



INFLAMMATORY SKIN DISEASES (OTHER THAN ATOPIC DERMATITIS & PSORIASIS)

## CLINICAL POLYMORPHISM OF LICHEN PLANUS

*Uladzimir P. Adaskevich<sup>(1)</sup>*

*Vitebsk State Medical University, Dermatovenereology, Vitebsk, Belarus<sup>(1)</sup>*

**Background:** Lichen planus is a common subacute or chronic itchy papulosquamous disease affecting the skin, mucous membranes, hair and nails.

**Purpose:** The study is aimed at investigation of clinical varieties of typical and atypical lichen planus and its rare syndromes.

**Patients and Methods:** Within 24 months we observed 64 patients (25 male and 39 female) aged from 18 to 83. Clinical, dermatoscopic, pathomorphological and special instrumental methods were used to confirm the diagnosis.

**Results and Discussion:** Based on examination of 64 patients with lichen planus we distinguished the following clinical forms of the condition: classical – 23 (36%), hypertrophic – 5 (8%), palmoplantar – 5 (8%), pigmentary – 4 (6%), exanthematous – 3 (5%), follicular – 2 (3%), and annular, atrophic and inverse form, each in one patient. The duration of the disease in 37 patients (58%) was < 1 year. Fitzpatrick skin phototypes II and III were found in 54 patients (84%). The lesions were located on the skin in 56 patients (87,5%), oral mucosa in 25 (39%), genital mucosa in 17 (26,5%), on the perianal skin and in the intergluteal fold in 4 (6%), on the scalp in 11 (17%) patients; the affection of the nails was seen in 7 (11%) patients. Rare syndromes of lichen planus were diagnosed in 5 (8%) patients, namely overlap syndrome with lupus erythematosus, overlap syndrome with sclero-atrophic lichen, vulvovaginal-gingival syndrome, Grinspan's syndrome, Graham-Little-Piccardi-Lasseur syndrome. Manifold clinical picture of lichen planus requires an individualized approach to its treatment. Therapeutic options include local corticosteroids, calcineurin inhibitors, vitamin D derivatives. Systemic treatment is administered in case of widespread and recurrent cases (corticosteroids, methotrexate, hydroxychloroquine, azathioprine, cyclosporine).

**Conclusion:** Lichen planus is characterized by polymorphic affection of the skin and its appendages, atypical clinical forms and rare syndromes which requires an individualized approach to patients' treatment.

