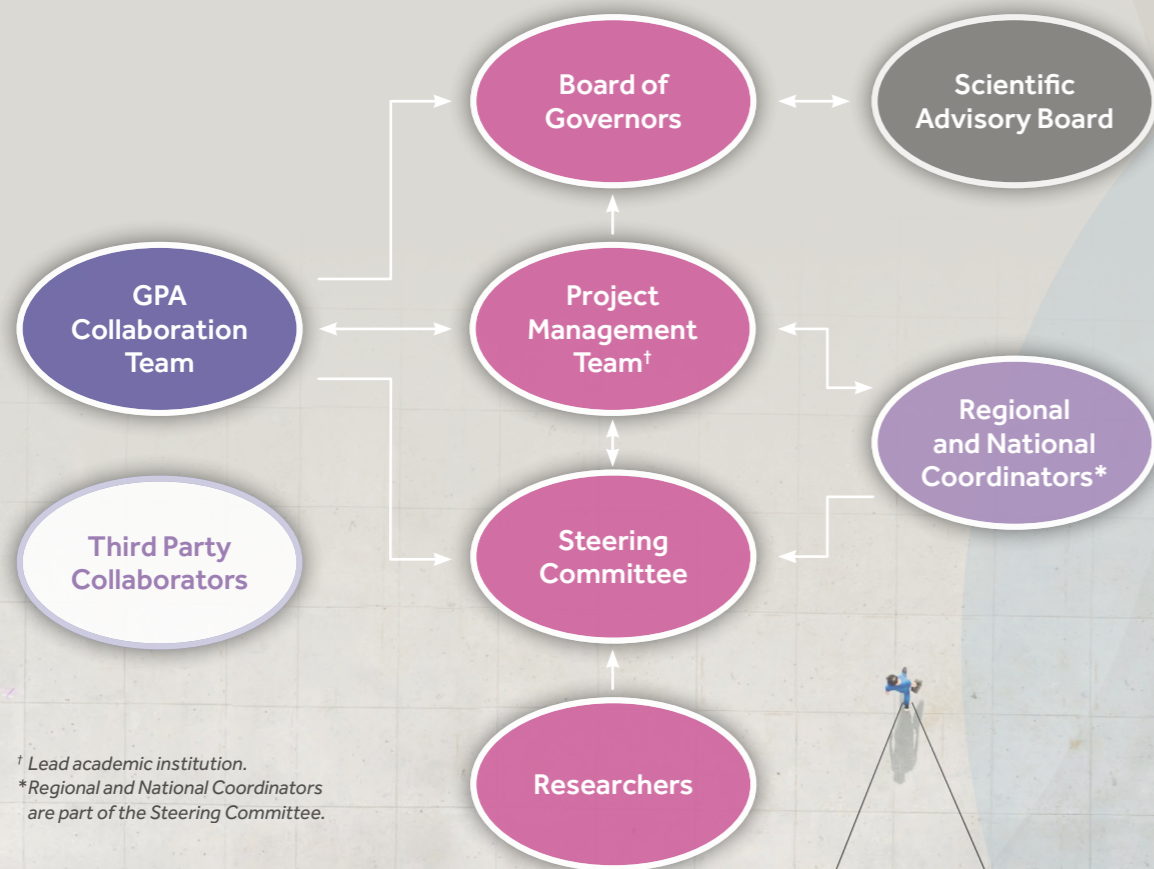
Professor Mohsen Naghavi



Professor Tamar Nijsten



Professor Joel Gelfand



† Lead academic institution.

*Regional and National Coordinators are part of the Steering Committee.

Areas of research focus Phase II (2023-2026)

Epidemiology of Psoriasis

Implement an extensive update to our large international dataset and provide updated prevalence estimates on a country-by-country basis..

Conduct new epidemiological studies in selected countries, based on existing knowledge gaps, using electronic health records or field work to collect data.

Conduct new epidemiological studies on Generalised Pustular Psoriasis (GPP).

Understand and Characterise the Economic Impact of Psoriasis

Conduct new studies to identify, and quantify, the use of healthcare resources and associated costs to the healthcare system.

Conduct new studies to understand the impact of living with psoriasis including the impact on health and capability, wellbeing, productivity, access to treatments, and psychosocial burden.

Recognising the Comorbid Disease Burden of Psoriasis

Conduct new studies to improve knowledge about the comorbid disease burden of psoriasis.

Conduct new epidemiological studies to examine the clustering of comorbid diseases in psoriasis.

Improving the Early Diagnosis of Psoriasis

Development of the diagnostic training tool as an online resource to be hosted on the GPA website to support the training of health care professionals on early and correct diagnosis of psoriasis.

Trialling of the clinical diagnostic training tool in other countries.

Phase III (2023-2026) at a Glance

Boehringer Ingelheim, Bristol Myers Squibb and Janssen partner with the GPA to **support** Phase III

Publication of 'Fertility Trends and Adverse Pregnancy Outcomes in Female Patients with Psoriasis in the UK', JAMA Dermatology, July 2023

Publication of 'Incidence and prevalence of generalised pustular psoriasis in multi-ethnic Johor Bahru, Malaysia: a population-based cohort study using routinely captured electronic health records in Teleprimary Care (TPC®) clinical information system from 2010 to 2020', British Journal of Dermatology, September 2023

2023

Publication of 'Risk of serious infection and infection mortality in patients with psoriasis: A nationwide cohort study using the Taiwan National Health Insurance claims database', Journal of the European Academy of Dermatology and Venereology, August 2023

Publication of 'Prevalence of psoriasis and other autoimmune skin diseases in a recently contacted Amerindian community in the Auaris region, Yanomami territory, Brazil', British Journal of Dermatology, September 2023

Publication of 'Prevalence of multiple long-term conditions with psoriasis in England: A cohort study using the Clinical Practice Research Datalink', Journal of the European Academy of Dermatology and Venereology, October 2023

SKINSCAPE Field Study conducted in the Eastern Cape, South Africa, December 2023.

Publication of 'Tree-Based Machine Learning to Identify Predictors of Psoriasis Incidence at the Neighborhood Level: A Populational Study from Quebec, Canada', American Journal of Clinical Dermatology, March 2024

Publication of 'The epidemiology of atopic dermatitis and psoriasis in the indigenous people of Brazil', Journal of the European Academy of Dermatology and Venereology, April 2024

Publication of 'Estimating the burden of vitiligo: a systematic review and modelling study', The Lancet Public Health, June 2024

Publication of 'Prevalence of anxiety and depression symptoms among patients with psoriasis in Kabul, Afghanistan', International Journal of Dermatology, June 2024

2024

Publication of 'Experience of living with psoriasis in Brazil: a Global Psoriasis Atlas online survey', International Journal of Dermatology, July 2024

Publication of 'Skin diseases among adults in Tasilaq, East Greenland', International Journal of Circumpolar Health, July 2024

Publication of 'Prevalence, incidence, mortality and healthcare resource use for generalized pustular psoriasis, palmoplantar pustulosis and plaque psoriasis in England: a population-based cohort study', British Journal of Dermatology, October 2024

Publication of 'Development and evaluation of an online training tool to aid in the diagnosis of chronic plaque psoriasis', Journal of the European Academy of Dermatology and Venereology, October 2024

Almirall, Takeda and UCB partner with the GPA to **support** Phase III

GPA provided data for an application which resulted in **The National Institute for Health and Care Excellence (NICE) recommending Spesolimab** as the first-ever targeted **treatment for Generalised Pustular Psoriasis** in England and Wales, June 2025

Publication of 'Epidemiology of Psoriasis in Poland: Prevalence, Incidence, and Mortality Rates', International Journal of Dermatology, September 2025

The **third edition of the Global Psoriasis Atlas** was released on the GPA website on World Psoriasis Day, October 2025.

2025

GPA team contributed to the application to the World Health Organization (WHO) which resulted in **Adalimumab and Ustekinumab** being **added to the WHO Essential Medicines List (EML)** for both adults and children with moderate-to-severe psoriasis, application approved, September 2025

First Global Skin Disease Atlases Symposium demonstrating the importance of the Atlases in advancing global skin health, EADV Congress, September 2025

Publication of 'Skin disease in the Eastern Cape (SKINSCAPE): a Global Psoriasis Atlas point prevalence study in rural South Africa' British Journal of Dermatology, January 2026

Publication of 'Grand Challenges for Skin Health Revisited: The International League of Dermatological Societies (ILDS) Skin Disease Atlases', British Journal of Dermatology, January 2026

2026

Publication of 'Psoriasis and the risk of 26 cancers: pooled population-based cohort studies from Denmark, England, Israel, and Taiwan', British Journal of Dermatology, January 2026

The **GPA Coordinator Network** has grown from 25 Coordinators representing 23 countries in March 2024 to 150 Coordinators representing 144 countries worldwide in March 2026

Sun Pharma partner with the GPA to **support** Phase III

Our Research

Four Key Research Areas

This section explores the GPA research team's progress over the last year, highlighting our global research collaborations and publications.



