This leaflet has been designed to explain your condition and it contains answers to many frequently asked questions. If you have any other questions that the leaflet does not answer, or if you would like further information, please ask us.

What is oral lichen planus?
Lichen planus is an inflammatory condition of the skin, but it can also affect the mouth (oral lichen planus) and genital region. Oral lichen planus can occur on its own or in combination with lichen planus of the skin or genitals. It is thought to affect 1 to 2% of the population, and it typically affects middle-aged and elderly women. Oral lichen planus can occur in men but children are rarely affected.

What causes oral lichen planus?
The cause of oral lichen planus is not known in most cases, but it is likely to have something to do with the body’s immune system. It can sometimes be caused by certain medicines and materials used in dental fillings. Oral lichen planus is not an infection and it is not contagious.

Is oral lichen planus hereditary?
It is uncommon for more than one member of a family to be affected with oral lichen planus.

What are the symptoms of oral lichen planus?
The symptoms of oral lichen planus may include a burning or stinging discomfort in the mouth when eating or drinking. Mild cases may be symptom-free. Spicy foods, citrus fruits and alcohol can be particularly troublesome. If your gums are affected, they may become tender and tooth-brushing can be uncomfortable. Ulcers (often called erosions) may occur and are especially painful.

What does oral lichen planus look like?
Most often, oral lichen planus looks like a white, lace-like pattern on the tongue and the insides of the cheeks. However, it can appear as white and red patches or as areas of ulceration (open sores) on the lining of the mouth. If the gums are affected, they can become red and shiny and this is called ‘desquamative gingivitis’.

How is oral lichen planus diagnosed?
Your dentist or doctor may be able to diagnose oral lichen planus by simply looking at your mouth. However, it is often necessary to take a small sample (biopsy) from an affected area inside the mouth for microscopic examination. A local anaesthetic injection to ‘numb’ the biopsy site is necessary for this procedure. Sometimes, allergy testing may be suggested.

Can oral lichen planus be cured?
In most cases oral lichen planus cannot be cured but it may disappear by itself. It tends to last longer than lichen planus of the skin and can last for a number of years. However, there are treatments to ease the symptoms. In rare cases where oral lichen planus is caused by medicines or
materials in dental fillings, changing these may result in an improvement or resolution. Changes in medication should only be made with specialist advice and supervision.

Is oral lichen planus serious?
In most patients, oral lichen planus is not serious. However, an important, although uncommon, feature of oral lichen planus is the risk of developing mouth cancer. For example, a patient who has this condition for ten years has a 1 in a 100 chance of developing mouth cancer.

How can oral lichen planus be treated?
• Mild cases of oral lichen planus may be symptom-free and treatment is not required.
• Anaesthetic (analgesic) mouthwashes are available if your mouth becomes sore, and these are particularly helpful if used before meals.
• Corticosteroid preparations, which can be applied directly to the mouth, are effective for most patients. These are available as mouthwashes, sprays, pastes and small dissolvable pellets. If your gums are affected, it is important that you keep your teeth as clean as possible by regular and effective tooth brushing. Your dentist or dental hygienist will be able to give oral hygiene advice and will arrange for scaling of your teeth when it’s needed.
• An antiseptic mouthwash or gel may be recommended to help you to keep your mouth clean, particularly at times when your gums are sore.
• Severe cases of oral lichen planus may need treatment with a short course of steroid tablets. Long-term treatment with steroid tablets is not recommended because of side-effects.
• In a few cases, other types of oral drug treatment may be required. These ease the oral lichen planus by suppressing the body’s immune system. These can be associated with a number of side-effects which should be discussed with your specialist. Regular blood tests are required when taking most of these drugs, particularly during the early stages of treatment.

What can I do to ease the condition?
It is extremely important to keep your mouth very clean. Your dentist or dental hygienist can help you with this. Some toothpastes may make your oral lichen planus worse, in which case your dentist may suggest a different toothpaste. Avoid spicy, acidic or salty foods if these make your mouth sore. The small risk of oral lichen planus becoming cancerous makes it important that you ensure your mouth is checked on a regular basis by a dentist or oral specialist. By doing this, any early changes can be spotted. Smoking and excessive amounts of alcohol are the main risk factors for mouth cancer. You should stop smoking and keep your alcohol intake to recommended limits.

Where can I get more information about oral lichen planus?
Web links to detailed leaflets:
http://www.emedicine.com/derm/TOPIC663.HTM

While every effort has been made to ensure that the information given in this leaflet is accurate, not every treatment will be suitable or effective for every person. Your own doctor or dentist will advise you in more detail.

This leaflet is available online at http://www.ucc.ie/en/dentalschool/patients