Psoriasis and Psoriatic Arthritis

This sheet is about having psoriasis and psoriatic arthritis in a pregnancy or while breastfeeding. This information is based on published research studies. It should not take the place of medical care and advice from your healthcare provider.

What is psoriasis and psoriatic arthritis?

Psoriasis is a skin condition in which skin cells grow faster than usual. This can lead to dry, thick patches on the skin. Psoriasis is not contagious, so you cannot catch it from another person. While the exact causes are not known, the immune system is thought to be involved. In addition to changes to the skin, some people with psoriasis will also develop swollen and painful joints, called psoriatic arthritis (PsA). Symptoms of psoriasis and PsA can range from mild to severe.

I have psoriasis and /or psoriatic arthritis. Can it make it harder for me to get pregnant?

Psoriasis and PsA might affect fertility, although not all studies agree. One study did not find an increase in time to become pregnant among women with mild to moderate psoriasis. However, another study of women with moderate to severe psoriasis has suggested that ovarian reserve (the number of eggs stored in the ovaries) might be affected by psoriasis. The women with psoriasis in this study were still able to become pregnant. Effects on fertility might depend on whether symptoms are currently mild or severe, or if there are additional health conditions.

Does having psoriasis and/or psoriatic arthritis increase the chance for miscarriage?

Miscarriage is common and can occur in any pregnancy for many different reasons. It is unclear if psoriasis or PsA increases the chance for miscarriage. One study that looked at 298 pregnancies in women with moderate to severe psoriasis reported that the rates of miscarriage did not differ from the miscarriage rate in the general population. Another study reported a higher rate of miscarriage after the diagnosis of PsA in 37 pregnancies compared to their pregnancies prior to the diagnosis. However, age at time of pregnancy was higher after the diagnosis of PsA, and as women age, the chance for miscarriage can also increase. This, plus the small number of pregnancies looked at, makes it hard to draw conclusions about the chance of miscarriage and PsA.

Does having psoriasis and/or psoriatic arthritis increase the chance of birth defects?

Birth defects can happen in any pregnancy for different reasons. Out of all babies born each year, about 3 out of 100 (3%) will have a birth defect. We look at research studies to try to understand if an exposure, like psoriasis and PsA, might increase the chance of birth defects in a pregnancy.

An article that summarized 5 studies reported that psoriasis did not increase the chance of birth defects. Studies have not been done to see if PsA increases the chance of birth defects.

Does having psoriasis and/or psoriatic arthritis increase the chance of other pregnancy-related problems?

It is not known if psoriasis and/or PsA can increase the chance of other pregnancy-related problems, such as preterm delivery (birth before week 37) or low birth weight (weighing less than 5 pounds, 8 ounces [2500 grams] at birth). Some studies have reported a higher chance of pregnancy-related problems, but other studies have not.

One study reported that women with severe psoriasis were more likely to have a baby with low birth weight, while another study among women with moderate to severe psoriasis reported that they were more likely to have a baby with a heavier birth weight. Some studies have suggested that psoriasis or PsA increases the chance of preterm delivery or pre-eclampsia. Preeclampsia is a serious pregnancy-related condition that can cause high blood pressure and problems with organs, such as the kidneys, which can lead to seizures (called eclampsia). Other studies have not reported an increased chance of these pregnancy complications.

The chance of pregnancy complications might depend on whether the psoriasis and/or PsA symptoms are currently mild or severe. The chance for pregnancy complications can also be affected by the woman's overall health during pregnancy. For example, a study found a higher rate of smoking, depression, diabetes, heart disease, and obesity in

pregnant women with psoriasis. These factors can also increase the chance of pregnancy-related problems. This makes it hard to know if medication, the medical condition being treated, or other factors are affecting the reported results.

Does having psoriasis and/or psoriatic arthritis in pregnancy affect future behavior or learning for the child?

Studies have not been done to see if psoriasis or PsA can cause behavior or learning issues for the child.

I am taking medication for psoriasis and/or psoriatic arthritis. Can I take my medication during pregnancy?

For information on specific therapies, see our medication fact sheets at: https://mothertobaby.org/fact-sheets/ or contact MotherToBaby to speak with a specialist. It is important that you discuss treatment options with your healthcare providers when planning pregnancy, and as soon as you learn that you are pregnant.

How will pregnancy affect my psoriasis and/or psoriatic arthritis symptoms?

Healthcare providers cannot predict how a woman's symptoms might change, if at all, during pregnancy. Women have reported symptoms that improved, stayed the same, or became worse during a pregnancy. In general, it appears that more women report that their disease symptoms improve or stay the same rather than get worse during pregnancy. However, a flare of symptoms after delivery seems to be common.

Breastfeeding while I have psoriasis and/or psoriatic arthritis?

There are no cautions regarding breastfeeding specific to psoriasis or PsA. For information on specific medications, see our fact sheets or contact MotherToBaby. Be sure to talk to your healthcare provider about your breastfeeding questions.

If a man has psoriasis and /or psoriatic arthritis, can it affect fertility or increase the chance of birth defects?

Autoimmune diseases like psoriasis might affect male fertility (ability to make healthy sperm). Certain medications used to treat psoriasis or PsA could also affect the amount of sperm produced, which could make it harder to get a partner pregnant. In general, exposures that men have are unlikely to increase risks to a pregnancy. For more information, please see the MotherToBaby fact sheet Paternal Exposures at https://mothertobaby.org/fact-sheets/paternal-exposures-pregnancy/.

Please click here for references.

MotherToBaby is currently conducting a study looking at autoimmune diseases like psoriasis and psoriatic arthritis, and the medications used to treat them in pregnancy. If you are interested in learning about this study, please call 1-877-311-8972 or visit https://mothertobaby.org/join-study/.

Questions? Call 866.626.6847 | Text 855.999.3525 | Email or Chat at MotherToBaby.org.

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