

LICHEN SCLEROSUS IN CHILDREN

Lichen sclerosus is an inflammation of the skin which occurs without a known cause. It is not an infection and it therefore cannot be caught from another person or passed onto someone else.

It is associated with other autoimmune diseases such as Vitiligo (loss of skin pigment) and alopecia areata (loss of scalp or body hair.) In adult women it is most commonly associated with thyroid gland problems. There is often a history in the family of one of these disorders so it is believed the Lichen sclerosus is related to one's genetic makeup. The commonest area to be affected is the genital skin although in a few children it can occur on the skin in other areas particularly the back.

In boys Lichen sclerosus usually causes inflammation and tightening of the foreskin which may be severe enough to require a circumcision usually around ages of 6 to 10. In males Lichen sclerosus very rarely, if ever, spreads to the skin around the anus.

In girls it may also involve the skin surrounding the vulva or anus. The commonest symptoms include itch, constipation because of painful cracks in the skin around the anus or pain in passing urine.

The skin initially shows inflammation but later becomes white, shiny and crinkly.

The treatment is a strong steroid ointment known as clobetasol propionate (Dermovate). It has to be used sparingly once at night according to instructions that the doctor has given you and it is important for you to record the total amounts of ointment that is used. A tube of the steroid ointment normally contains 30gms and this will usually last six months to one year.

The amount that is needed is gradually reduced as the skin disease comes under control. It may be necessary for your child to be followed up in clinic for a while even though the skin responds to the treatment to make sure that the Lichen sclerosus does not recur.