Epidemiology of Psoriasis



Understand and Characterise the Economic Impact of Psoriasis



Recognise the Comorbid Disease Burden of Psoriasis



Improve the Early Diagnosis of Psoriasis

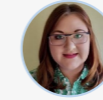
Our Research



Professor Darren Ashcroft
GPA Research Director



Dr Alison Wright
GPA Research Fellow



Dr Paul Dimmock
GPA Research Associate



Update to our large international epidemiology dataset

Building on our previous systematic review published in 2020, we updated our epidemiology of psoriasis dataset after reviewing all existing published literature reporting on the incidence and prevalence of psoriasis in the general population up to 2025. Data were retrieved on the numbers of people with psoriasis in the total population studied, how psoriasis was diagnosed (self-report or clinical diagnosis), age groups included (all ages versus children or adults) and methods of prevalence measurement (point, period or lifetime prevalence). The review now includes 228 studies on prevalence in the general population across 41 countries. Studies on incidence remain sparse but from the limited studies available, it appears that the incidence of psoriasis is not increasing.

Published studies are split roughly equally between clinical diagnosis and self-diagnosis studies. The GPA modelling shows a clear higher prevalence from self-report studies, where the model predictions for a self-report diagnosis are almost 2.5 times higher than those predicted for a diagnosis from a physician or dermatologist.

Higher prevalence in high-income countries with a significant Caucasian population is apparent, along with similarly high rates in Central Europe. Lower prevalence rates are seen across much of Asia, Latin America and Africa, which are also typically characterised by much larger 95% credible intervals due to fewer available studies there resulting in greater uncertainty in the predictions for prevalence. Western Europe remains dominant in terms of published studies, with more studies conducted in this region than in the rest of the world combined, demonstrated in lower levels of uncertainty in predicted prevalence rates.

The GPA team released the third edition of the Global Psoriasis Atlas on World Psoriasis Day (29th October 2025). Hosted on the GPA website, the Atlas is an open-access resource which provides comprehensive information about the global epidemiology of psoriasis. Please take time to visit the GPA website to view, compare and download global prevalence data for individual countries:

www.globalpsoriasisatlas.org/en/explore/prevalence-heatmap

Examining the epidemiology of psoriasis in Poland

Our GPA team worked with our colleagues in Poland to conduct a population-based study on the epidemiology of psoriasis between 2010 and 2023. To examine annual trends in prevalence, incidence, and all-cause mortality, we examined health records from the Polish National Health Fund (NHF) database, which covers almost all of the resident population in Poland. The NHF, formed in 2003, is a single-payer public healthcare system financed by compulsory health insurance contributions, and provides health services (outpatient primary healthcare, outpatient specialised healthcare, and inpatient hospitalisations) to insured Polish citizens. The NHF database contains information on registered patients' diagnostic codes, demographic characteristics, and the dates of healthcare services performed.

Plaque psoriasis accounted for the majority of the psoriasis cases identified in the study population (~96%), with smaller proportions diagnosed with pustular psoriasis, psoriatic arthritis, and guttate psoriasis. Over the 13-year study period, psoriasis prevalence increased gradually to 1.70% (>600,000 of the population), with higher rates in women than men. The prevalence of psoriasis in children (0-17 years of age) was 0.84%.

Introduction from Professor Darren Ashcroft

It is hard to believe just how quickly this year has passed, and as always it has been a huge pleasure to work closely with our global network of GPA Coordinators, and to celebrate the many achievements from our GPA research programme. This year, we welcomed Dr Doriane Sabushimike from the Kamenge Military Hospital in Burundi to spend time with the GPA, and over the next year will be hosting Dr Shir Azrielant, Director of Dermatology Inpatient Services at Tel Aviv Sourasky Medical Center. Shir previously contributed to our GPA SKINSCAPE study which was published this year. Our team have worked hard to update our global systematic review examining the epidemiology of psoriasis which we launched on World Psoriasis Day 2025, and we hope you enjoy learning more about some of our major achievements that follow.

Whilst mortality rates declined over time, all-cause mortality among individuals with psoriasis remained higher than in the general population throughout the study period. In 2023, mortality among people with psoriasis was 14.8 per 1,000 person-years compared with 10.9 per 1,000 in the general population, with elevated risks observed in men (17.6 per 1,000 psoriasis men-years vs. 12.5 per 1,000 psoriasis women-years).

You can read the full results from this study in our published paper in the International Journal of Dermatology <https://doi.org/10.1111/ijd.17848>

SKINSCAPE

Building on earlier GPA field studies in Tanzania (2017) and Greenland (2019), the SKINSCAPE study (2023) marked a significant step forward as the first comprehensive, community-based point prevalence study capturing the full spectrum of skin disease in the Eastern Cape of South Africa, offering new detailed evidence on the epidemiology of skin disease in an under-resourced setting where there is high socioeconomic deprivation.

The team (comprised of local and international dermatologists, the GPA team, industry partner volunteers, and local community workers) undertook house-to-house visits in two neighbouring rural villages — Mtyholo Dlova and Mdolomba — to collect participant data using structured questionnaires, along with clinical skin examinations performed by the dermatologists. We captured household and participant demographic data, clinical information, and diagnoses of any skin, nail, and hair problems. The local dermatologists were also able to refer participants to local health services for further care, if needed.

Among the 698 participants examined, **the point prevalence of skin disease was 62.9% (95% CI 59.3%–66.5%)**, demonstrating a high burden of

dermatological disease in these communities. We saw differing patterns in the types of skin disease present in women and men and in different age groups. Psoriasis was uncommon in this population, with a point prevalence of 0.3% (95% 0.0–0.7).

This study was published in the British Journal of Dermatology:

<https://doi.org/10.1093/bjd/ljaf386>

Watch the video giving an overview of this study here:

<https://youtu.be/HROTjmOcro?si=Ne2jFG8qT7tUXBSi>

Examining the risk of developing cancer in people with psoriasis

Psoriasis is associated with several comorbidities including psoriatic arthritis, cardiovascular disease, metabolic syndrome, inflammatory bowel disease, and mental health conditions. The link between psoriasis and other conditions is often related to their shared inflammatory pathways, lifestyle factors, environmental factors, genetic factors, or disease treatments. Cancer is acknowledged as an important comorbidity in several chronic conditions. In psoriasis, several different mechanisms may play a role, including systemic inflammation; immune dysfunction; phototherapies commonly used in the treatment of moderate-to-severe psoriasis; and increased incidence and prevalence of established cancer risk factors, including smoking, alcohol consumption and obesity.

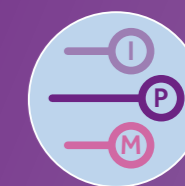
As there is a lack of clarity and consensus on the risks of different cancers in patients with psoriasis, this study examined overall incident cancer risk, and site-specific cancer risk, in individuals with psoriasis compared with matched individuals without psoriasis using electronic health records from four countries; England (Clinical Practice Research Datalink), Denmark (Danish National Patient Registry),

Israel (Clalit Health Services database) and Taiwan (National Health Insurance database). Population-based cohort studies were conducted in each of the four countries, with a common protocol applied and analyses conducted, with results meta-analysed to produce an overall pooled estimate of the risk of developing cancer.

Overall cancer risk was slightly elevated in people with psoriasis compared with people without psoriasis; pooled hazard ratio 1.05 (95% CI 1.01–1.09). When restricted to moderate-to-severe psoriasis, the overall risk of developing cancer was slightly higher; pooled hazard ratio 1.09 (95% CI 1.03–1.15). Psoriasis was associated with an increased risk of 14 of 26 investigated site-specific cancers. You can read more about this study in the recently published paper, **"Psoriasis and risk of 26 cancers: pooled population-based cohort studies from Denmark, England, Israel and Taiwan"**, in the British Journal of Dermatology <https://doi.org/10.1093/bjd/ljaf399>.

Psoriasis in Poland

In each year from **2010 to 2023** incidence, prevalence and mortality rates of psoriasis were calculated*



i BACKGROUND

A nationwide cohort study

was conducted using the Polish National Health Fund database which covers almost all of the resident population in Poland

639,662

people were identified with psoriasis in 2023 among the general population of 37.6 million people

WHAT WE FOUND

Prevalence of psoriasis

1.70%

Prevalence of psoriasis in children†

0.84%

Incidence and prevalence of psoriasis was **higher in women** than in men and presents earlier in women



Psoriasis has 2 peaks of onset

The first at age 30-34 and the second at age 65-69



Whilst mortality rates have declined over time **individuals with psoriasis** still have a higher all-cause mortality rate** compared to the general Polish population

14.8% per 1000 person-years vs. **10.9%** per 1000 person-years



17.6% per 1000 person-years vs. **12.5%** per 1000 person-years

Men with psoriasis had higher mortality rates than women with psoriasis

* Incidence = rate of new cases of psoriasis occurring in the population at risk during the given year; Prevalence = proportion of the population with psoriasis (new and pre-existing) in the given year; mortality rates = deaths in the year.

