

# Lichen Planus

This leaflet has been designed to improve your understanding of any treatments you may have to have and contains answers to many of the commonly-asked questions. If you have any other questions that the leaflet does not answer, or would like further explanation, please ask.

## What is lichen planus?

Lichen planus is an inflammatory condition that can affect the lining of the mouth as well as the skin. The cause is not fully understood. Lichen planus is common and affects up to 2% of the population. It is most frequent in middle age, and women are affected slightly more frequently than men. Although there is no known cure, treatment can be given to make the symptoms better.

## What does it look like?

In the mouth, lichen planus is usually found on the insides of the cheeks and on the side of the tongue, although it can also affect the gums and the roof of the mouth. Usually, lichen planus has a lace-like pattern of streaky white patches that occasionally may be thickened. Often the patches are symmetrical, ie, they affect the same site on different sides of the mouth. Sometimes lichen planus may be associated with red patches or sores.

## What lichen planus is not!

- It is **not** cancer.
- It is **not** inherited, ie, passed on from your parents.
- It is not contagious, ie, you cannot 'catch it' from someone who has it, or give it to somebody else.
- It is not related to nutrition, although some foods can make the patches of lichen planus sore.



## How is lichen planus diagnosed?

The appearance of lichen planus is usually typical and can be diagnosed by an experienced doctor just by looking inside your mouth. The diagnosis sometimes needs confirmation with a biopsy (ie, removal of a small amount of tissue which can then be looked at closely under a microscope).

## How is lichen planus treated?

If lichen planus is not causing you any problems it does not require treatment, although a close eye may be kept on you. If lichen planus is causing you problems such as soreness, treatments can be given to lessen the symptoms. Usually, these are given topically (ie, directly onto the affected areas, rather than having to take tablets to swallow).

## Is there anything else I can do?

You may find it helpful to keep a diary and look for 'trigger events' if you have a flare-up of symptoms. These flare-ups may be related to particular foods, stress or local trauma, which are the 'trigger' factors.

You may find it useful to change to a milder form of toothpaste. It is important to maintain good hygiene in the mouth.

Some lichen planus can be related to amalgam (metal) fillings. If this is so in your case, it may be suggested that a filling be replaced.

## Will I always have lichen planus?

This is difficult to say. Some people suffer for only a few months before their symptoms settle down. Others may suffer for several years. Once the symptoms disappear, they may or may not return at a later date.

**For further information please contact: Montagu Hospital Tel 01709 321185**

## Patient Advice & Liaison Service (PALS)

PALS staff are available to offer advice or information on healthcare matters. The office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email. PALS staff can also visit inpatients on all Trust sites.

**The contact details are:**

**Telephone: 01302 553140 or 0800 028 8059**

**Minicom (Text talk): 01302 553140**

**Email: [pals.dbh@dbh.nhs.uk](mailto:pals.dbh@dbh.nhs.uk)**

