Points To Remember About Lichen Sclerosus

- Lichen sclerosus usually affects the skin of the genital and anal areas. It can also appear on the upper body, breasts, and upper arms.
- The disease does not cause skin cancer but may increase your risk for cancer if your skin is scarred.
- Treatment with creams or ointments can help.
- Surgery to remove skin patches at the genitals may be an option in men, but not women. Women with severe scarring in the vagina may need surgery.
- You should see your doctor every six to 12 months in order to follow and treat any skin changes.

What is lichen sclerosus?

Lichen sclerosus is a long-term problem that usually affects the skin of the genital and anal areas. The disease can also appear on the upper body, breasts, and upper arms.

The disease does not cause skin cancer but may increase your risk for cancer if your skin is scarred. You should see your doctor every 6 to 12 months in order to follow and treat skin changes.

Who gets lichen sclerosus?

Lichen sclerosus appears:

- Most often in women (usually after menopause).
- Less often in men.
- Rarely in children.

What are the symptoms of lichen sclerosus?
You may have no symptoms if you have a mild form of the disease. If you do have signs, they can include:

- Small white spots on the skin (early in the disease).
- Spots that grow into bigger patches. The skin over these patches become thin and crinkled.
- Skin that tears and bruises.
- Skin that becomes scarred.
- Itching, which is very common.
- Pain.
- Bleeding.
- Blisters.

**What causes lichen sclerosus?**

You can’t give lichen sclerosus to someone else. No one knows what exactly causes the disease. Some possible causes include:

- An overactive immune system.
- Hormone problems.
- Inheriting the risk for getting the disease from your parents.
- An injury that damaged or scarred the skin.

**Is there a test for lichen sclerosus?**

Usually a doctor will take a small piece of skin and look at it under a microscope to diagnose lichen sclerosus. In more severe cases, doctors can just look at you to diagnose the disease based upon how it has affected your skin.

**How is lichen sclerosus treated?**

Patches on the arms or upper body usually go away after time without treatment. The disease may also go away after puberty.

Patches of the genital skin should be treated, even if they aren’t painful or itchy. These patches can scar, causing problems with urination or sex. There is also a very small chance that skin cancer may develop in the patches. You should see your doctor every six to 12 months in order to follow and treat any skin changes.

Possible treatments for the disease include:

- Ointments and creams, which can help with itching and to keep the disease from coming
back.

- Surgery to remove the genital patches in men.

You should talk to your doctor about the best treatment for you.

Who treats lichen sclerosus?

Lichen sclerosus is treated by:

- Dermatologists (doctors who treat the skin).
- Gynecologists (doctors who treat the female reproductive system).
- Urologists (doctors who treat the urinary or urogenital tract).
- Primary health care providers.

For more info

**U.S. Food and Drug Administration**
Toll free: 888-INFO-FDA (888-463-6332)
Website: [https://www.fda.gov](https://www.fda.gov)

Drugs@FDA at [https://www.accessdata.fda.gov/scripts/cder/daf](https://www.accessdata.fda.gov/scripts/cder/daf). Drugs@FDA is a searchable catalog of FDA-approved drug products.

**Centers for Disease Control and Prevention, National Center for Health Statistics**
Website: [https://www.cdc.gov/nchs](https://www.cdc.gov/nchs)

**American Academy of Dermatology**
Website: [https://www.aad.org](https://www.aad.org)

If you need more information about available resources in your language or other languages, please visit our webpages below or contact the NIAMS Information Clearinghouse at NIAMSInfo@mail.nih.gov.

- [Asian Language Health Information](https://www.niams.nih.gov/NIAMSInfoMail.nih.gov)
- [Spanish Language Health Information](https://www.niams.nih.gov/NIAMSInfoMail.nih.gov)