† <18 years of age.
**Death from any cause.



Epidemiology of Psoriasis in Poland: Prevalence, Incidence, and Mortality Rates
J Bartosińska, JC Szepietowski, D Raczekiewicz, CEM Griffiths, DM Ashcroft, AK Wright, K Podwójcic, J Turcza, M Maluchnik, A Chłoń-Domińczak, D Krasowska
<https://doi.org/10.1111/ijd.17848>



Skin Disease in the Eastern Cape

i BACKGROUND

This is the first comprehensive community-based study of skin disease conducted in the Eastern Cape, South Africa.

The Eastern Cape is an under-resourced province, the poorest in the country, where rural residents struggle to access healthcare services. Little is known about the skin conditions that affect this population.



MDOLOMBA

MTYHOLO DLOVA



WHAT WAS DONE

In December 2023

the GPA and a team of international and local dermatologists, local community workers, and industry volunteers conducted a house-to-house survey in two rural, neighbouring villages (Mtyholo Dlova and Mdolomba) in Eastern Cape. The aim was to collect demographic data on all available residents (99% of whom were Xhosa people) and to identify any skin, nail or hair diseases.



We visited
309
households



Examined
698
people

We calculated

the proportion of the total surveyed population with each skin condition at that point in time (point prevalence).



CONCLUSION

Our findings indicate that skin disease is common in the Eastern Cape thus highlighting the need for greater provision of dermatology services and training for healthcare workers in the area.



WHAT WE FOUND

Prevalence of any skin disease

62.9%
(95% CI 59.3%-66.5%)

Psoriasis was rare in this population

0.3%
(95% CI 0.0%-0.7%)



Gender differences

in skin disease prevalence and types were observed. The point prevalence of any skin disease was higher in women than men;
65.8% vs. 59.2%

In children

common conditions included ringworm of the scalp (tinea capitis), acne, dry and/or itchy skin (pityriasis alba, prurigo, xerosis, atopic dermatitis) and scabies.

For adults

the most prevalent diseases were dry skin (xerosis), acne, dark discoloured patches on the skin (melasma), hair loss (scarring and non-scarring alopecia) and athlete's foot (tinea pedis).



Women

were more likely than men to have concurrent skin conditions (presence of two or more distinct skin disorders at the same time).



Psoriasis and the risk of developing cancer

Psoriasis and the risk of 26 cancers: pooled population-based cohort studies from Denmark, England, Israel, and Taiwan



BACKGROUND

The risk of developing cancer in people with psoriasis is not well understood.

There are several factors that could play a role including: chronic inflammation; genetics; lifestyle; comorbidities; and some psoriasis therapies.



METHODS

Population-based cohort studies conducted in 4 countries; Denmark, England, Israel and Taiwan.

702,022 individuals with psoriasis aged 18+ years and **4,185,342** age-sex matched individuals without psoriasis

In each country, we estimated the risk of developing cancer overall and

26 site-specific cancers

between individuals with and without psoriasis (reported as hazard ratios).

Country-specific estimates were pooled to provide an overall estimate.



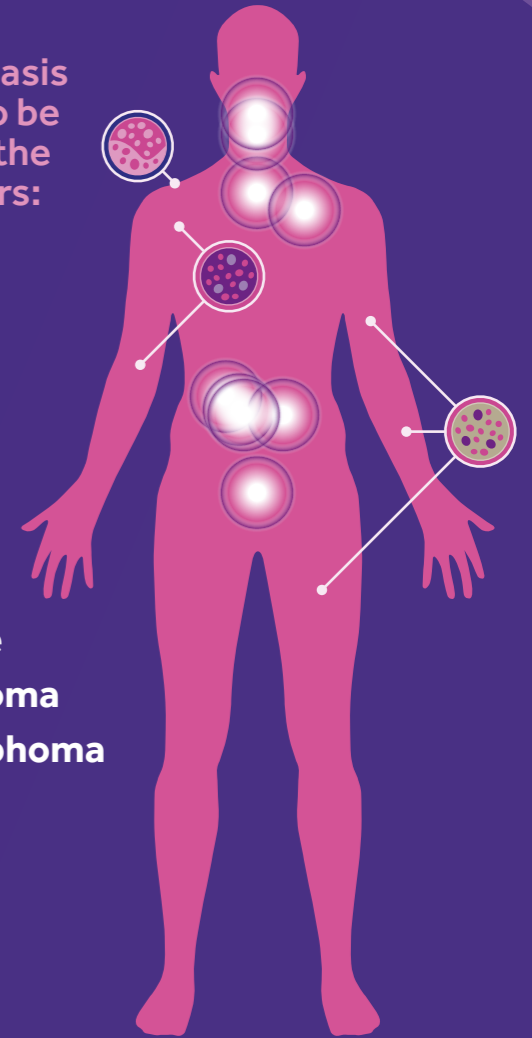
RESULTS

People with psoriasis have a **slightly increased overall risk**

of developing cancer compared with people without psoriasis (hazard ratio 1.05 [95% CI 1.01-1.09]).

People with psoriasis are more likely to be diagnosed with the following cancers:

- Oral cavity
- Pharynx
- Oesophagus
- Liver
- Pancreas
- Kidney
- Bladder
- Keratinocyte
- Hodgkin lymphoma
- Non-Hodgkin lymphoma
- Leukaemia



Risk of any cancer and these site-specific cancers is **elevated in those with severe psoriasis**



People with **severe psoriasis** have a slightly higher risk of developing cancer (hazard ratio 1.09 [95% CI 1.03-1.15]).

*A hazard ratio (HR) is a way to compare how likely an event (e.g. developing cancer) is to happen in one group versus another. In this case, it compares people with psoriasis to people without psoriasis over time.

An HR of 1 means both groups have the same risk, an HR above 1 means people with psoriasis have a higher risk and an HR below 1 means people with psoriasis have a lower risk.



Psoriasis and the risk of 26 cancers: pooled population-based cohort studies from Denmark, England, Israel, and Taiwan
 Trafford AM, Schonmann Y, Chen T-C, Egeberg A, Parisi R, Kontopantelis E, Wang T-C, Rutter MK, Chen L-C, Staa TV, Lee M-S, Kridin K, Cohen AD, Chan K-WA, Wright AK, Griffiths CEM, Ashcroft DM on behalf of the Global Psoriasis Atlas British Journal of Dermatology, 2025. <https://doi.org/10.1093/bjd/ljaf399>

The Third Edition of the Global Psoriasis Atlas

The GPA team was excited to release the third edition of the Global Psoriasis Atlas on World Psoriasis Day, 29th October 2025.

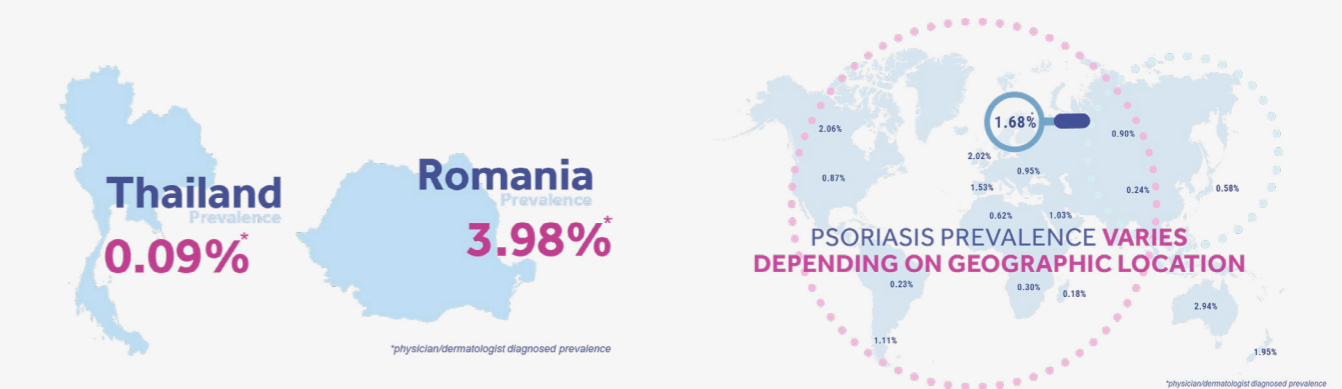
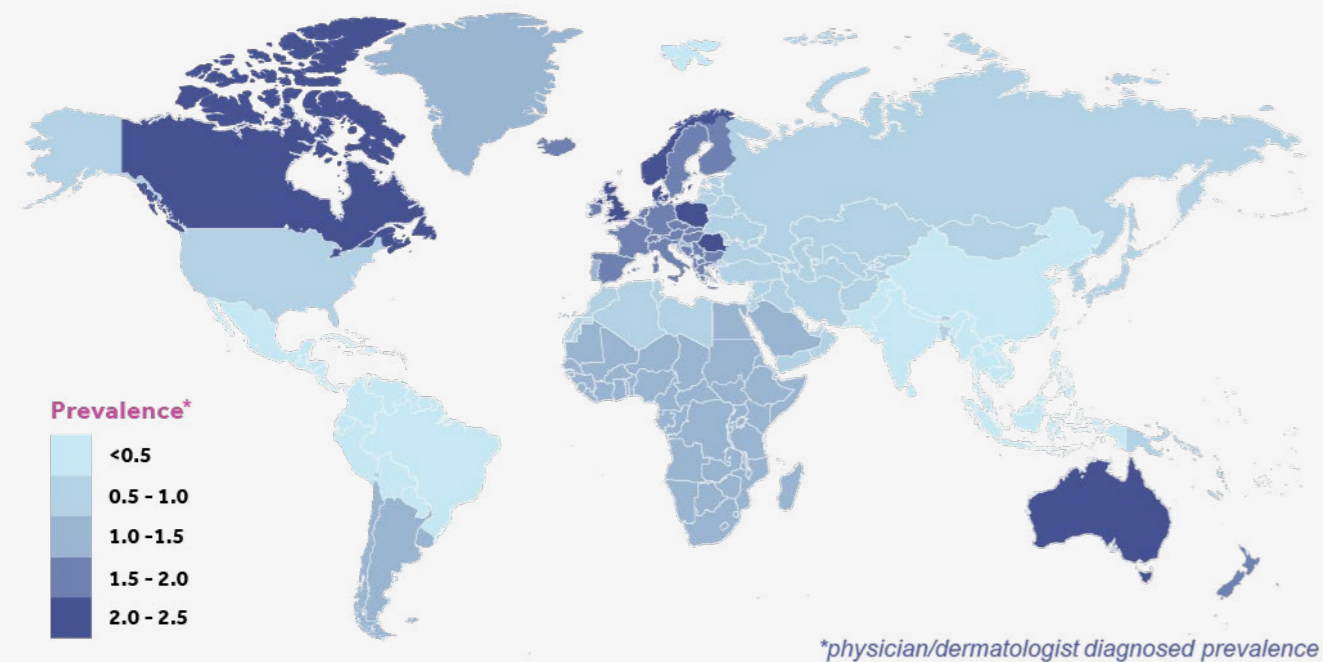
Hosted on the GPA website, the Atlas is an open-access resource which provides comprehensive information about the global epidemiology of psoriasis. The third edition presents findings from the latest systematic review, including data on incidence and prevalence from 58 new prevalence

