Easing the Economic and Clinical Burden of Psoriasis and Psoriatic Arthritis: The Role of Managed Care

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Sample

Sample of Online Posttest

Choose the best answer for each of the following:

- 1. BB is a 52-year-old woman with newly diagnosed psoriasis. Her body surface area involvement is 3%, with small characteristic lesions affecting her back, elbows, and scalp. How would you classify the severity of her psoriasis?
 - A. Very mild
 - B. Mild
 - C. Moderate
 - D. Severe
- 2. HL is a 49-year-old man who was just diagnosed with psoriatic arthritis (PsA) based on the presence of psoriatic skin lesions, dactylitis, rheumatoid factor negativity, and nail disease. Which of the following should guide treatment decisions for HL?
 - A. The first PsA disease domain to manifest
 - B. The most recent PsA disease domain to manifest
 - C. His most severe PsA disease domain
 - D. His least severe PsA disease domain

- 3. For patients with PsA, tumor necrosis factor (TNF)-a inhibitors are preferred therapies for long-term use because these agents:
 - A. Have a low risk of serious adverse effects
 - B. Are no more effective when combined with methotrexate
 - C. Reduce the risk of progressive joint destruction
 - D. Are associated with low out-of-pocket costs to patients
- 4. LA is a 43-year-old woman with significant psoriasis and prominent psoriatic nail disease. Which of the following is recommended as first-line therapy?
 - A. Nonsteroidal anti-inflammatory drugs
 - B. Corticosteroid intralesional injections
 - C. Traditional disease-modifying antirheumatic drug therapy
 - D. Biologic therapy

- 5. Which of these biologic drugs is available only as an intravenous infusion administered over 1 to 2 hours and, therefore, may be the least desirable option for a patient who prefers a subcutaneous or oral route of administration?
 - A. Infliximab
 - B. Apremilast
 - C. Golimumab
 - D. Ustekinumab
- 6. Three out of the 5 current TNF-a biologic drugs are approved for psoriasis and PsA. However, although their clinical effects on PsA are very similar, there are significant differences in their effects on cutaneous psoriasis. Which of the following biologic drugs is the least effective in psoriasis clinical trials?
 - A. Secukinumab
 - B. Ustekinumab
 - C. Ixekizumab
 - D. Etanercept
- 7. Pharmacy costs in moderate to severe disease compared with mild disease are:
 - A. Equal
 - B. Twice as great
 - C. Five times greater
 - D. Ten times greater

- 8. Psoriasis imparts a profound economic impact on patients, payers, and employers. Which of the following was found by the National Psoriasis Foundation survey to determine that economic impact?
 - A. Loss of productivity and decreased quality of life
 - B. Productivity loss related to presenteeism
 - C. Productivity loss related to absenteeism
 - D. Decreased productivity and unemployment
- 9. Because of the associated acquisition costs and administration requirements, managed care organizations must determine whether to cover certain injectable biologic drugs for patients with psoriasis and PsA. Important considerations from a managed care perspective include all of the following EXCEPT:
 - A. Ability to produce off-treatment remissions
 - B. Ability to improve patients' quality of life
 - C. Comorbid conditions
 - D. Availability of biosimilar
- 10. Drug utilization reviews conducted by managed care professionals and led by specialty pharmacists can help reduce costs by all of the following EXCEPT:
 - A. Preventing medication disruptions
 - B. Providing the least expensive care to the most severely affected patient
 - C. Increasing guideline-directed care
 - D. Providing automated reminders to physicians to order laboratory tests