

a series of fact sheets written
by experts in the field of liver
disease

HCV – Extrahepatic Manifestations: Lichen Planus

Alan Franciscus, Editor-in-Chief

Lichen planus is fairly common skin disorder that last for months to years. Lichen planus affects about 1 or 2% of the U.S. population and usually affects people between the ages of 30 and 70 years old and is slightly more prevalent in women than in men. The exact cause of lichen planus is unknown, but it seems to be triggered by stress, genetics, allergic reactions to medicines, and by viral infections such as hepatitis C. The onset may be gradual or quick. There have been studies that have found a prevalence of HCV in people with lichen planus from 3.5% to 60%. For this reason, it has been recommended that people with lichen planus (especially with elevated liver enzymes) should be tested for HCV.

Lichen planus typically affects the skin, nails, vulva, penis, and mucous membranes including the mouth. The symptoms appear as purple or plaque like shiny flat-topped itchy bumps. Lichen planus is not an infectious disease so it can not be transmitted to others. There is no cure for lichen planus, but treatment is affective in alleviating the symptoms (itching of the skin lesions) and improves the appearance of the rashes.

Mouth

Oral lichen planus is an inflammatory condition that affects the lining of the mouth usually on the inside of the cheeks, but it can also affect the gums, tongue and inner cheeks of the mouth. Although rare it can also affect the throat or esophagus. It appears as white, interconnecting lines which resemble and are named after the lichen plant, but lichen planus is NOT related in any way to the plant. Severe cases may involve painful sores and ulcers of the mouth. Very severe cases of lichen planus of the mouth can slightly increase the risk of oral cancer. For this reason it is important to control the disease with medications, good oral hygiene, and regular physical exams to monitor any changes.

Lichen planus that affects the mouth is generally found by a dentist or dental hygienist. The diagnosis may be confirmed by a biopsy. Yeast infections are commonly found in association with lichen planus or can be triggered by topical steroids used to treat it. The treatment of the yeast infection sometimes improve the symptoms of oral lichen planus.

Alcohol, tobacco, spicy foods, peppermint, cinnamon, citrus type foods and stressful situations trigger the symptoms and should be avoided if possible. Treatment of oral lichen planus includes the use of topical steroids as well as controlling the triggers. Regular dental exams are recommended to look for any tissue changes. Teeth cleaning and good personal oral hygiene will improve the symptoms.

Skin

Lichen planus most commonly affects the skin. The bumps can appear on any skin surface, but are most often found on the inside of the wrists and ankles, the lower legs, back, and genital regions. In severe cases, the bumps can be extremely itchy

and painful. When the lesions heal the skin may become discolored. The skin discoloration usually fades but may cause scarring especially when the scalp is involved. Treatment consists of topical steroids and antihistamines used to relieve the itching. Severe cases may require the use of oral corticosteroids such as cortisone or prednisone. Extreme cases may require photo chemotherapy light treatment and prescription drugs to help control and alleviate the symptoms. Other strategies to reduce the symptoms include the use of oatmeal baths (Aveeno), cool compresses to the affected area of the skin, and anti-itch topical creams.



Hair

Lichen planus on the scalp can appear as redness, hair thinning, and hair loss. If left untreated it can cause permanent scarring and inflammation of hair follicles leading to permanent hair loss (alopecia). To prevent permanent damage, oral steroids, plus topical steroids as well as prescribed oral medications should be taken as soon as possible to prevent permanent damage.

Nails

Lichen planus can also affect the nails leading to damage of the nail root. Symptoms include grooving, splitting, nail thinning as well as nail loss. In severe cases the nail loss can result in permanent nail root damage.

For more information on the Web:

The Texas A & M University System—Baylor College of Dentistry
<http://www.tambcd.edu/lichen/>

Be Sure to Check Out All the Factsheets in this Series:

HCV– Extrahepatic Manifestations:

- *An Overview of HCV-Related Extrahepatic Manifestations*
- *Cryoglobulinemia*
- *Essential Cryoglobulinemic Vasculitis*
- *Fibromyalgia*
- *Membranoproliferative Glomerulonephritis*
- *Lichen Planus*
- *Non-Hodgkin's Lymphoma (NHL)*
- *Peripheral Neuropathy (PN)*
- *Porphyria Cutanea Tarda (PCT)*
- *Pruritus (Itching)*
- *Raynaud's Phenomenon*
- *Sjögren's (Show grins) Syndrome*
- *Systemic Lupus Erythematosus*
- *Waldenstrom Macroglobulinemia*

For more information about hepatitis C, hepatitis B and HCV coinfections, please visit www.hcvadvocate.org.

• *hcspFACTsheet* •
 A publication of the Hepatitis C Support Project

<p>Executive Director Editor-in-Chief, HCSP Publications Alan Franciscus</p> <p>Design Paula Fener</p> <p>Production C.D. Mazoff, PhD</p> <p>Contact information: Hepatitis C Support Project PO Box 427037 San Francisco, CA 94142-7037 alanfranciscus@hcvadvocate.org</p>	<p>The information in this fact sheet is designed to help you understand and manage HCV and is not intended as medical advice. All persons with HCV should consult a medical practitioner for diagnosis and treatment of HCV.</p> <p>This information is provided by the Hepatitis C Support Project • a nonprofit organization for HCV education, support and advocacy • © 2009 Hepatitis C Support Project • Reprint permission is granted and encouraged with credit to the Hepatitis C Support Project.</p>
--	---



HCV ADVOCATE
 hcvadvocate.org