only studies, 4 new incidence only studies and 11 new combined prevalence and incidence studies – now covering 41 countries across 14 global regions.

Dr Paul Dimmock, GPA Research Associate, and Dr Ahmad Aalemi, GPA Research Fellow, conducted an extensive search of all clinical research evidence and published articles on the incidence and prevalence of psoriasis. The information retrieved was assessed and used to create a statistical model. The statistical model generated a pooled estimate of the prevalence of psoriasis for each individual country.

Considerable gaps still exist in the geographical areas reporting data on incidence and prevalence of psoriasis. Only 41 of over 220 countries and territories in the world have epidemiological data on psoriasis in the general population. For countries without high quality original data sources, estimates were predicted using the statistical model created based on available data.

Each prevalence measure is presented on the GPA website with a credible interval – a range of values, with an upper and lower limit, in which the estimate lies with a specified probability. This data has a 95%



credible interval, this means there is a 95% probability that the prevalence rate lies within that range.

This research reveals that prevalence varies depending on geographic location, for example an estimated prevalence of 0.09%* in Thailand compared to 3.98%* in Romania (*based on physician/dermatologist diagnoses).

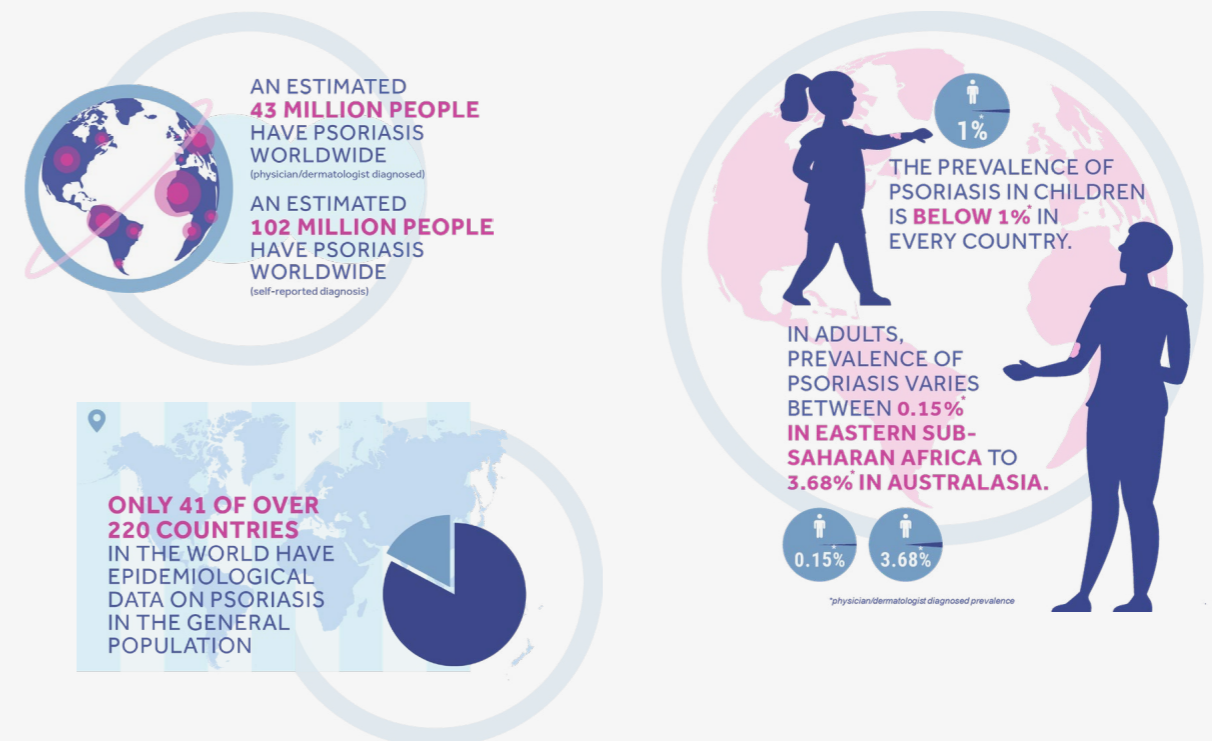
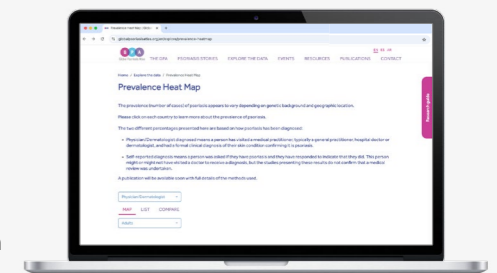
We report an estimated 43 million (from 27 million to 91 million) people have psoriasis based on reporting physician/dermatologist diagnoses and an estimated 102 million (from 65 million to 218 million) people have psoriasis based on self-report cases provided by individuals.

The two different values presented are based on how psoriasis has been diagnosed:

- Physician/dermatologist diagnosed means a person has visited a medical practitioner, typically a general practitioner, hospital doctor or dermatologist, and had a formal clinical diagnosis of their skin condition confirming it is psoriasis.
- Self-reported diagnosis means a person was asked if they have psoriasis and they have responded to indicate that they did. This person might or might not have visited a doctor to receive a diagnosis, but the studies presenting these results do not confirm that a medical review was undertaken.

Visit the GPA website to view, compare and download global prevalence data for individual countries:

www.globalpsoriasisatlas.org/en/explore/prevalence-heatmap



Grand Challenges in Global Skin Health



The Grand Challenges in Global Skin Health is a concerted effort by the International League of Dermatological Sciences (ILDS) to address the significant burden of skin diseases worldwide.

It focuses on research, education, clinical application, and support at local, national and international levels. This initiative aims to improve the lives of individuals affected by skin

disorders through targeted actions, multidisciplinary collaboration and the formation of international alliances to address specific issues.

The ILDS Grand Challenges in Global Skin Health Committee (GCGSHC) was first created in 2023 and is currently chaired by ILDS President, Professor Henry Lim.

