



ANZ Vulvovaginal Society

## **LICHEN SCLEROSUS**

### **What is lichen sclerosus (LS)?**

LS is a skin condition. It may involve any part of the skin, but most often it is found on the genital area. This information sheet is about genital LS only.

LS is more common in women than in men. It can start at any age, most commonly around menopause, but also occurs in young children. Once LS starts, it usually continues for life. It is not an internal disease and never extends into the vagina

### **What are the symptoms?**

Most often LS is very itchy, but it can also cause pain, soreness and pain with sex. In children, constipation and difficulty urinating may occur. It is not uncommon for the skin to split open easily.

In some people, LS has no symptoms, especially at first, and may just be picked up when the GP does a pap smear.

### **What does it look like?**

The typical appearance is of whitened skin around the vulva, perineum and anus. There may also be lesions that look like blisters and bruises. As a result, in children, there is often concern about sexual abuse.

LS may cause scarring, resulting in loss of the labia minora (inner lips of the vagina) and reduction in size of the vaginal opening if the condition has not been treated for a long time.

### **How is it diagnosed?**

Many cases of LS can be diagnosed on sight, but if there is any doubt a test called a skin biopsy will confirm the diagnosis. This involves cutting a tiny piece of skin from the involved area and having it examined by a pathologist. It is usually best to be sure of this diagnosis by doing this test. It is a simple quick procedure that can be done in the office.

## **Do other problems occur in association with LS?**

There are two important ones:

1. LS increases your risk of cancer of the vulva.
2. People with LS may suffer from “autoimmune” diseases like systemic lupus erythematosus and thyroid disease.

Both these associations are not common but you should be aware and discuss this with your doctor. You may need blood tests. Cancer of the vulva is diagnosed by just examining the vulva at your checkup and is confirmed by a vulval biopsy.

## **Why did I get this?**

We don't really know, but we think the tendency is probably inherited. LS may run in families.

## **Can my partner catch this from me?**

No. LS is not an infection and cannot be passed on to anyone else.

## **Can it be treated?**

LS cannot be cured, but can be very successfully controlled with cortisone cream. You may have heard that this treatment is dangerous but this is not true. It is more dangerous to leave it untreated. Treatment is for life, and it is very important to have regular follow up arrangements and checkups every six months.

Once LS is under good control, it is possible to feel normal again. If scarring has occurred and is causing problems with intercourse, a simple surgical procedure can be done to widen the vagina.

## **Will I be able to have intercourse again?**

Once LS has been properly controlled, this is usually possible. If you have passed through menopause you may also need some estrogen suppositories to keep your vagina moist. After a break from intercourse, it is common for your muscles to tighten involuntarily causing pain. You can learn to overcome this. You should use a lubricant and you may need to learn some pelvic floor exercises to help you to relax at first.

## **What does the future hold?**

The prognosis for most patients with LS is very good. It nearly always responds quickly to treatment and if this is kept up, with time, you will need less and less to remain symptom free.

