

**When planning a family, it's natural to wonder how psoriatic disease might affect pregnancy and your future children. Whether you are the person with psoriasis or psoriatic arthritis, or your partner has the condition, understanding the latest research and advice can help you make informed decisions.**

## **How does pregnancy affect psoriatic disease?**

For many women with psoriatic disease, symptoms improve during pregnancy. This is because pregnancy causes changes in the immune system and hormones that can calm inflammation. About half of women with psoriasis see their skin get better while pregnant. However, after the baby is born, many experience a flare-up where symptoms come back worse than before. The same can happen with psoriatic arthritis, although effects are less predictable, and joint symptoms may sometimes worsen during or after pregnancy.

## **Potential risks for pregnancy**

Having active psoriatic disease during pregnancy can increase risks for both the mother and baby. Inflammation related to the condition can affect the placenta and the baby's growth, potentially leading to low birth weight or early delivery. Women with psoriatic disease also often face other health challenges like obesity or diabetes, which can add risk. Managing disease activity well before and during pregnancy is important to reduce such complications.



## **Planning pregnancy**

Many usual treatments for psoriasis and psoriatic arthritis need adjusting when planning pregnancy and during pregnancy. Some medicines, like methotrexate, can harm a developing baby and must be stopped months before trying to conceive. Others, such as certain creams and phototherapy (light treatment), are generally safe. Always speak to a healthcare provider before stopping any medication.

## **Treating safely**

Newer biologic therapies, medicines that target specific parts of the immune system, are increasingly used during pregnancy. Certolizumab pegol is one such biologic, with evidence showing it poses minimal risk to the baby.



Working with your midwife and healthcare team to find the safest treatment plan that keeps symptoms under control while protecting your baby is vital.

## **What about after the baby is born?**

Many women experience a return or worsening of psoriasis or arthritis symptoms after delivery. It's important to have a follow-up plan to manage these flares safely. Breastfeeding can influence which treatments are options, but many medicines are compatible with breastfeeding. Talk to your midwife or health visitor.

## When psoriatic disease affects a man

If the father has psoriatic disease, there is good news: psoriatic disease itself usually does not affect fertility or pregnancy outcomes. However, some medications taken by men, like methotrexate, can impact sperm quality and may require stopping treatment months before trying for a child.

Genetics does play a role in psoriatic disease, so children of parents with the condition have a higher chance of developing it, but it's not certain. Being aware and watching for early signs in children can enable timely support.



## Planning as a couple

Couples planning a family where one or both partners have psoriatic disease benefit from early discussion with their healthcare providers, genetic counselling might be helpful. This helps ensure both partners get advice tailored to their health and treatment choices.

### Key points to remember

- Pregnancy often improves psoriasis, but may cause flares after birth
- Active disease can raise pregnancy risks; good disease control is important
- Some treatments are safer than others during pregnancy; planning is essential

- Fathers' medications can affect fertility; discuss with your doctor
- Genetics increases risk to children, but does not guarantee disease
- Multidisciplinary care and open communication support healthy pregnancies and families.

Pregnancy and parenthood can be joyful times with the right support and planning. Keeping well-informed and working closely with your healthcare team can help you navigate psoriatic disease and family growth confidently.

### Useful resources

- NHS Fertility Services: NHS clinics provide assessment and treatment for fertility concerns.
- Fertility Network UK: Offers support and information about fertility issues, including those related to autoimmune conditions. They provide guidance and peer support for people planning families.
- British Fertility Society: Professional body offering evidence-based guidance on fertility and pregnancy, useful for healthcare professionals and patients seeking authoritative advice, inclusive of chronic disease considerations.

### Important note about this information

This article is based on current research and clinical guidelines from trusted health organisations and specialists. However, it is intended for informational purposes only and should not replace advice from your own healthcare provider.

Everyone's situation is unique, and decisions about managing psoriatic disease during family planning and pregnancy should always be made with qualified medical guidance.