

Guide on Recognizing and Treating Generalized Pustular Psoriasis

Generalized pustular psoriasis (GPP) is a rare form of pustular psoriasis that can be life-threatening. Patients can present with widespread sterile pustules, pain, scaling, erythema, itching, burning, and fatigue, as well as systemic symptoms of leukocytosis, fever, and chills. GPP may be associated with a prior diagnosis of psoriasis or genetic mutations such as the *IL36RN* mutation.

Skin Tone

Light

A

D

Medium

B

E

Dark

C

F

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Treatment includes supportive care, initiating therapies with rapid onsets of action, monitoring closely, and potentially using topical agents as adjunct therapy.

Therapy Options

FDA Approved	Non-FDA Approved		
Biologic - Spesolimab (IL-36 inhibitor) Mechanism of action: Binds to and blocks IL-36 receptor, preventing proinflammatory and profibrotic pathways Dose: 900 mg IV once; repeat after 1 week for persistent flare Adverse events (>5%): Infections Pearls: Must dispense with FDA-approved patient medication guide	Topical - Moisturizers - Coal tar - Salicylic acid - Calcineurin inhibitors - Tazarotene - Corticosteroids - Vitamin D analogues	Oral - Cyclosporine - Acitretin - Corticosteroids* - Methotrexate	Biologic - TNF inhibitors: infliximab - IL-17 inhibitors: brodalumab, ixekizumab, secukinumab - IL-23 inhibitors: guselkumab, risankizumab

*Use caution, as abrupt withdrawal can cause or worsen GPP.