
Vulvovaginal Lichen Planus

Vulvovaginal lichen planus is a condition where the body's immune system attacks the skin and lining of the vulva (the outer genital area) and the vagina, causing inflammation. **It is not contagious, not caused by poor hygiene, and is not an infection.** It most often affects middle aged women, but anyone can get it. Vulvovaginal lichen planus can last a long time and be difficult to treat, but treatment can help manage symptoms and prevent complications.

What causes vulvovaginal lichen planus?

Vulvovaginal lichen planus is caused by the immune system attacking the body's own healthy tissue by mistake. It is not known exactly why your body starts attacking itself, but some possible triggers include:

- Certain medicines, such as some blood pressure medicines, pain relievers, or cancer treatments
- Infections, such as hepatitis C
- Stress may make it worse
- In most cases, no specific trigger is found

What are the signs of vulvovaginal lichen planus?

The most common symptoms are pain, burning, and soreness in the vulvar and vaginal area.

Other signs and symptoms may include:

- Itching
- Pain during sex
- Increased or unusual vaginal discharge
- Rawness, redness, or open sores in the genital area
- Scarring or changes in the shape of the vulvar skin over time

Important things to know:

- Symptoms can develop slowly over months or years
- Some people have mild symptoms or no symptoms at all, even if changes are seen during an exam
- In some people, vulvovaginal lichen planus may be the first or only sign of the condition. Other people may also have lichen planus on other parts of their body (see below).

Other considerations for vulvovaginal lichen planus:

Why treatment and preventing scarring matters:

One of the most important reasons to stay on treatment is to prevent scarring. Without treatment, the inflamed surfaces of the vagina and vulva can stick together. Over time, this can lead to narrowing and even complete closure of the vaginal opening, which can make sex, pelvic exams,

and daily activities difficult. Consistent use of prescribed medicines and vaginal dilators is the best way to prevent this.

Emotional well-being and sexual health:

Living with vulvovaginal lichen planus can take a toll on your emotional health and intimate relationships. Many people with this condition experience anxiety, frustration, or feelings of isolation. Pain during sex and changes in the appearance of the genital area can affect self-image and intimacy. These feelings are common and understandable, and you are not alone.

It is important to talk openly with your care team about how the condition is affecting your quality of life, including your emotional well-being and sexual health. Your doctor can help connect you with counseling, pelvic floor physical therapy, or other support resources.

Can lichen planus affect other parts of the body?

Yes. Lichen planus can also affect the:

- **Skin:** Purple, red, brown, or grey bumps on the skin
- **Mouth:** white lacy spots, redness, pain, or sores
- **Scalp:** itching, redness, scaling, or hair loss
- **Nails:** ridges, splitting, thinning, or nail loss
- **Throat** (rare): pain or trouble swallowing

Tell your doctor if you have skin changes, mouth sores, hair loss, nail changes, or trouble swallowing.

How is vulvovaginal lichen planus diagnosed?

Vulvovaginal lichen planus can be hard to diagnose because it is uncommon and can look like other conditions, such as yeast infections or other skin disorders. Your doctor may diagnose vulvovaginal lichen planus by asking about your symptoms, your medical history and examining your vulvar (genital area):

- **Physical exam:** your doctor will examine the vulva and vagina for signs such as redness, open sores, white lacy patterns, or scarring. Your doctor may also check the mouth, skin, or other areas for signs of lichen planus since it often affects more than one part of the body.
- **Biopsy:** a small tissue sample may be taken from your vulva and checked under a microscope to help make the diagnosis.
- **Tests for virus, bacteria, or fungus:** Cultures or PCR testing may be done using a cotton swab touched to your mouth tissue. The doctor will use this sample to see if there are any viruses, bacteria, or fungus.

What is the treatment for vulvovaginal lichen planus?

Treatment can help improve symptoms, reduce inflammation, and prevent problems like scarring or narrowing of the vagina. Treatment is usually long-term, and symptoms may come back if

treatment is stopped. Complete control of symptoms is not always possible, but most people do improve with treatment.

