Lichen Sclerosus – after diagnosis and initial treatment

Lichen sclerosus is a long-term disease although it can usually be brought under control. When both you and the hospital doctor are happy that treatment is working well, there may be no need for repeated reviews at the hospital clinic. However, you will still need to be aware of any skin changes and what to do about them.

Can lichen sclerosus be cured?
No treatment is sure to reverse the changes of lichen sclerosus completely. But the symptoms and signs of the disease can usually be well controlled with a skin moisturizer and a steroid application.

How can lichen sclerosus be treated?
A variety of treatments is available for lichen sclerosus:

- Bland moisturisers (for example, emulsifying ointment) help to soften and protect the skin.
- Your symptoms can be relieved by the use of steroid creams or ointments. It is usual to treat symptomatic skin with quite strong steroids regularly for two to three months. You can then keep things under control with only occasional applications. This may be more effective than continuing with milder creams, and is safe for this period of time.
- 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 may need treatment for these problems if they develop.

How long can I carry on using steroid creams?
The use of steroid creams to the sensitive skin of the vulval area should be kept to the minimum strength and amount that will keep the inflammation under control. Once the condition is under control, it is often possible to use a steroid cream as infrequently as once or twice a week and still remain comfortable. Other people find that they do not need regular steroid creams, but instead use a regular moisturizer and just add in the steroid cream occasionally for a few days when symptoms come back. You can continue to use steroid creams like this for a few years, but will need to be aware that you are using the minimum necessary.

It is best to find a strength and frequency of application of steroid cream or ointment which is enough to keep your itch or soreness under control.
It is not necessarily better to avoid using a steroid, as uncontrolled inflammation of the skin can lead to increased skin damage.

**What are the side effects of steroid creams?**
Steroid creams and ointments put on the skin can have several side effects. They can thin the skin and make it look more pink. This is a tricky balance when treating lichen sclerosus, as the inflammation of the condition can also thin the skin if not controlled. Steroid creams used in the vulval area can also make you more susceptible to infection with thrush. If you do experience a sudden increase in itch, especially if itchy inside, then this could be a sign of thrush.

**Is there a risk that I may develop a cancer in the vulval skin?**
If lichen sclerosus has been present for many years, cancer of the vulva may be more likely to occur than in normal skin. If you develop a lump or non-healing sore in that area, you should ask your doctor to look at this.

**When do I need to see a doctor about the lichen sclerosus?**
- If sexual intercourse is painful because of tightening at the entrance to the vagina, the use of lubricants, or sometimes vaginal dilators, will help. If this is an on-going problem or worry, discuss this with the doctor.
- If you are aware of a change in the skin affected by lichen sclerosus or are concerned that you could have a skin cancer there, see your doctor.
- If the symptoms of lichen sclerosus are giving you more bother or are not helped by the treatment, further advice from the doctor should help.

**Where can I get more information about lichen sclerosus?**

**The patient support group is:**
Association for Lichen Sclerosus and Vulval Health  [www.lichensclerosus.org](http://www.lichensclerosus.org)

**Web links to detailed leaflets:**
- [www.nhs.uk/conditions/lichen-sclerosus](http://www.nhs.uk/conditions/lichen-sclerosus)
- [www.dermnetnz.org/topics/lichensclerosus](http://www.dermnetnz.org/topics/lichensclerosus)
- [www.niams.nih.gov/health-topics/lichen-sclerosus](http://www.niams.nih.gov/health-topics/lichen-sclerosus)

We are a smoke-free site: smoking will not be allowed anywhere on the hospital site. For advice and support in quitting, contact your GP or the free NHS stop smoking helpline on 0800 169 0 169.

Other formats:

If you would like this information in another language or audio, please contact Interpreting services on telephone: 01223 256998, or email: interpreting@addenbrookes.nhs.uk For Large Print information please contact the patient information team: patient.information@addenbrookes.nhs.uk

Document history
Authors Dr Jane Sterling
Pharmacist N/A
Department Cambridge University Hospitals NHS Foundation Trust, Hills Road, Cambridge, CB2 0QQ www.cuh.org.uk
Contact number 01223 245151
Publish/Review date August 2019/August 2022
File name Lichen_sclerosus.doc
Version number/Ref 4/PIN1434/Document ID 2168