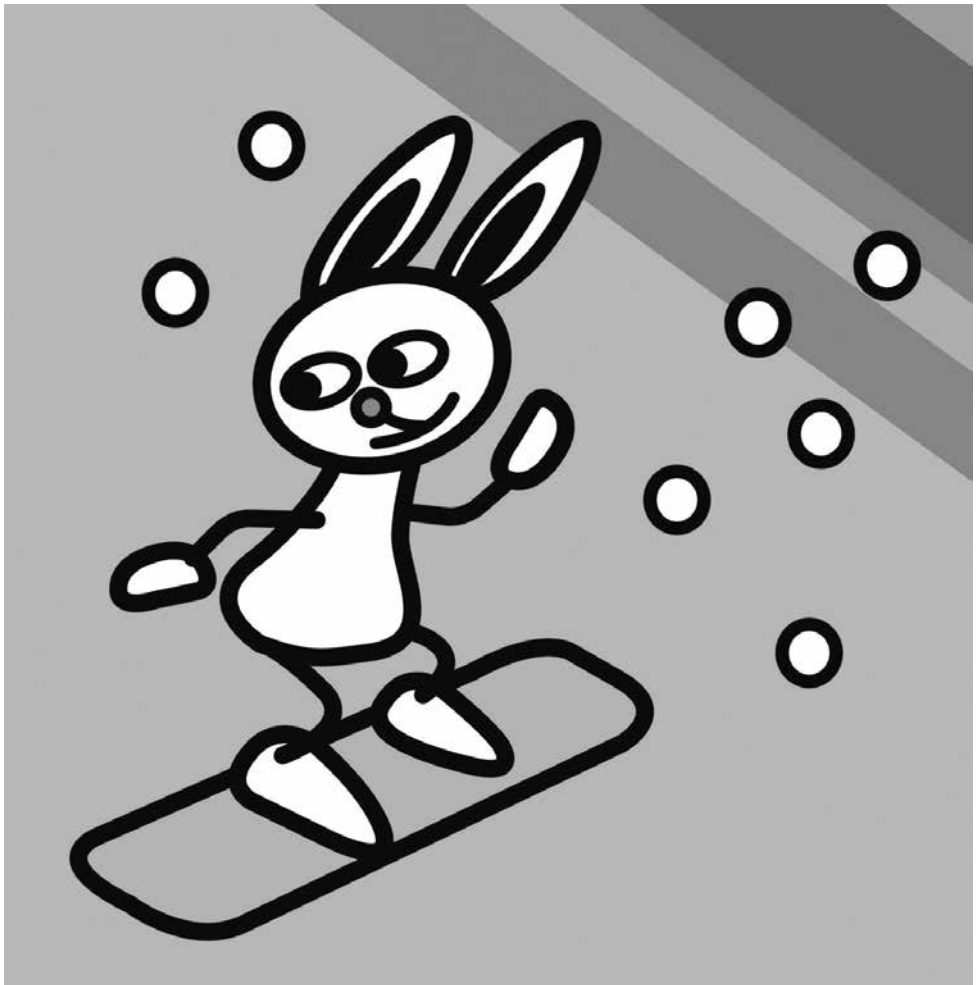


Department of Dermatology

# Lichen sclerosus in children

Information for parents and carers





## What is lichen sclerosis?

Lichen sclerosis is an inflammatory skin condition, which mainly tends to affect the genital areas (vulva and penis). The cause is not known, but it may be a form of autoimmune disease (when the immune system attacks healthy cells in the body, by mistake) and can run in families.

## What are the symptoms?

Your child may have complained of itchy sore skin around their genital area and bottom. They may also have difficulty pooing (constipation). They are likely to have pale areas, and areas of redness around their genital area, which may sometimes bleed. This condition can also cause splits in the skin, bruising and scarring. It is possible that you have been told that they have any number of conditions, including thrush or eczema.

Your child will have been diagnosed with lichen sclerosis by a doctor with experience in this condition (such as a dermatologist).

## How is lichen sclerosis treated?

Treatment is usually an active ointment containing strong topical corticosteroids (Dermovate). This will reduce inflammation, soreness and itching in the area and help settle down the symptoms. Your child's doctor will recommend which one to use. You will need to apply the ointment for a **full** 12 weeks, even if the symptoms improve.

Although this treatment uses a strong corticosteroid, this is a tried and tested treatment which is very safe. Please do not avoid using the correct dose of ointment, as this will stop the treatment from working. Weaker corticosteroids will also not work to treat the condition. The corticosteroid may cause some temporary changes to your child's skin, but these are likely to improve over time.

Lichen sclerosis can flare up again, even after treatment. If this happens you can use the same ointment for a few days to control the symptoms.

Using the ointment regularly (e.g. 2 days a week) for at least the next 12 months may help prevent future flare-ups.

In boys, if treatment with the ointment does not resolve the condition, we may recommend circumcision (removal of the foreskin) as a cure. It is important that any circumcision skin is sent for examination, so that we can confirm the diagnosis.

## Why might the treatment not work?

The most common reason for the treatment not working is not using enough of the product. It should be applied once or twice a day. We will tell you how much needs to be used and for how long. We can also give you some tips on how to involve your child in their treatment.

If symptoms get worse despite treatment this may mean there is another problem, such as an infection. Your child's GP or dermatologist may want to take swabs to exclude this and will give you advice about treatment if an infection is found.

## Are there any alternatives?

There are alternatives and a different anti-inflammatory ointment (Protopic or tacrolimus) can be used in some cases. We prescribe Dermovate, as there is much better evidence that this works, and only very occasionally use Protopic.

## What else can I do?

It is important not to irritate the skin. Using a non-fragranced moisturising cream instead of soap can help to reduce irritation; this can be prescribed by your child's GP.

There is some evidence that silk or cotton underwear can be better for symptoms than synthetic underwear.

## Will it get better on its own?

This condition can sometimes cause no symptoms or may get better without treatment. We would normally still recommend treatment though, as it can improve things more quickly and may reduce any risk of long-term problems.

## What about the future?

Lichen sclerosis in children tends to improve when they reach puberty, but it may not completely disappear. Your child may still have flare-ups, which will need to be treated with active ointment.

Girls are not likely to have any problems with their periods, sexual intercourse, pregnancy or delivery of babies, if the symptoms have been treated.

There is a very small risk of developing certain types of genital skin cancer, if the condition continues into adulthood. We will tell you if your child needs to be seen regularly, but most children can be discharged when their condition is stable and only need to be seen if they have any problems or concerns.

## Where can I get further information?

The Association for Lichen Sclerosus and Vulval Health is a useful resource.

[www.lichensclerosus.org](http://www.lichensclerosus.org)

## How to contact us

If you have any further questions, please contact the Dermatology Consultant's secretary:

Tel: **01865 228 224**

(Monday to Friday, 9.00am to 5.00pm)

If you have a specific requirement, need an interpreter, a document in Easy Read, another language, large print, Braille or audio version, please call **01865 221 473** or email **PALS@ouh.nhs.uk**

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