Exacerbation of Psoriasis after Treatment with Alpha-Interferon

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Dear Sir,

At the International Symposium on Interferons and Related Lym-phokines held in Berlin 1989, Harrison [1] described the exacerbation of psoriasis after treatment with α -interferon. As we have observed a similar behaviour of the psoriatic process under treatment with α -interferon we would like to briefly present our experience with a comment on the possible explanation for this phenomenon. We have treated a 54-year-old male patient with hairy cell leukaemia and psoriasis with recombinant $\alpha 2b$ -interferon. Therapy with α -interferon (Intron A; Schering) in doses of 3 MU s.c. thrice weekly was started because of the activation of malignant disease. The condition had been stable previously for 9 years not requiring specific or supportive therapy (splenec-tomy was performed early at the time of diagnosis). A psoriasis with skin and joint involvement was established 3 years from the diagnosis of hairy cell leukaemia. The disease was stationary with usual topical therapy and occasionally nonsteroid analgesics. A month after starting α -interferon treatment, which was already showing haematological improvement, the exacerbation of psoriatic skin manifestations occurred with arthralghias, limitations of movement in affected joints and swelling of small finger joints. This condition did not conform with a pattern of typical interferon-related side-effects.

Interferon treatment was discontinued for a month with a substantial improvement of psoriasis entering again a stationary phase. After this period α -interferon was restarted, and again exacerbation of psoriasis was noted. This resulted in the definite exclusion of the patient from α -interferon treatment for hairy cell leukaemia. The cause for this finding is not clear. At the same symposium a study detecting various interferons in psoriatic skin was presented providing data on the presence of α -interferon in the active disease, while it was absent in the stable phase or normal skin [2]. Searching for other mechanisms that could mediate/regulate a psoriatic process, an increased adrenal activity during interferon therapy should be considered [3], which, we believe, deserves further clarification.

References

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