

Lichen Sclerosus

What is lichen sclerosus?

Lichen sclerosus is a skin disease affecting both sexes of all ages and in all areas of the body. It is more common in women and most often occurs on the genital area.

The lesions of lichen sclerosus are white, but can be speckled with pigmentation, and bruising under the skin is common.

When the vulva (the skin around the entrance to the vagina) is affected, itching is often present. This can result in bleeding or thickening of the skin. Some women have mild or no symptoms but the white skin changes are visible. There may be loss of normal vulval tissue.

Some patients have white lesions of lichen sclerosus elsewhere on their skin surface, but these do not usually cause symptoms.

In some patients there is a family history of lichen sclerosus and there is an increased risk of thyroid disease and other autoimmune diseases.

Treatment

The best treatment is a three month course of a strong steroid ointment or cream, such as clobetasol propionate (Dermol). This should be applied once daily for one month, then on alternate days for another month, and finally twice a week for the third month. One 30g tube of cream or ointment should last for the three month course of treatment. With this regular use, the changes in the skin can be reversed in some patients and in almost all the itching is relieved soon after treatment is commenced.

After three months of treatment, the steroid ointment is needed on a less frequent but regular basis to maintain remission. This may be once a week or only once every two or three months. Your doctor will advise how often the ointment is needed. Some patients have concerns about the use of steroid preparations on their skin, particularly thinning of the skin, but this does not appear to be a problem in lichen sclerosus.

Regular follow up is recommended because rarely a precancerous or cancerous skin lesion will develop in vulval lichen sclerosus. This will be in the form of a lump, thickening or ulcer on the vulval skin. You should learn to examine the area yourself using a hand held mirror and your doctor should inspect the area once a year.



