Lichen Sclerosus

Lichen sclerosus is a skin disorder that affects the vulva. It may occur in any age group. The exact cause of lichen sclerosus is unknown. The condition resembles the appearance of lichens (a mixture of fungi, and algae found in nature), but is not caused by fungi or algae. It is not an infection that you caught from anyone, and you cannot transmit it to others. There have been reports of family members with lichen sclerosus, thus it may have a genetic link, although it is questionable. There is also the possibility that it has an autoimmunity component.

Lichen sclerosus is characterized by small white patches that are thin and have a crinkled appearance, looking like cigarette paper at times. It may involve the entire vulvar area (from the clitoris to the anus). Often, the clitoris can be hidden by changes of the clitoral foreskin. The labia minora almost completely disappears at times. Commonly, splitting of the skin in the midline is seen. Tears may also develop in the natural folds of the vulva. The vaginal opening may become smaller, interfering with intercourse.

Occasionally the tissue breaks down; forming an ulcerative lesion. It may be a chronic process, which at times is not curable. The disease does not spread into the vagina. Itching is the primary symptom.

A biopsy (a minor surgical procedure to remove a small piece of tissue that is then examined under a microscope) is then performed to make the diagnosis.

The goal of treatment is to eliminate itching and protect the skin from damage. Occasionally, complete resolution of the abnormal vulvar appearance may occur. More commonly, the skin changes of lichen sclerosus will not completely resolve. This does not mean the treatments are not helping. Various medications are used to improve skin condition. Although testosterone has been used frequently in the past for treatment, the current therapy is potent topical steroids in creams and ointments. Brand name Temovate (Clobetasol propionate 0.05%) is a frequently prescribed topical treatment. Following the initial use of Temovate ointment or cream, the steroid content of the ointment or cream is decreased gradually.

Ointments tend to be gentler on vulvar skin than creams. Long-term topical steroid use is often required. During early treatments, avoid tight clothing to reduce further tissue damage. Several follow-up appointments will be necessary to evaluate response to treatment.

Many people have wondered if lichen sclerosus can turn into cancer. Lichen sclerosus scars the skin, and in theory, could increase the risk for a local skin cancer (this happens in 5% of cases or less, however). You will need to be followed closely to have the vulva examined at regular intervals. A sore or ulcer that doesn't heal in a few weeks, a lesion that bleeds easily, or bumps or raised lesions that are becoming larger are signs of skin cancer. In some cases, an additional biopsy may be indicated. You should examine the vulva as you would any other part of the skin, and have regular visits with your health care provider to follow the skin appearance.

Points to remember:

1. **You are in control of the dilator; go at your own pace when you are ready.**
2. **Use adequate lubrication**
3. **Experiment with different leg and trunk positions as well as angles of insertion to find the best combination.**
4. **Slow movement is usually best.**