The GPA is the pioneering skin disease Atlas among the Grand Challenges and are key stakeholders, actively contributing towards the development and delivery of this initiative. Following the GPA's success, there are now four additional skin disease Atlases: Global

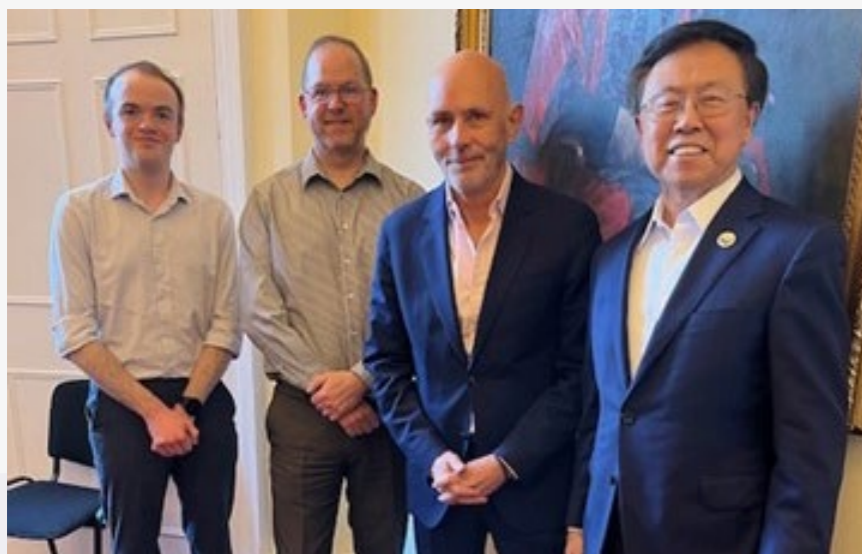
Atopic Dermatitis Atlas (GADA), Global Hidradenitis Suppurativa Atlas (GHISA), Global Vitiligo Atlas (GLOVA) and Global Alopecia Areata Atlas (GAAA). The five Atlases are now working in close collaboration with the ILDS, and each other, to support the aims of the initiative.

78th World Health Assembly

In May 2025, the 78th World Health Assembly adopted a resolution recognising skin diseases as a global health priority. Led by Côte d'Ivoire and co-sponsored by Colombia, China, Egypt, Micronesia, Nigeria, and Togo, the resolution marked a transformative step toward addressing the needs of over 2 billion people affected by skin conditions worldwide.

This milestone moves to elevate skin health on the global public health agenda. It comes a decade after the launch of the ILDS Grand Challenges in Global Skin Health initiative sought to address the burden of skin disease and their underrepresentation in global health agendas, furthering our collective mission.

The GCGSHC will be working to support World Health Organization initiatives in the coming years as part of the resolution.



Left to right: Tom Rogers, Professor Darren Ashcroft, Professor Chris Griffiths and ILDS President Professor Henry Lim

<https://www.ilds.org/what-we-do/project-and-programme/grand-challenges-in-global-skin-health>

Grand Challenges Revisited

The GPA along with GADA, GHISA and GLOVA have collaborated on an article, published in the British Journal of Dermatology in September 2025. The article outlines how the ILDS Grand Challenges in Skin Health initiative, through the work of the skin disease Atlases, can fill important skin disease burden data gaps, empower patients and reduce stigma, making a real difference to millions of people worldwide.

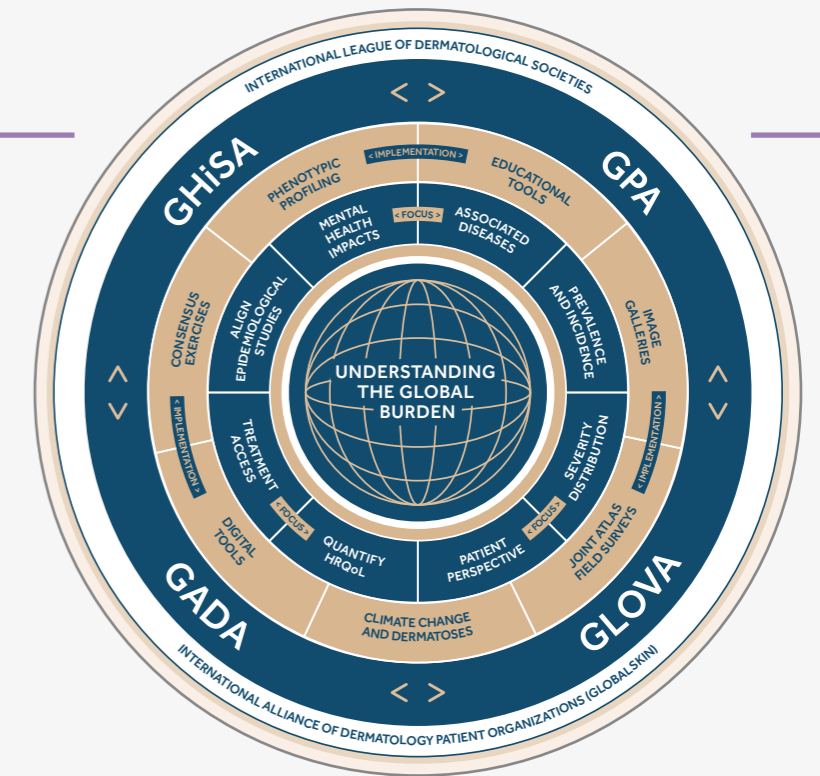
Year in Review

The last year has been a busy and productive year for the GCGSHC, featuring multiple conferences, events, and a joint publication in the British Journal of Dermatology.

Following a successful Grand Challenges Committee Strategy Planning meeting in February, the committee attended the European Academy of Dermatology and Venereology Congress in September 2025.

During the Congress, the GCGSHC hosted the Inaugural Global Skin Disease Atlases Symposium. The Symposium was a marked success, featuring presentations from the Atlas Directors of the GPA, GADA, GHISA and GLOVA. Further symposiums are planned at major international dermatology conferences in the next year.

In October 2025, the GCGSHC convened in London for a 2-day Grand Challenges Summit hosted by the ILDS, featuring a day of strategy and planning meetings and a second day of



<https://academic.oup.com/bjd/article/194/1/146/8268203>



Atlas Directors. Left to Right: Professor Carsten Flohr (GADA), Professor Gregor Jemec (GHISA), Professor Chris Griffiths (GPA) and Professor Khaled Ezzedine (GLOVA)

presentations to industry partners. The Summit convened senior leaders from dermatology research initiatives and the life-science industry to explore collaborative approaches to advancing global skin health.

The programme featured presentations on the WHA Resolution and across the ILDS Grand Challenges portfolio, including the five Atlases, alongside an overview of cross-cutting Grand Challenges projects. The GCGSHC was also excited to be joined for the first time by the newly established Global Alopecia Areata Atlas (GAAA), directed by Dr Maria Hordinsky. This was an excellent Summit strengthening the multidisciplinary collaborations tackling key issues in global skin health.

The Grand Challenges group are excited for the year ahead with multiple events and collaborative projects planned, including the first combined-Atlas epidemiological field study in the Philippines.



Professor Chris Griffiths presenting at the inaugural Global Skin Disease Atlases Symposium



Atlas teams and ILDS at the Grand Challenges Summit

IPC Fellowship 2025



In 2025, the GPA team hosted Dr Doriane Sabushimike, a Dermatologist from Burundi, during her IPC Research Fellowship.

The GPA team first met Dr. Sabushimike during their visit to Moshi, Tanzania, in 2019. At the time, Dr Sabushimike worked at the Regional Dermatology Training Centre in Moshi where the GPA based themselves whilst conducting a pilot survey on psoriasis epidemiology. Dr. Sabushimike completed her residency in Dermatovenereology at Regional Dermatology Training Center in 2021 and is now a Dermato-Venereologist at Hopital Militaire de Kamenge in her home country of Burundi.

Dr. Sabushimike is also the founding member of the International Alliance for Global Health Dermatology (GLODERM) Trainee Committee and graduated from the GLODERM mentorship program in 2023.

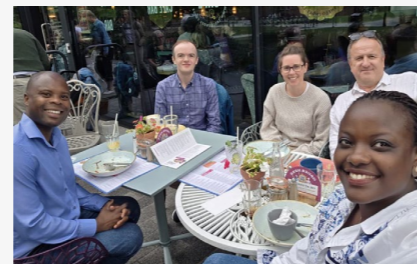
During her fellowship, Dr Sabushimike worked in collaboration with the GPA on a manuscript highlighting the dermatological diseases seen at Kamenge Military Hospital. Dr Sabushimike also supported the GPA on the expansion of the National Coordinator network in Africa, to help promote our mission and enhance our research efforts across the continent.

In August, as part of Dr Sabushimike's placement, the GPA welcomed her to Manchester and London.

During her placement Dr Sabushimike first spent time with GPA team in Manchester, working on current research with GPA Research Director



Professor Darren Ashcroft and GPA Research Fellow Dr Alison Wright as well as working with GPA Research Associate Dr Paul Dimmock and GPA Programme Manager Tom Rogers on the continued expansion of the GPA's Coordinator network to enhance current research. During her time in Manchester Dr Sabushimike also



met like-minded colleagues at the University of Manchester and local NHS Trusts, shadowing dermatology clinics at local hospitals and taking the time to see the sights, attending a football match with some of the GPA team, visiting local museums and travelling to Liverpool for the day.



During the second half of Dr Sabushimike's placement, she travelled to London to spend time with GPA Director Professor Chris Griffiths. Dr Sabushimike shadowed Professor Griffiths during his clinics as well as visiting GPA collaborating organisation, the ILDS, and colleagues at the Global Atopic Dermatitis Atlas (GADA).

