Lichen sclerosis and menopause

Vulvar lichen sclerosis (LS) is a chronic relapsing disease which affects genital labial, perineal and perianal areas, producing significant irritation and soreness and psychological distress. It is considered to be an autoimmune disease. Although it is not a precancerous condition, women with genital LS have an increased risk of squamous cell carcinoma.

Assessment
The assessment of women with vulvar lichen sclerosis (LS) should include:
- a detailed medical history, either in person or via telehealth
- ascertainment of whether there is a personal or family history of autoimmune disease
- gynecological examination
- biopsies if:
  - presentation is atypical
  - there is lack of response to treatment
  - malignancy is suspected

Differential diagnoses
- Lichen planus
- Lichen simplex chronicus
- Vitiligo
- Morphea
- Eczema
- Contact dermatitis
- Psoriasis

Management
The management of women with vulvar lichen sclerosis (LS) includes:
- First line: 3-month application of high-potency topical steroids (clobetasol propionate)
- Second-line: topical calcineurin inhibitors and imiquimod
- Education and support, as LS may lead to scarring and sexual problems
- Surgery for treatment of complications
- Lifelong monitoring is required.

Further information
Rare Disease Database. Lichen sclerosus https://rarediseases.org/rare-diseases/lichen-sclerosus

Neither systemic nor topical menopausal hormone therapy is contraindicated for women with LS.