

Preventing the long-term consequences of lichen sclerosus



To the Editor: Heymann¹ makes some useful points in his thoughtful article, commenting on the important article by Morrel et al.² The physical and psychosexual consequences of urogenital lichen sclerosus can indeed be terrible. Prevention, early diagnosis, and effective treatment are essential to mitigate—ideally, to abrogate altogether—these appalling sequelae. The key to these aspirations has to be, as with all diseases, a clear comprehension of the etiopathogenesis. However, this topic received scant attention from your recent contributors.

A compelling argument has been articulated in recent years for the pivotal roles of occlusion of urine due to microincontinence and a dysfunctional foreskin in the causation of male genital lichen sclerosus.³⁻⁶ It is neither necessary nor appropriate to present all of the evidence here. However, I wish to register my surprise and disappointment that there seems to be no enthusiasm or interest to apply these hard-won insights to the prevention, diagnosis, management, and (most crucially) research of pediatric (and, for that matter, adult female) disease. They offer the promise of obviating for women some of the cruel life-changing sequelae, pointedly highlighted by these recent publications—as has been demonstrably achieved in men with lichen sclerosus.^{4,6}

Christopher B. Bunker, MD, FRCP

From University College London Hospitals, United Kingdom.

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Correspondence to: Christopher B. Bunker, MD, FRCP, University College Hospitals London, Dermatology, 235 Euston Rd, London NW12BU, United Kingdom

E-mail: cbbunker@me.com

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