It was a pleasure hosting Dr Sabushimike during her IPC Research Fellowship; the GPA team look forward to continuing to work with Dr Sabushimike over the coming months.



I had a truly enriching experience during my International Psoriasis Council (IPC) fellowship placement at the Global Psoriasis Atlas (GPA).

During this period, I contributed to strengthening the GPA Africa Network and I also gained valuable clinical exposure at King's College Hospital with Prof. Chris Griffiths and Salford Royal Hospital with Dr. Zenas Yiu, particularly in psoriasis clinics. In parallel, with the supervision of Prof. Chris Griffiths and Prof. Darren Ashcroft, I analysed data from 772 patients, producing the first detailed hospital-based overview of dermatological disease in Burundi. I also had the opportunity to work on a manuscript with Dr Elise Kleyn (Salford Royal) focusing on psoriasis and depression.

Through the GPA I also met the International League of Dermatological Societies (ILDS) management team, allowing important discussions on global skin health priorities and future collaborations. I am deeply grateful to the GPA and IPC teams and look forward to continued collaboration to advance skin health and psoriasis care in Africa.

Dr Doriane Sabushimike



IPC Fellowship 2026



The GPA are delighted to announce that Dr Shir Azrielant has been assigned to the GPA as our 2026 IPC Research Fellow.

Dr Azrielant is a consultant dermatologist and Director of Dermatology Inpatient Services at Tel Aviv Sourasky Medical Center, Israel, and a Lecturer at the Faculty of Medicine at Tel Aviv University.

Her clinical and translational research focuses on inflammatory and autoimmune skin diseases, with a particular emphasis on psoriasis. Her current work centres on psoriasis comorbidities, metabolic pathways in disease, and histology as a biomarker of inflammatory skin disorders.

The GPA has worked with Dr Azrielant previously through her contributions to the SKINSCAPE study. The team is excited to be working with her again in 2026.

Digital Developments and Communications

The Global Psoriasis Atlas project has established itself as a recognised and respected brand across a variety of digital platforms.

GPA data, statistics and publications are being used in various lectures around the world. This shows that the GPA data is now the trusted, robust, go-to data on psoriasis.

The GPA has used its online platforms to share information and build rapport and trust with followers. The GPA launched its X account in October 2018, followed by Instagram, Facebook and YouTube in 2019 and LinkedIn in 2021. During that time, our strategy has been to have a consistent online presence by utilising a bank of GPA branded content that we share with followers across all platforms.

The GPA team regularly assesses analytics across all digital outputs with the aim of increasing followers, engagement, impressions and brand awareness. We have seen steady increases in all of these metrics on the GPA website, social media and subscription to the GPA newsletter.

GPA Social Media

The Global Psoriasis Atlas project has established itself as a recognised and respected brand across a variety of digital platforms.

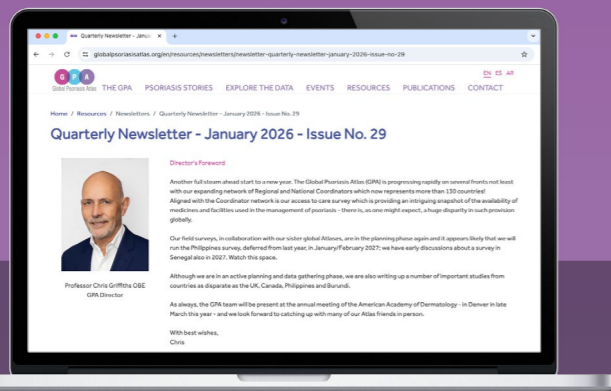
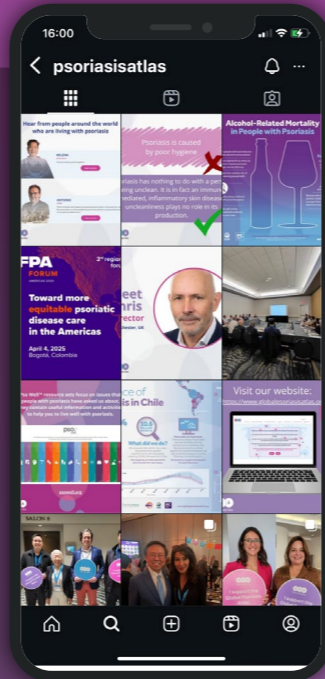
 **1,920 followers**

 **2,100 followers**

 **2,859 followers**

 **1,125 followers**

Please follow [@PsoriasisAtlas](#)



GPA Newsletter

The GPA team produce a quarterly newsletter sharing the latest news, publications, collaborations and research updates from the past 3 months. These updates include work undertaken by the GPA core team as well as updates from our regional and national coordinators worldwide.

The GPA newsletter is published on the GPA website and, if subscribed, you will receive the newsletter directly to your email inbox on the day of publication. Keeping our followers, sponsors, collaborators and friends up to date on all things GPA!



Subscribe to our newsletter for regular updates on research and project progress from Professor Chris Griffiths and the GPA team



GPA Website Analytics 2025-2026

Number of visitors

English **5,504**

Spanish **1,043**

Arabic **314**

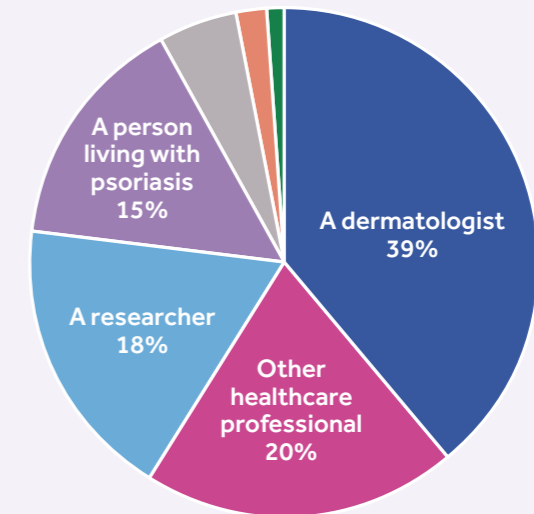
Average visit duration

English **3m 53s**

Spanish **2m 27s**

Arabic **1m 45s**

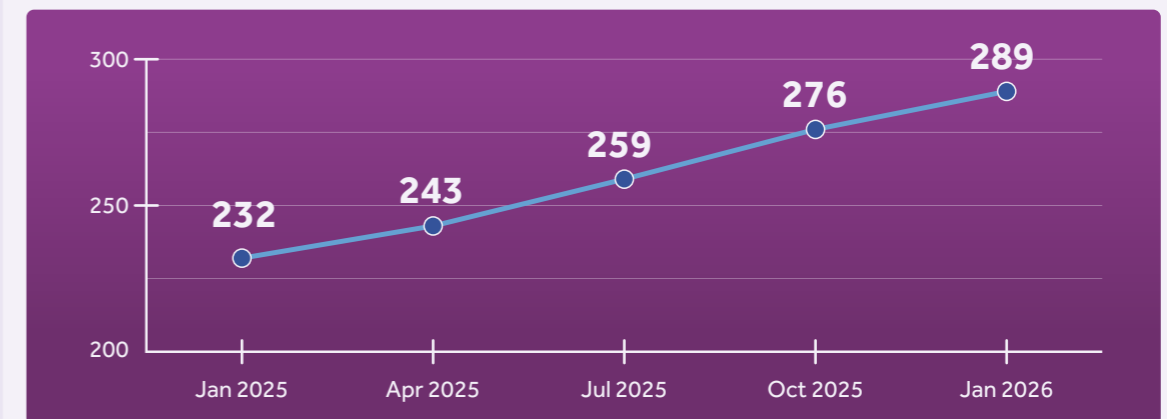
Demographic of visitors to the GPA website (EN/ES/AR)



	Visits	%
A dermatologist	734	39%
Other healthcare professional	650	20%
A researcher	571	18%
A person living with psoriasis	148	15%
A member of the general public	136	5%
A person working for a decision-or-policy making organisation (e.g. government, UN, health authority, etc.)	126	2%
A person working for a patient advocacy association or charitable organisation†	124	1%
TOTAL	1880*	100%

*Total number of visitors who clicked on one of the options in the pop-up.
† This option was implemented on 20.10.2025.

GPA Newsletter subscriptions



News Bulletin



IFPA Forum 2025

In April 2025, IFPA hosted the IFPA Forum 2025 for the Americas in Bogotá, Colombia. This was the third regional forum of its kind, following previous forums held in Europe in 2022 and Asia in 2023. The Forum focused on topics including reducing inequities in access to care and improving the quality of life for millions living with psoriasis.

Dr César González, GPA Regional Coordinator for Colombia, attended the forum on behalf of the GPA. Dr González contributed as a panellist to the roundtable discussion 'Under the skin: psoriatic disease is a gateway

to other non-communicable diseases (NCDs)'. The session emphasised the link between psoriatic disease and other NCDs, highlighting that better management of psoriatic disease can have far-reaching benefits for overall health. It also underscored the urgency of research and collaborative action to address current care gaps and to drive policy changes that improve outcomes across the region. Gaps explored included barriers to early diagnosis and access to quality treatment for people with psoriatic disease and screening for NCDs.

