

Lichen Sclerosus in Women

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What is lichen sclerosus?

Lichen sclerosus is a chronic inflammatory skin condition which can affect any part of the skin, but in females it most often affects the vulval skin and the skin around the anus.

It can start in childhood or adulthood and affect girls or women of any age.

What causes lichen sclerosus?

The cause of lichen sclerosus is not fully understood.

It is felt to be a type of autoimmune condition in which the person's immune system reacts against the skin for no obvious reason.

Lichen sclerosus is not due to an infection – the disease is not contagious, so sexual partners cannot pick it up.

Friction or damage to the skin can bring out lichen sclerosus and make it worse.

Is lichen sclerosus hereditary?

Rarely, lichen sclerosus can occur in relatives.

What are the symptoms of lichen sclerosus?

Many patients have none, but the most common symptom of lichen sclerosus is itching.

As a rule the patches on the general skin surface seldom itch much, but those in the genital area do, and can also be sore if the skin breaks down or cracks.

In the genital area, the scar-like process can tighten the skin, and this can interfere with urination and with sexual intercourse.

Tightening of the skin around the anus can lead to problems with constipation.

What does lichen sclerosus look like?

In females, the most common site of involvement is the vulval skin.

The skin has a white shiny appearance which can sometimes become raised and thickened.

Skin fragility may lead to easy bruising and blisters.

There is a very small risk of developing a skin cancer in affected areas in the vulva.

These can look like lumps, ulcers or crusted areas.

In areas away from the genital skin, lichen sclerosus looks like small ivory-coloured slightly raised areas, which can join up to form white patches.

After a while, the surface of the spots can look like white wrinkled tissue paper.

How will lichen sclerosus be diagnosed?

The diagnosis of lichen sclerosus can usually be made from the typical appearance of the condition.

Sometimes a very small skin sample may be taken and checked under the microscope to confirm the diagnosis, especially if there is an open sore or a thickened area of skin.

This is known as a skin biopsy and requires a local anaesthetic injection and possibly stitches to close the wound, leading to a small scar.

If this is required, your doctor will discuss this with you.

Can lichen sclerosus be cured?

No treatment is likely to reverse the changes of lichen sclerosus completely, but the symptoms and signs of the disease can usually be well controlled with the application of creams to the affected skin.

Occasionally, it may go away around the time of puberty.

How can lichen sclerosus be treated?

A variety of treatments are available for lichen sclerosus:

- Strong steroid ointments such as clobetasol propionate (Dermovate®) and diflucortolone valerate (Nerisone forte®) are used to stop the inflammation and also soften the affected skin. Please do not worry about the warning inside the pack, where it might say not to use these ointments on genital skin - your doctor will advise you how and when to apply the steroid ointments safely.
- Moisturisers help to soften and protect the skin.
- The fragile skin of lichen sclerosus may be more susceptible than normal skin to infection with Candida yeasts (thrush) or bacteria, and may split or even bleed. Your doctor will treat these problems if they arise.

- Rarely, a small operation may be needed to divide adhesions (where the skin sticks together).

Self-Care

- Avoid washing with soap and instead use an emollient soap substitute/ cream.
- Carefully dry yourself after passing urine to reduce the contact of urine with your skin.
- Using a moisturiser or yellow soft paraffin as a barrier cream can protect your skin from exposure to urine.
- If sexual intercourse is painful because of tightening at the entrance to the vagina, the use of lubricants and, on occasions, vaginal dilators, will help. Vaginal dilators can be bought over the counter at large pharmacies.
- Keep an eye on your skin. Cancer of the vulva may be a little more likely to occur in lichen sclerosus that has been present for many years than in normal skin. Lifelong regular self-examination is very important for all females who have or have had genital lichen sclerosus. If any skin change develops which does not respond to steroid creams, in particular any skin thickening, soreness or ulceration lasting more than two weeks, you need to tell your GP without delay. You may need a biopsy to test for skin cancer.
- If you are a smoker, stop smoking to reduce the risk of cancer.

Where can I get more information about lichen sclerosis?

Web links to detailed leaflets:

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

Patient support group:

- National Lichen Sclerosus Support Group (NLSSG)
- E-mail: admin@lichensclerosus.org
- Web: www.lichensclerosus.org

Published guidelines for the management of lichen sclerosis:

- British Journal of Dermatology 2010; 163:672-82
- For details of source materials use please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

Acknowledgement - information has been sourced from the British Society of Dermatologists information leaflet



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