Patient Education



Making Cancer History*

Lichen Sclerosus

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

Lichen sclerosus can occur anywhere on the skin. A woman'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 sclerosus is not contagious. You cannot pass it to another person or sexual partner.

Causes for this condition are not known.

Symptoms

Common symptoms of lichen sclerosus are:

- Itching, dryness, and discomfort.
- Pain or burning sensation during sex.
- Tender skin.
- 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 upon exam.

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

Diagnosis

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

Risk of Cancer

Lichen sclerosus does not cause cancer. However, lichen sclerosus may cause scars. Compared to normal skin, scars have a higher risk for skin cancer. Therefore, exams may be more frequent depending on your symptoms or the severity of the condition. You're 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. However, treatment typically controls not cures the condition. Lichen sclerosus is most commonly treated with a steroid cream. Only a thin layer of cream should be 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 cured or controlled. Contact your health care provider for more instructions.

Special Instructions

Tell your health care provider if you are or could be pregnant or if 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 told 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

Follow these instructions when applying the cream.

- 1. Wash your hands with soap and water before applying the cream.
- 2. Wash the area to be treated with 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 your health care provider if you have any questions, concerns, or if signs and symptoms come back or become worse.

Resources

For more information, visit <u>www.niams.nih.gov/health info/Lichen Sclerosus</u>.

