

NHS Greater Glasgow and Clyde
Gynaecology Services

Vulvo-vaginal Lichen Planus

Patient Information



What is Vulvo-vaginal Lichen Planus?

Lichen Planus is an inflammatory skin condition that can sores in moist areas like your mouth and vagina and around your vulva. It can also affect other parts of your skin including your scalp.

What are the symptoms of Lichen Planus?

Lichen Planus of the vagina is often painful and can cause burning sensations in the affected area. It may also be itchy. This can cause problems with passing urine, opening bowels and can make sex painful and difficult.

In severe cases, Lichen Planus can cause scarring which changes the structure of your vagina and vulva. The opening of the vagina may shrink or the sides of the vagina may fuse together.

What causes Lichen Planus?

We are not definite as to the reasons why women develop lichen planus in the genital area. It may be an autoimmune skin disease where our body produces antibodies which can react against the skin of the vulva and vagina. It may also be associated with other automimmune conditions such as thyroid disease and diabetes

We do however know that Lichen Planus is **not** due to an infection, it is **not** contagious and your sexual partner **cannot** pick up the skin condition from contact with you.

Lichen Planus is **not** caused by the menopause, hysterectomy, the oral contraceptive pill or HRT (hormone replacement therapy). HRT or oestrogen creams do not help with condition.

Lichen Planus may occur in family members, but is not thought to be hereditary.

Can Lichen Planus be cured?

At present there is no cure for Lichen Planus. However, we can give you treatment which will relieve the symptoms and protect your skin from further damage.

Lichen Planus of the vulva and vagina is a chronic condition and you may need to continue with life-long treatment. Spontaneous recovery can occur but is unpredictable. Unfortunately, any scarring is permanent.

Treatment

The mainstay of treatment for Lichen Planus of the vulva and vagina is topical steroid creams or ointments in combination with liberal application of topical emollients. We will also recommend simple creams for washing and general good care of the vulval skin. These measures aim to reduce the chance of the skin flaring.

In some cases, Lichen planus of the vulva and vagina may be difficult to treat and your doctor may suggest oral medication to help dampen down the inflammation associated with disease process.

Painkillers can also be helpful as can cold packs applied to the area for no more than 10minutes at a time.

Operations are not usually helpful for the management of Lichen Planus. Occasionally we may suggest an operation if scarring and tightening of the skin causes problems with passing urine or with sex.

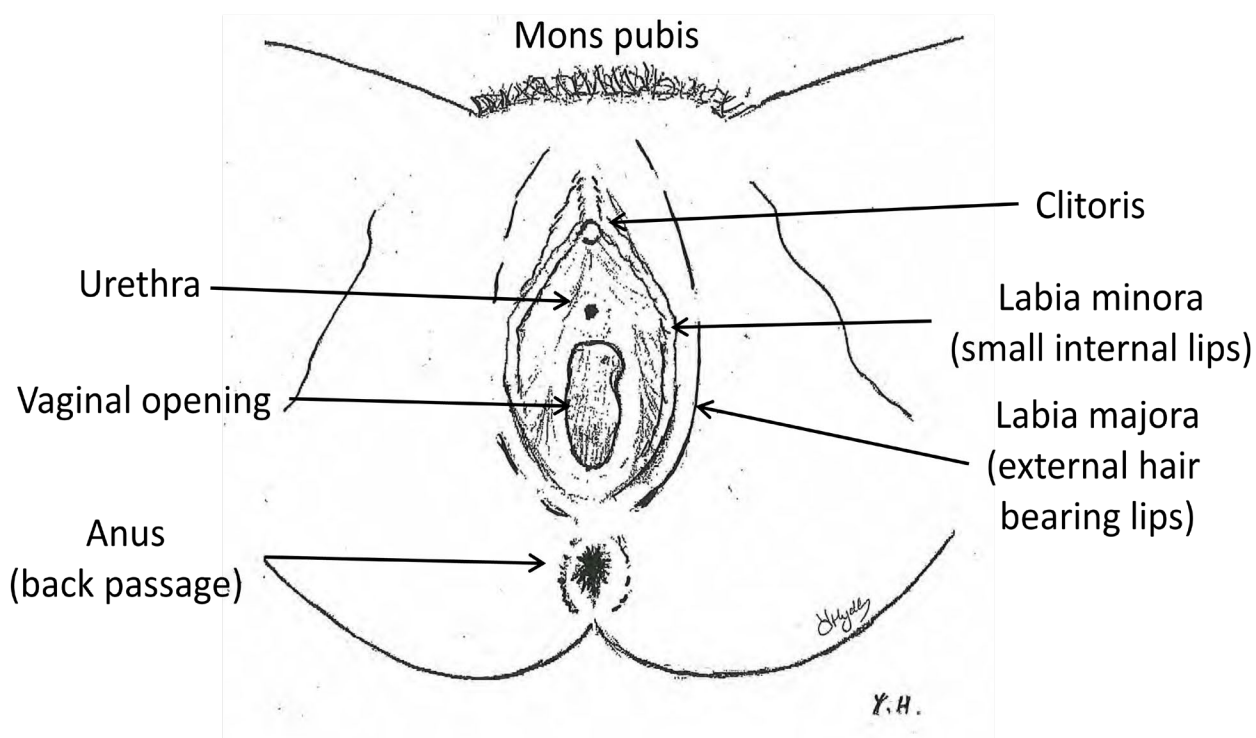
Are there any risks with Lichen Planus?

