

CHAPTER 26

LICHEN PLANUS (L43)

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REMEMBER

- ▶ Lichen planus (LP) is a chronic dermatosis characterized by itchy, purple, polygonal papules, and plaques.
- ▶ As the lesions heal, it often causes post-inflammatory hyperpigmentation.
- ▶ Lichen planus can involve the skin, mucous membranes (especially the oral mucosa), nails, scalp, external ear canal, genital areas, and/or esophagus.
- ▶ The exact prevalence of LP is unknown. However, the prevalence of LP is estimated to be 0.22%-5% worldwide. There is no racial difference in prevalence. The mean age of onset of the disease is 50-60 years. It is rarely observed in pediatric population.
- ▶ There are many clinical forms of lichen planus (atrophic, linear, inverse, annular, hypertrophic, actinic, vesiculobullous types, lichen planus pigmentosus). In classical LP, thin white lines called Wickham's striae can be observed on the surface of the papules or plaques.
- ▶ In the etiology of LP, hepatitis C virus, various drugs, vaccines (e.g. hepatitis B and influenza vaccines, some infections and contact allergens are blamed).
- ▶ Cutaneous LP has been associated with some HLA alleles: HLA-A3, -A5, -A28, -B16 and -Bw35.

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HATIRLA

- ▶ Liken planus (LP) kaşıntılı, mor, poligonal papül ve plaklar ile karakterize kronik bir dermatozdur.
- ▶ Lezyonlar iyileşirken genellikle postinflamatuvar hiperpigmentasyona neden olur.
- ▶ Liken planus deriyi, özellikle oral mukoza olmak üzere mukozaları, tırnakları, saçlı deriyi, dış kulak yolunu, genital bölgeleri ve/veya özafagusu tutabilir.
- ▶ LP'nin kesin prevalansı bilinmemektedir. Bununla birlikte, LP'nin prevalansı dünya çapında %0.22-%5 olarak tahmin edilmektedir. Prevalansta ırksal bir farklılık söz konusu değildir. Hastalığın ortalama başlangıç yaşı 50-60'tır. Nadiren çocuklarda da görülebilir.
- ▶ Liken planusun birçok klinik formu (atrofik, lineer, invers, annüler, hipertrofik, aktinik, vezikülobüllöz tipler, liken planus pigmentosus) vardır. Klasik LP'de papül veya plaklarının yüzeyinde Wickham striaları olarak adlandırılan ince beyaz çizgiler görülebilir.
- ▶ LP'nin etyolojisinde hepatit C virüsü, çeşitli ilaçlar, aşılarda (ör. Hepatit B ve influenza aşılı, bazı enfeksiyonlar ve kontakt allerjenler suçlanmaktadır).
- ▶ Kutanoz LP ile bazı HLA alelleri ile ilişkilendirilmiştir: HLA-A3, -A5, -A28, -B16 ve -Bw35.

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