



## **LICHEN PLANUS**

### **What are the aims of this leaflet?**

This leaflet has been written to help you understand more about lichen planus. It tells you what it is, what can be done about it, and where you can find out more about it.

### **What is lichen planus?**

Lichen planus is a fairly common (0.2-1% of the population worldwide), itchy, non-infectious rash that usually occurs in adults over the age of 40. In dermatology, the word 'lichen' means small bumps on the skin and 'planus' means 'flat', so the name comes from a description of the rash's appearance.

### **What causes lichen planus?**

The cause of lichen planus is still not clear, but it is thought to be related to an over-reaction in the skin's defence/immune system. Rashes that look like lichen planus – known as 'lichenoid drug eruptions' – are sometimes triggered by taking medicines for raised blood pressure or anti-malarial tablets. Lichen planus is not contagious.

### **Is lichen planus hereditary?**

No, it is not hereditary; however, the tendency to get lichen planus can sometimes run in families.

### **What are the symptoms of lichen planus?**

Lichen planus on the skin is usually, but not always, itchy. Sometimes the main complaint is of flat, dark marks on the skin, which typically develop after the rash.

## What does lichen planus look like?

The rash is made up of clusters of shiny, slightly raised purple-red spots (papules), usually measuring 3-5mm in diameter. A close look may show fine white streaks on their surface. The rash usually affects the fronts of the wrists, around the ankles and on the lower back, but can spread more widely. Lichen planus can also come up in lines where the skin has been scratched or injured (this is called Koebner's response).

Other types of lichen planus include:

- Thickened ('hypertrophic') lichen planus, which tends to affect the shins.
- Ring-shaped ('annular') lichen planus, which tends to affect the creases such as the armpits.
- Lichen planus of the scalp can cause patches of hair loss which do not usually re-grow.
- The nails can be affected, with thinning of the nail plate, or the nails becoming rough and grooved.
- Lichen planus often affects the inside of the cheeks and the gums, and this can be seen in about 50% of people who have it on the skin (see Patient Information Leaflet on [Oral Lichen Planus](#)).
- Lichen planus can affect the penis in men, causing purple or white ring-shaped (annular) patches. Unlike lichen planus on other body parts, they often do not itch.
- Lichen planus can affect the genital area in women too, but this is rare.
- In some patients oval grey-brown marks appear on the face and neck or trunk and limbs without a preceding rash. This is called Lichen planus pigmentosa.
- Blistering (bullous) lichen planus is rare and usually affects the lower legs.

In most patients lichen planus will heal within 18 months, and not return, although some patients may have a second episode many years later. Unfortunately some types of lichen planus, such as those affecting the scalp, nails or mouth, can last for many years. Even after active lichen planus has cleared, pigmented stains may persist on the skin for a long time, particularly in Asian or Afro-Caribbean skin.

## How will lichen planus be diagnosed?

The diagnosis of lichen planus is usually easy, and can be made by your medical advisor examining the rash. It may sometimes be difficult to decide between lichen planus and eczema, warts or a rash caused by medication. If there is uncertainty, the diagnosis can be confirmed by looking under the microscope at a small sample of skin (a biopsy specimen) removed after a local anaesthetic injection.

### **Can lichen planus be cured?**

No, treatment controls the condition but does not cure it. However, lichen planus usually resolves by itself.

### **How can lichen planus be treated?**

**Mild** lichen planus without irritation does not need any treatment.

**Moderate lichen planus of the skin:** Affected areas are usually treated with steroid creams or ointments. Strong (potent) steroids are usually needed to calm the itchiness of the rash. These should be applied carefully once or twice a day, as instructed by your medical advisor. As the rash and itch clear, the red-purple spots change to grey-brown flat marks. At this stage, the skin no longer requires treatment with a steroid (doing so will raise the risk of side effects such as thinning of the skin). These marks will slowly fade with time. The non-steroid prescription-only medication tacrolimus ointment and pimecrolimus cream may also be helpful for lichen planus, especially on the face and delicate areas as they do not carry any risk of causing skin thinning.

**Severe or widespread of lichen planus.** For severe or widespread lichen planus, your doctor may suggest treatment with a course of steroid tablets or ultra violet (UV) therapy with narrow band UVB or psoralen with UVA (PUVA). Other possible tablet treatments include Methotrexate, Acitretin and Hydroxychloroquine. These drugs were not developed to treat lichen planus (it is not in their product license), but there is some evidence that they may be helpful. They do not cure the rash and it is likely to worsen if they are stopped prematurely. Treatment must be carefully monitored with blood tests and like any medicine, the risks of harmful effects versus benefits need careful consideration.

**Lichen planus in the mouth** (see Patient Information Leaflet on [Oral Lichen Planus](#))

***Lichen planus of the hair or nails.*** If lichen planus is affecting your hair or nails, the damage can be permanent. This is sometimes an indication for treatment with the tablets mentioned above.

### **Self care (What can I do?)**

Try to avoid injuring or scratching your skin as it can make new spots of lichen planus appear.

### **Where can I get more information about lichen planus?**

*Web links to detailed leaflets:*

[www.dermnetnz.org/dna.lichen.planus/info.html](http://www.dermnetnz.org/dna.lichen.planus/info.html)

[www.emedicine.com/derm/topic233.htm](http://www.emedicine.com/derm/topic233.htm)

*Links to patient support group:*

*UK Lichen Planus*

Web: [www.uklp.org.uk](http://www.uklp.org.uk)

### **Where can I get information about lichen planus in the mouth?**

*Web links to detailed leaflets:*

[www.bad.org.uk/for-the-public/patient-information-leaflets/oral-lichen-planus](http://www.bad.org.uk/for-the-public/patient-information-leaflets/oral-lichen-planus)

For details of source materials used please contact the Clinical Standards Unit ([clinicalstandards@bad.org.uk](mailto:clinicalstandards@bad.org.uk)).

**This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.**

*This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel*

**BRITISH ASSOCIATION OF DERMATOLOGISTS  
PATIENT INFORMATION LEAFLET  
PRODUCED SEPTEMBER 2004  
UPDATED DECEMBER 2009, NOVEMBER 2012,  
FEBRUARY 2016  
REVIEW DATE FEBRUARY 2019**