Thank you to Dr González for attending and representing the GPA at this important event.

GPA Away Day 2025

On Friday 18th July, the GPA team held their Away Day at Shrigley Hall Hotel in Cheshire.

The day started with a sunny walk around the beautiful grounds of Shrigley Hall and its golf course. The team enjoyed spotting the University of Manchester and other major landmarks in the distance.



The day consisted of meetings reviewing current research, discussing new projects and outlining strategic plans for the future of the GPA.

GPA Researchers shared updates on their ongoing work, GPA Programme Manager Tom Rogers gave an overview of the continued growth of the Coordinator Network along with updates on plans for the next field study in the Philippines and Administrator Alice Silk briefed the team on GPA communications as well as upcoming events and conferences.

It was a productive day full of positive and progressive discussions.

The GPA Team (left to right): Tom Rogers (Programme Manager), Dr Alison Wright (Research Fellow), Dr Paul Dimmock (Research Associate), Dr Alexandre de Fatima Cobre (Research Associate), Professor Chris Griffiths OBE (Director), Alice Silk (Administrator), Professor Darren Ashcroft (Director of Research).

Psoriasis Association Annual Meeting 2025

On Saturday 28th June, members of the GPA team attended the Psoriasis Association Annual Meeting in London. This year's theme was 'Right Treatment: Right Time' with GPA Director of Research, Professor Darren Ashcroft, delivering a presentation on 'Psoriasis in the UK Today: Who Gets the Condition and When', sharing key findings from the GPA's latest epidemiological research.



Professor Darren Ashcroft presenting at the Psoriasis Association Annual Meeting 2025

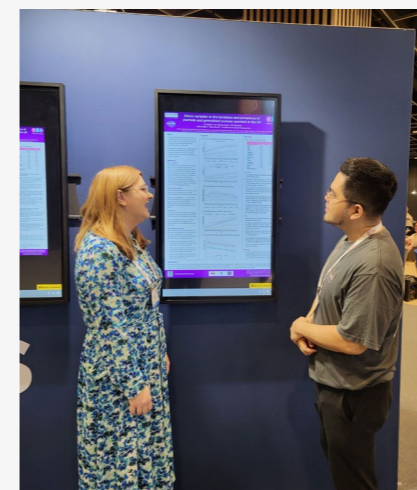
The day featured a series of engaging talks and stimulating panel discussions covering topics such as epidemiology, treatment, diet, and both ongoing and upcoming research projects.



The GPA team look forward to attending and contributing to the Psoriasis Association Annual Meeting in Manchester this year.

European Academy of Dermatology and Venerology Congress 2025

Professor Chris Griffiths, Professor Darren Ashcroft, Dr Alison Wright and Tom Rogers attended the EADV Congress in Paris in September. Dr Alison Wright presented a poster on ethnic variation in the incidence and prevalence of psoriasis and generalised pustular psoriasis in the UK. This poster explained the work the GPA have been conducting, updating UK incidence and prevalence estimates, and examining how rates vary across different ethnic groups which had not been explored previously.



Dr Alison Wright presenting at EADV Congress 2025.

Dr Wright highlighted: "We show that psoriasis and GPP varies by ethnicity in the UK: plaque psoriasis is more common among White individuals, while GPP is more prevalent among Asian individuals. Despite overall improvements in life expectancy over time, people with psoriasis or GPP continue to face a higher risk of all-cause mortality compared to those without these conditions."

All GPA posters can be viewed on the GPA website [Global Psoriasis Atlas – GPA Resources](#).



GPA team, Collaborators, and Coordinators at the GPA Steering Committee meeting EADV Congress 2025.



EADV Congress 2025, Paris.

During the Congress the team had many productive and exciting discussions with colleagues from around the world.

The GPA Steering Committee meeting was held on Saturday 20th September. Professor Griffiths provided an update on the GPA's recent developments. Professor Ashcroft presented a comprehensive research update including plans for the next field study and Tom Rogers covered the GPA's

expanding coordinator network and the programmes progress in communications and funding.

On Saturday 20th September the four Atlases (Psoriasis (GPA), Atopic Dermatitis (GADA), Hidradenitis Suppurativa (GHiSA) and Vitiligo (GLOVA)) joined together for the inaugural Global Skin Disease Atlases Symposium demonstrating the importance of the Atlases in advancing global skin health.

Grand Challenges in Global Skin Health meetings



Atlas teams and ILDS at the Grand Challenges in Global Skin Health meeting



In October, the ILDS brought together all Atlases (GPA, GADA, GHISA, GLOVA and the Global Alopecia Areata Atlas (GAAA)) in London for 2 days of meetings.

Day 1 consisted of update and strategy meetings. Day 2 the teams met with industry representatives to discuss how they can support and strengthen the vital work of the Atlases.

The ILDS were delighted to bring together all the Atlases each a key part of the initiative to address the significant burden of skin diseases worldwide.

IPC 2026 Psoriasis Masterclass for Africa and Eastern Mediterranean

From Friday 30th January 2026 to Friday 27th February 2026, the IPC delivered a series of virtual psoriasis masterclasses, delivered by world-renowned experts, for dermatologists across African and Eastern Mediterranean regions.

This Masterclass involved a ten-hour intensive educational program designed for early-to-mid-career dermatologists and third or fourth-year

psoriasisCouncil.org/our-work/regional-outreach/regional-master-class



BSI co-founders Professor Chris Griffiths and Dr Su Lwin

Burma Skincare Initiative (BSI) – 2nd International Dermatology Meeting

Yangon, Myanmar 27 February – 1 March 2026

The Burma Skincare Initiative (BSI), a UK based charity co-founded by Prof Chris Griffiths and Dr Su Lwin, dedicated to equitable access to dermatological care for the people of Myanmar, was pleased to partner with the GPA, L’Oreal, Incyte, DEBRA-UK and Aspire to hold its 2nd International Dermatology Meeting (the first was in February 2020) in Yangon, Myanmar. The meeting was a resounding success and brought together 200 dermatologists, GPs, general physicians and nurses for three days of focused teaching, hands-on training, and collaborative planning at the Chatrium Hotel, Yangon to strengthen dermatology services across Myanmar.

Day 1 – Atopic Dermatitis & Practical Skills

Sessions led by Dr David Paige (London), Prof Sara Brown (Edinburgh), and Sarah Copperwheat (Bedford) covered paediatric and adult atopic dermatitis, vitiligo, and challenging management cases. Afternoon nurse-led workshops from Lucy Moorhead (London) and Sarah Copperwheat on topical therapy and phototherapy provided practical



Attendees and speakers at the BSI International Dermatology Meeting 2026

skill-building, followed by teaching from Dr Ian Coulson (Burnley) on general dermatology.

Day 2 – Psoriasis, Nursing Leadership & Core Dermatology

The morning focused on psoriasis in adults and children, followed by leadership training with Prof Naomi Chambers (Manchester). Afternoon sessions highlighted the essential role of dermatology nurse specialists and holistic patient care, with further teaching from Dr Ian Coulson on common clinical pitfalls.

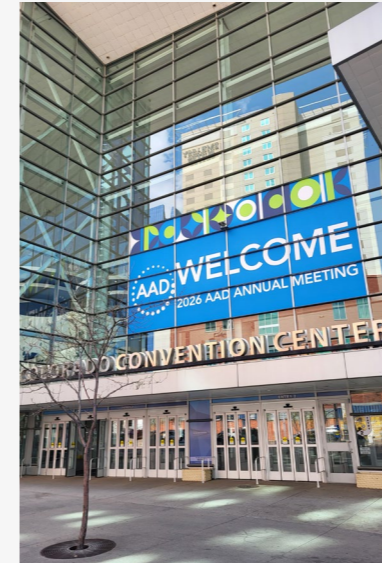
Day 3 – Global Dermatology & Research Development

The final day featured updates on the GPA and Global Atopic Dermatitis Atlas, alongside planning for Myanmar’s national Skin Disease Survey. Leadership and research-focused sessions continued with Prof Naomi Chambers, Dr Su Lwin (London), and Prof Sara Brown, concluding with a forward-looking discussion on next steps.

Overall Impact

The meeting strengthened clinical expertise, expanded practical skills, and advanced collaborative research and leadership initiatives—reinforcing the Initiative’s commitment to improving equitable, evidence-based dermatological care across Myanmar.

The GPA is honoured to regularly be a part of the IPC Regional Masterclasses to help support the education of early career health care providers and helping to strengthen expertise in understanding psoriasis within their regions. For more information, visit the IPC Regional Masterclass webpage below.



