

PSORIATIC ARTHRITIS FLARE ACTION PLAN

A **FLARE** is when you have worsening symptoms that are long-lasting, including skin irritation and/or joint pain: A flare may look like this:







More joint pain and swelling

Do you think that you are having a flare at this time?

If yes, how long have you been feeling this way?

Less than one week

Between one and two weeks

Between two and four weeks

Longer than three months

Possible Causes for A Flare:











Care Plan For Mild Flare -

every day.

A **MILD** flare may look like this: Tender/swollen joints, harder to complete daily activities, more tired, mild pain **Recent triggers like:** stress, medication change, injurty, poor diet, illness

Self-Care Activities: APPLY HEAT (for muscles) or ICE (reduces swelling) to see if these help your sore joints. FIND exercises that take care of you. This may include physical therapy or relaxation exercises. EAT healthy and keep it simple, try to have a rainbow of foods CHECK-IN and take care of your mental health.

Medicine for Mild Flare:

If your physician has told you it is OK to take NSAIDS (Non-Steroidal Anti-Inflammatory Drugs) to manage joint discomfort and pain, you can try taking this as directed:

Ibuprofen (Motrin, Advil) Diclogenac (Voltaren) Naproxen (Aleve) Meloxicam (Mobic)

If you are already on one of these drugs do NOT take more than the maximum dose and DO NOT combine two types of NSAIDS

Care Plan For Moderate To Severe Flare -

A **MODERATE** to **SEVERE** flare may look like this: Feeling worse, lasting symptoms that don't respond to the treatments listed above.

WHEN IN DOUBT...REACH OUT!

- ✓ If you need help managing your symptoms
- ✓ If you think you may need a medication change

Rheumatologist Phone Number

Medicine for Moderate to Severe Flare:

Prednisone is sometimes used for more severe flares, although this medicine can have side effects, including making psoriasis flare up as the prednisone is decreased. We can discuss whether prednisone might be helpful for you and can develop a plan for starting and gradually decreasing the dose.

Prednisone is generally not helpful for axial spondyloarthritis/AS.

***Sometimes we may need to change your therapy - this typically requires a visit.

Dermatologist

Phone Number