



Lichen Planus

Lichen planus is a fairly common, itchy, non-infectious, non-hereditary type of rash that usually occurs in adults over the age of 40. "Planus" means "flat" - lesions are usually fairly flat, purple (although that can vary depending on skin color), small bumps. However, there are many other varieties of lichen planus including hypertrophic (very thick), lichenplanopilaris (causing alopecia), nail, and oral (can be ulcers in mouth).

The cause is unknown in most cases, but it is likely that it has something to do with the body's immune system. Sometimes it can be associated with hepatitis C or be caused by a medicine (especially gold sometimes used for arthritis, anti-malarial medicine, and some diuretics used for high blood pressure). If a person has lichen planus, injury to the skin like scratching can make the rash appear in that area.

In most cases, lichen planus is diagnosed by a doctor noting its clinical features, but sometimes a skin biopsy is needed. Sometimes your doctor may want to do a blood test for hepatitis C.

Treatment is not always necessary. In a lot of patients, lichen planus will heal within 18 months (although it can leave dark marks where it was). Mild to moderate cases of lichen planus are often treated with topical steroids. Sometimes tacrolimus ointment or pimecrolimus cream can be a helpful addition. Intralesional steroid (injecting cortisone into a few lesions) can be done for particularly resistant and troubling lesions. Severe cases of lichen planus may be treated with phototherapy or an oral medicine like acitretin, hydroxychloroquine, methotrexate, azathioprine or mycophenolate. These treatments can suppress but do not cure lichen planus, as unfortunately we have no cure, and these treatments require close follow up due to serious potential side effects.