Colorado Convention Centre



Joint Atlas Meeting at the AAD Annual Meeting 2026



Grand Challenges in Global Skin Health Symposium speakers



GPA Steering Committee Meeting at the AAD Annual Meeting 2026

American Academy of Dermatology Annual Meeting 2026

Professor Darren Ashcroft and Tom Rogers attended the AAD Annual Meeting in Denver, Colorado in March 2026. The meeting was a valuable opportunity to connect with collaborators, Coordinators and funders.

On Friday 27th March the team was actively involved in the Joint Atlas Meeting hosted by the ILDS. During this meeting, the Atlas teams discussed plans for joint projects and field studies scheduled for the coming year.

The GPA hosted its Steering Committee Meeting and Funders’ Briefing on Saturday 28th March 2026. During

the Steering Committee Meeting the team welcomed representatives from 16 different countries. Professor Ashcroft provided an update on recent GPA activities and ongoing and future research, including plans for the Phase IV, and Tom Rogers gave an update on the GPA’s funding and communications.

On Monday 30th March, the four Atlases came together to host the second Grand Challenges in Global Skin Health Symposium. The symposium included incredibly insightful and impactful sessions featuring presentations from the ILDS, the Skin Health Observatory and all four global skin disease atlases, highlighting the importance of the Atlases in advancing global skin health.

LEO Foundation

The GPA team are grateful to The LEO Foundation for their funding support during Phase I, II and III of the GPA programme.



LEO FOUNDATION



Dedication to Professor Wayne Gulliver

The GPA team would like to take this opportunity to commemorate Professor Wayne Gulliver. Professor Gulliver was not only a GPA Regional Coordinator and collaborator but a passionate advocate of the GPA and a treasured colleague and friend to many of the GPA team. It was a great sadness to hear of his sudden death in September 2025 and we would like to extend our deepest sympathies to his family, friends and colleagues.

Professor Gulliver was a highly respected figure in global dermatology and psoriasis research. As a Professor Emeritus at Memorial University of Newfoundland and former Chair of the Discipline of Medicine, he spent over 35 years advancing clinical research and education in dermatology. He served as Principal Investigator in more than 250 clinical trials, authored over 200 peer-reviewed publications, and held leadership roles in both industry and academia.

Professor Gulliver’s legacy will live on in the dermatology community and beyond.

Looking Forward

Collaboration

During Phase IV (April 2026 - March 2029), the GPA team will be strengthened further by enhanced collaboration with our partner organisations, expanding Coordinator Network, and our planned collaborative work with the ILDS Grand Challenges in Global Skin Health initiative.



Team

The GPA has been privileged to collaborate with a dedicated and highly motivated global team that has been instrumental in driving each phase of the programme's growth. Team members have contributed their time and expertise with a consistently high level of professionalism, commitment and skill.

The research team brings together a broad and complementary range of expertise, with extensive experience in dermatology and epidemiology.

This collective capability has been critical to delivering high-quality outputs and advancing the GPA's mission and vision. The administration team provides strong operational oversight, ensuring efficient coordination, timely delivery of milestones and effective use of resources. This support enables the research team to focus on high-value scientific outputs whilst maintaining accountability and quality across all programme initiatives.

Objectives – Areas of Research Focus for Phase IV

The priority research areas for the next phase of the GPA include:

Epidemiology of Psoriasis

Conduct new epidemiological studies in selected countries, based on existing knowledge gaps, using electronic health records or field work to collect data.

Conduct new epidemiological studies on Generalised Pustular Psoriasis (GPP).

Recognising the Comorbid Disease Burden of Psoriasis

Conduct new studies to improve knowledge about the comorbid disease burden of psoriasis.

Improving the Early Diagnosis of Psoriasis

Undertake studies of clinical diagnostic criteria with our international collaborators; Evaluate use of training tool for the clinical diagnosis of psoriasis in selected countries, leading to increase in early diagnosis of psoriasis.

Development of the diagnostic training tool as an online resource to be hosted on the GPA website to support the training of health care professionals on early and correct diagnosis of psoriasis.

Access to Care

Conduct studies to assess the availability, accessibility and quality of specialised care.

Conduct new studies to understand the impact of living with psoriasis including the impact on health and capability, wellbeing, productivity, access to treatments, and psychosocial burden.

Impact

The GPA team continue to prioritise high impact research outputs and the broad dissemination of work at notable national and international conferences. As the GPA matures

as an organisation, we are putting increasing focus on our research impact – specifically the demonstrable contribution that the GPA's research is making to public policy and global health outcomes beyond academia. This emphasis aims to support the

translation of research into tangible social, economic and quality of life improvements for individuals living with psoriasis around the world.



Professor Darren Ashcroft and Community Workers Examining Mtyholo Village Map

Epidemiological Field Studies – Phase IV

Working with our collaborating organisations and GPA Coordinators, we will conduct epidemiological field studies in multiple countries during Phase IV.

This work will utilise existing on the ground infrastructure. We will expand on prior epidemiological mapping in the country/region and interrogate relevant health records. Our collaborating

organisations will provide links and support in countries where field studies occur. IFPA will participate in field visits in countries where there is no member association, with the purpose of establishing a patient organisation.

During these field studies, the GPA is dedicated to creating lasting impact and establishing a legacy of

knowledge and support within the communities involved. The work fosters a rich exchange of expertise between local and international teams and offers a unique opportunity for meaningful cross-cultural learning.

We are currently exploring the potential for this fieldwork to take place in Southeast Asia and Africa.



Southeast Asia



Africa



Western Pacific

Engagement

We welcome new connections and partnerships!



Here are some of the ways you can get involved;

- Provide financial support
- Collaborate with us
- Support the collection of data on the global burden of psoriasis
- Support our research
- Engage with us on social media

Furthering the high quality research of the GPA requires the support of industry, organisations with relevant data sets, and collaboration across regions and countries.

The GPA Partnership Brochure provides details around the types and levels of financial support packages and highlights unique opportunities for involvement in the project.



For further information contact, GPA Administrator, Alice Silk: alice.silk@manchester.ac.uk

Would you like to learn more about the work of the GPA?



Visit our website
www.globalpsoriasisatlas.org

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The work of the Global Psoriasis Atlas would not be possible without the financial support we receive from our industry partners.

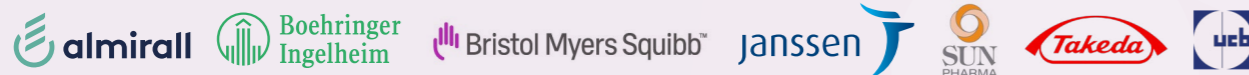
Partnership is a crucial step towards achieving the ambition of the GPA; to ensure that people around the world have access to the best available care and treatment for their psoriasis. We recognise that innovative and strategic partnerships with organisations are key to delivering our milestones and achieving the aims of the Atlas.



LEO FOUNDATION

The **LEO Foundation** was the lead supporter of the Global Psoriasis Atlas and we are grateful for the core, key funding that it has provided throughout Phase I, II and III.

The GPA work in Phase III (2023–2026) has been made possible thanks to grants and sponsorship from Almirall, Boehringer Ingelheim, Bristol Myers Squibb, Janssen, Sun Pharma, Takeda and UCB.



Other sources of funding for Phase III: Institute of International Education's Scholar Rescue Fund (IIE-SRF), The Psoriasis Association, International Science Partnerships Fund (ISPF)



Publications, Presentations and Abstracts

Publications

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Abstracts and Poster Presentations

Ethnic Variation in the Incidence and Prevalence of Psoriasis and Generalised Pustular Psoriasis in the UK, Wright AK, de Fatima Cobre A, Dimmock PW, Griffiths CEM, Ashcroft DM, European Academy of Dermatology and Venereology Congress, Paris 2025

The Incidence and Prevalence of Psoriasis (2001–2020) By Community in Newfoundland and Labrador, Canada. Gulliver W, Bclair O, Lester K, Gulliver S, Wright A, Griffiths CEM, Ashcroft DM, Rahman P, 100th CDA Annual Conference, Halifax Convention Centre, Canada 2025

Presentations

Global Health Dermatology, Professor Chris Griffiths, A Day at St. John's Dermatology Taster Course, London, UK, February 2025

Future of dermatology/psoriasis treatment, Professor Chris Griffiths, Nordic Congress of Dermatology and Venereology, Helsinki, Finland, May 2025

PSORT, the Global Psoriasis Atlas, Professor Chris Griffiths, UCB Immunology Medical Forum, London, UK, May 2025

Psoriasis in the UK today, Professor Darren Ashcroft, Right Treatment: Right Time Psoriasis Association Annual Conference, London, UK, June 2025

Global Psoriasis Atlas, Professor Chris Griffiths, Annual European Academy of Dermatology and Venereology (EADV), Paris, France, September 2025

Global Psoriasis Atlas Industry Presentation, Professor Chris Griffiths, ILDS Grand Challenges in Global Skin Health Industry Meeting, London, UK October 2025

Lessons learnt from the Global Psoriasis Atlas, Professor Chris Griffiths, Johnson & Johnson Symposium, Bulgarian Annual National Conference "Sofia Dermatological Days", Bulgaria, November 2025



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