Your doctor may recommend:

- **Steroid creams or ointments:**
 - These are the most common first treatment
 - A steroid ointment is applied to the vulva, usually once to twice daily at first, then is gradually reduced as symptoms improve
- **Intravaginal steroid suppositories:**
 - If the vagina is also affected, steroid suppositories may be inserted into the vagina to reduce inflammation and discharge
- **Vaginal dilators:**
 - Dilators may be recommended along with steroid treatment to help prevent scarring and narrowing of the vagina
- **Non-steroid creams and ointments (including calcineurin inhibitors):**
 - If steroid treatment does not help enough, medicines such as tacrolimus ointment may be tried
- **Vaginal moisturizers and topical estrogen creams:**
 - Many women with vulvovaginal lichen planus also have vaginal dryness and changes to the vulvar tissue due to hormone change over time; addition of vaginal moisturizers and topical estrogen creams can be used to help address these issues that can worsen vulvar lichen planus symptoms
- **Systemic medicines (pills) that help control the immune response:**
 - For severe or resistant cases, pills such as metronidazole, hydroxychloroquine, methotrexate, mycophenolate, and newer classes of medications such as janus kinase (JAK) inhibitors may be used if lichen planus is severe and does not improve with other treatments.
- **Surgical procedures**
 - If scarring has occurred, surgical procedures can be considered to open up areas of adhesion; these procedures are typically performed once the condition is well controlled.

Each of these treatments may have side effects. Talk with your doctor about the side effects of these treatments.

There are currently no FDA approved treatments for vulvovaginal lichen planus.

What can I do at home?

While vulvovaginal lichen planus usually requires medical treatment, there are things you can do at home to help reduce your symptoms:

- **Practice gentle vulvar care:** wash with lukewarm water only; avoid soaps, bubble baths, scented products, and douches in the genital area
- **Wear loose-fitting clothing:** choose cotton underwear and avoid tight clothing when possible

- **Use a barrier ointment:** apply plain petroleum jelly to protect irritated skin
- **Avoid known irritants:** these may include scented pads, panty liners, laundry detergents with fragrance, and feminine hygiene sprays (many over-the-counter products marketed for women's genital area have irritants and allergens – even the ones marketed as “safe”)
- **Use lubrication during sexual intercourse:** water-, oil-, or silicone-based lubricants can decrease pain and discomfort during sexual activity
- **Minimize and manage stress when possible:** stress can contribute to lichen planus flares. Consider strategies that help your body recover from stress like meditation, journaling, and therapy.
- **Follow your treatment plan:** use medicines as prescribed and attend follow-up appointments, but let your doctor know if the medications are causing trouble like burning or irritation so treatment can be adjusted

Who treats vulvovaginal lichen planus? How often should I see them?

Vulvovaginal lichen planus is often managed by a team of doctors. Your care team may include:

- **Gynecologist:** helps manage lichen planus in the vulvar and vaginal area
- **Dermatologist:** helps manage lichen planus on the skin and may co-manage vulvar lichen planus
- **Other specialists:** you may be referred to another doctor if lichen planus affects areas such as the mouth or esophagus

How often you need follow-up depends on how severe your symptoms are and how well treatment is working. An initial follow-up visit is usually recommended about 2-3 months after starting treatment. Once your condition is stable, your doctor may see you less often, but regular follow-up is important because vulvovaginal lichen planus is a long-term condition.

Vulvovaginal lichen planus carries a small risk of vulvar cancer, so your doctor may recommend periodic exams and biopsies of any changing or concerning areas to monitor over time.

Questions to ask at your visit:

- Does my vulvovaginal LP look active today?
- How can we tell whether it is spreading or getting worse?
- How long will my medication take to work?
- What side effects should I watch for?
- When should I return?

Other Resources:

- American Academy of Dermatology <https://www.aad.org/public/diseases/a-z/lichen-planus-overview>

- Vulvovaginal Disorders

<http://vulvovaginaldisorders.org/handouts/LichenPlanus.pdf>

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<https://www.lichenplanusfoundation.org>



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