

Lichen Sclerosus

et Atrophicus

Information for patients

What is Lichen Sclerosus?

Lichen Sclerosus et Atrophicus (LS) is an inflammatory skin condition that can affect men, women and children. It most commonly affects woman after the menopause and girls before puberty. Skin lesions can occur anywhere on the body but are more common on the genital area (private parts).

The cause of LS is not fully understood. It is thought to be a type of autoimmune condition, in which the person's immune system reacts against the skin.

What are the symptoms?

Lichen Sclerosus can cause itching, soreness and bleeding. The itching and soreness can be very severe. The skin on the outside of the vagina can appear thin and whitish, or there may be areas of bruising, thickening of the skin, or breaking of the skin. This can have quite an alarming appearance.

How is it diagnosed?

The diagnosis is normally made by your specialist by just looking at the area, as the appearances are characteristics. Biopsies are rarely needed, unless there is any uncertainty with the diagnosis.

What treatments are available?

Your doctor will prescribe you a strong steroid ointment such as Dermovate. A pea sized amount should be applied to the affected area as follows:

- Daily for 4 weeks
- Alternate days for 4 weeks
- Twice weekly for 4 weeks

This should clear up all the symptoms. Very rarely, the symptoms may persist despite

steroid treatment. If this is the case, your doctor will refer you to a dermatologist to consider stronger medication to suppress the immune system.

You should also avoid using soaps, shower gels and bubble baths. Your doctor can prescribe you a moisturiser to be used as a soap substitute. You can also use a barrier cream to keep the surrounding skin healthy.

What are the long-term outcomes?

After the initial course of treatment some girls may not get any further symptoms. However, LS can flare up every now and again, and the steroid ointment can be used again.

LS generally resolves when girls go through puberty, but very occasionally the symptoms can continue after puberty.

Unlike in older women, there is no known increased risk of cancer. This condition will not affect periods or future fertility.

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Revised by

Dr Cara Williams on behalf of BritSPAG