There may be a very small approximately 1 in 100 000 risk of developing a skin cancer in the vulva on a background of Lichen Planus.

Although this is a small risk, we would advise that you check the area yourself with a mirror on a regular basis (see self examination diagram). If you are unsure, our staff in the clinic can help.

You should always let your doctor know if you have any ulcer, warty areas or bumps which are not healing with the steroid cream or are growing bigger.

Self Examination of your vulva

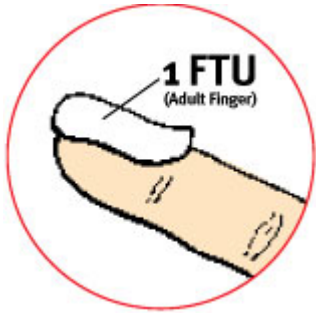


If you are comfortable it is helpful to check the area yourself with a mirror. The self examination diagram above labels the areas which you can inspect during your examination.

For further support with self examination ask for help from your medical practitioner or consult the self examination area at <https://vulvalpainsociety.org.uk/>

How to use topical steroid therapy

Apply one fingertip unit of the cream or ointment to affected area.



First month - apply to affected area once nightly

Second month - apply to affected area alternate nights

Third month - apply to affected area twice a week

After the three month course, you can use the cream or ointment every night for 2 weeks to treat the flare-up and control the itch, then try to reduce the frequency as above.

If symptoms keep coming back quickly when you stop using the cream, you may prefer to use the cream regularly, once or twice a week in the long term. This is called maintenance therapy. Long-term use is safe as long as one 30g tube last at least 3 months.

Stinging for a few minutes after application is quite normal. However, if it persists for greater than 1-2 hours after application, you may be sensitive to the cream or ointment. If this occurs, wash the area thoroughly and STOP using the cream. There are several alternative creams which you may be able to use, and you should contact your GP or clinic for advice.

It is best to apply the steroid at night before you go to bed onto clean skin. An emollient can be applied over the steroid cream or ointment if required.

Where can I get more information?

Web links to patient information leaflets:

<https://www.dermnetnz.org/topics/lichen-planus>

Web link to patient support groups:

The Vulval Pain Society

<https://vulvalpainsociety.org.uk>

UK Lichen Planus

<https://www.uklp.org.uk>

Useful contact numbers

The numbers below can be used if you are finding treatment difficult and you are still attending the gynaecology vulva clinic.

Stobhill Gynaecology Clinic (Clinic F)

0141 355 1209

Alternatively you can seek advice from your own GP or Practice Nurse.