

BMDA Lichen Sclerosis

Lichen sclerosis is a long-term skin condition. It creates patchy, white skin that is thinner and more fragile than normal. Anyone can get lichen sclerosis, but it most often occurs in women who have gone through menopause. Menopause is the time when a woman's periods stop, normally when she is 45 to 55 years old.

Lichen sclerosis can occur anywhere on the skin. Women's genital area is most often affected. Over time, the skin may scar and the opening to the vagina may narrow. This may cause sex to be painful or difficult.

Lichen sclerosis is not contagious. You cannot pass it to another person or sexual partner. Causes for this condition are not known.

Symptoms

Symptoms are:

- Itching, dryness and discomfort
- Pain or burning sensation during sex
- Tender skin
- Bleeding
- Smooth white spots on the skin that may grow into blotchy, wrinkled patches
- Some women have no symptoms, but changes to the vulva are found on the exam.

If you have any of the above symptoms or bleeding or spotting after sex, call your health care provider.

Diagnosis

Lichen sclerosis is diagnosed with a physical exam and sometimes a skin biopsy. During the exam, your vulva and vagina are checked for signs of lichen sclerosis. Your health care provider may do a skin biopsy, especially if the condition recurs or does not clear. This means he or she will remove and examine a small sample of skin.

Risk of Cancer

Lichen sclerosis does not cause cancer. However, lichen sclerosis may cause scars. Compared to normal skin, the scars have a higher risk of developing a skin cancer. Therefore, exams may be more frequent depending on your symptoms or the severity of the condition. Your health care provider will let you know how often you may need to be seen.

Treatment

Like other skin conditions, lichen sclerosus can be treated. Often it is only controlled and not cured. Lichen sclerosus is most commonly treated with a steroid cream. Only a thin layer of cream is applied to the affected skin. Your provider will tell you how many times a day and for how many days or weeks to apply the cream. Every case is different.

Once treatment with the steroid cream is complete, you may have to use a moisturizer every night. The moisturizer should not have alcohol or perfume. This will help relieve any burning or skin dryness. This may also keep the condition from recurring. Continue using the moisturizer as instructed by your health care provider.

Symptoms may recur several times until the condition is controlled. If the lichen sclerosus is severe or does not respond to steroid cream, you may be referred to a specialist such as a gynecologist or dermatologist. Contact your health care provider for more instructions.

Special Instructions

- Tell your health care provider if you are or think you are pregnant or you are breastfeeding.
- Apply the steroid cream to the outside of the vagina only. Do not put it in or around the opening of the vagina.
- Do not use the cream for longer than your health care provider tells you. Doing so may cause the problem to worsen.
- Call your health care provider if your skin is red or burning, if the symptoms are not getting better or if your daily activities are affected.

Applying the cream

1. Wash your hands with soap and water before you apply the cream.
2. Wash the area to be treated with only mild soap and rinse with cool/warm water. Let it dry before you put on the cream.
3. Apply the cream to the affected area. Apply only a thin layer. A little bit goes a long way.
4. Wash your hands with soap and water after putting on the cream.

Follow-up Care

Please go to your follow-up appointments. Your health care provider will check the treated area for improvement. Call if you have any questions or concerns. If signs and symptoms come back or become worse, call your health care provider.

Resource

For more information you can visit

http://www.niams.nih.gov/health_info/Lichen_Sclerosus/default.asp