

Understanding lichen sclerosis and lichen planus

Women and Children's Division
Information for patients

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Introduction

This leaflet has been given to you to help you understand two skin conditions that can affect the vulva.

Lichen sclerosis is an uncommon skin condition. Around 1 in every 1000 women is affected. It most commonly affects the vulva (genital skin).

Lichen planus is a fairly common condition. Around 1 in every 50 people develop lichen planus. It mainly affects the skin and causes an itchy rash. In some cases it affects the mouth, genitals, hair, nails and other parts of the body.

These skin changes are not cancerous, and they are not infectious. However, in some people, over many years, they may develop into cancer.

Most of the treatments available control the symptoms of the skin changes, but do not reverse them. It is important to tell your doctor if the treatment is not working, and if you develop any lumps or unusual skin changes.

Causes

The causes are not fully understood. One possible cause is an autoimmune disease, when the body's immune system attacks part of the body itself. This may be triggered by an infection or environmental factor. About 1 in 4 people with lichen sclerosis has another autoimmune disease, such as thyroid disease, vitiligo or pernicious anaemia.

Signs and symptoms

The skin in the affected area is very itchy and sore. Sometimes the skin may split causing stinging and pain.

Lichen planus can cause painless white streaks or painful red sore areas on the vulva and entrance to the vagina. In lichen sclerosis the skin around the vulva and anus may have white patches and the skin may appear crinkly.

In both conditions superficial ulceration and scar tissue may develop which can narrow the entrance to the vagina. This can make it difficult or painful to have sex.

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Diagnosis

Diagnosis is usually made by your symptoms and the appearance of the vulva. However in some cases it may be necessary to take a sample of cells from the affected area to make a diagnosis and give the right treatment.

Treatment

Treatment of these conditions mainly aims to control the symptoms and prevent worsening of the skin changes. There is no treatment to cure the condition.

A strong steroid ointment or cream (topical steroid) is the main treatment. Steroids reduce inflammation. It is usual to use the ointment or cream regularly for three months. Irritation tends to ease after two weeks or so, but the skin may take more than three months of treatment to look and feel better.

General advice

Use an emollient (moisturiser) cream or ointment instead of soap to clean the genital area. This is also soothing. Avoid bubble baths, scented soap, detergents, perfumes, etc getting into contact with the vulva. These may irritate the skin and make symptoms worse.

Lubricants and vaginal dilators are useful if having sex is painful.

Further information

For further information you can contact:

Gynaecology Nurse Specialists: 0116 258 4840

Lichen Sclerosus Support Group: www.lichensclerosus.org

British Association of Dermatologists: www.bad.org.uk

Web links to more detailed information:

- www.niams.nih.gov/Health_Info/Lichen_Sclerosus/default.asp
- <http://dermnetnz.org/immune/lichen-sclerosus.html>

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