

# Lichen planus

## What Is Lichen Planus?

**Lichen planus** is an inflammatory condition that can affect the **skin, mouth (oral mucosa), scalp, nails, or genital area**. It is believed to be **immune-mediated**, meaning the immune system triggers inflammation in the skin or mucous membranes.

It is **not contagious** and is not caused by poor hygiene.



## What Does Lichen Planus Look Like?

### On the Skin

- Small, **flat-topped purple or reddish bumps**
- Often itchy
- Common on wrists, ankles, lower legs, or lower back
- May leave dark marks (post-inflammatory hyperpigmentation) after healing

### In the Mouth (Oral Lichen Planus)

- White, lace-like patches inside cheeks
- Red or irritated areas
- Possible sensitivity to spicy or acidic foods

### On the Scalp (Lichen Planopilaris)

- Redness or scaling
- Hair thinning or permanent hair loss if untreated

## On Nails

- Ridging or thinning
  - Nail splitting
  - Rarely, nail loss
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## What Causes Lichen Planus?

The exact cause is unknown. Possible triggers include:

- Immune system overactivity
- Certain medications
- Viral infections (in some cases)
- Stress (may worsen symptoms)

Your dermatologist may recommend evaluation or testing depending on the presentation.

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## How Is Lichen Planus Treated?

Treatment depends on the severity and location.

### Common treatment options include:

- **Topical corticosteroids** (first-line for many patients)
- **Topical calcineurin inhibitors**
- **Oral medications** (for widespread or severe cases)
- **Steroid injections** (for localized lesions)
- **Phototherapy** (in selected patients)

For oral or scalp involvement, treatment is tailored carefully to prevent complications.

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## Is Lichen Planus Permanent?

- Skin lichen planus may resolve within **months to a few years**
- Oral lichen planus can be **chronic**
- Scalp involvement requires early treatment to prevent permanent hair loss

Ongoing monitoring may be recommended.

# Pre-Op Instructions (If Biopsy or Procedure Is Needed)

Most lichen planus is diagnosed clinically, but a **skin biopsy** may sometimes be needed.

If biopsy is planned:

- Continue regular medications unless instructed otherwise
  - Inform us if you take blood thinners
  - Arrive with clean skin
  - Follow standard minor procedure instructions
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# Post-Op Instructions (After Biopsy or Injections)

## What's Normal:

- Mild soreness or redness
- Small scab at biopsy site
- Temporary bruising (after injections)

## Aftercare:

- Keep the area clean and dry
- Apply ointment as directed
- Avoid picking or scratching
- Follow wound care instructions carefully

Call the office if:

- You develop increasing pain, swelling, or drainage
  - The area does not heal as expected
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# Lichen Planus FAQ

## Is lichen planus contagious?

No. It cannot be spread to others.

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## **Is it an autoimmune disease?**

It is considered immune-mediated, meaning the immune system plays a role in triggering inflammation.

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## **Does lichen planus cause permanent damage?**

Skin lesions often resolve but may leave temporary dark marks.

Scalp involvement (lichen planopilaris) can cause permanent hair loss if not treated early.

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## **Is oral lichen planus serious?**

Oral lichen planus is usually manageable but should be monitored. In rare cases, long-term changes may require closer follow-up.

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## **Does stress make it worse?**

Stress may worsen inflammation in some patients.

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## **Can lichen planus come back?**

Yes. It may flare and improve over time.

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## **Is lichen planus related to cancer?**

Skin lichen planus is not cancer.

Oral lichen planus requires periodic monitoring because chronic irritation can rarely lead to changes over many years.