



Lichen Sclerosus

Patient information Leaflet

July 2019

What are the aims of this leaflet?

It help you understand more about Lichen Sclerosus (LS). It tells you what it is, what can be done about it and where you can find out more about it.

What is Lichen Sclerosus?

It is a skin condition can affect any part of the skin. In women, it most affects the vulva skin and the skin around the back passage (anus). It can start at any age stages but most commonly at later ages.

What causes Lichen Sclerosus?

The cause is not fully understood. It is felt to be a type of autoimmune condition. This is when the person's immune system reacts against the skin. However, it is not clearly proved.

Lichen Scelorsus is not due to infection. So sexual partner cannot pick it up. Friction or damage to the skin can bring out lichen scelorsus and make it worse. Irritation from the urine leakage can make the problem worse.

What are the symptoms of Lichen Sclerosus?

Many patients have none, but the most common symptom is itching. It can be worse if the skin breaks down or cracks. The vulvar skin can be tight and interfere with urination and sexual intercourse. Tightening of the skin around the back passage can lead to problems with constipation.

What does Lichen Sclerosus look like?

The most common site of involvement is the vulva skin. The skin has a white shiny appearance which can sometimes become raised and thickened. Skin fragility may lead to easy bruising, blisters and erosion. There is a small risk of developing a skin cancer in affected areas in the vulva.

How will Lichen Sclerosus be diagnosed?

The diagnosis can be usually be made from the typical appearance of the condition. Sometimes a small skin sample may be taken and checked in the laboratory microscope to confirm the diagnosis. This is known as skin biopsy and requires a local anaesthesia to numb the skin and possibly stitches the wound.

Can be Lichen Sclerosus be cured?

The symptoms and looking of the disease can be well controlled with application of creams to the affected area. Unfortunately the creams may be required long term.

Self-care (What can I do?)

- Avoid washing with soap and instead use an emollient soap/cream.
- Carefully dry yourself after passing urine to reduce the contact of urine with your skin.
- Regular use of a simple moisturiser will often keep the symptoms under control. Women who have significant water exposure (swimmers, spa holidays etc) may require additional moisturiser to counteract the drying effect of the water.

- Using a moisturiser or yellow soft paraffin as a barrier cream can protect your skin from exposure to urine.
- If a steroid cream is prescribed by the doctor use this relatively liberally until the symptoms are under control. Enough cream to cover the ends of two fingers used once a day initially. Once the symptoms are well controlled then minimum use of steroid that keeps symptoms under control is recommended.
- If sexual intercourse is painful because of skin tightening, use of lubricants can help.
- Keep an eye on the skin of the affected areas. There is a very tiny risk of developing skin cancer in the affected areas. Usually patients experience worsening symptoms before this occurs.
- If you are smoker, stop smoking to reduce the risk of developing cancer.

Where can I get more information about Lichen Sclerosus?

National Lichen Sclerosus Support Group (NLSSG):

E-mail: admin@lichensclerosus.org

Web: www.lichensclerosus.rog

If you have a visual impairment this leaflet can be made available in bigger print or on audiotape. If you require either of these options please contact the Patient Information Centre on 0161 922 5332

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