

**(CIRCUMSCRIBED NEURODERMATITIS)****DEFINITIONS**

1. **Lichenification** is a term used to describe a pattern of response of a predisposed skin to repeated rubbing or scratching.
2. The term **Lichen Simplex** is used where there is no known predisposing skin disorder.
3. The term **secondary lichenification** is applied if the rubbing or scratching is initiated by a pruritic dermatosis such as atopic eczema. The distinction may become blurred as secondary lichenification can become self perpetuating after the initial dermatosis has subsided.

**CLINICAL MANIFESTATIONS**

4. Pruritus is the predominant symptom and is often out of proportion to the extent of the objective skin changes. Paroxysms of great intensity may be triggered off by touch or emotional events and the scratching is violent causing a sore skin.
5. Single sites or multiple sites may be involved and, although the condition may develop on any part of the body, the nape and sides of the neck, lower legs and ankles, scalp, upper thighs, genital region and extensor aspect of the forearms are the commonly affected areas.
6. During the early stages the skin is reddened and oedematous and the normal markings are exaggerated. The redness and oedema subside and the central area becomes scaly, thickened and sometimes pigmented. The affected skin resembles tree bark. Surrounding this central plaque is a zone of lichenoid papules and beyond this an indefinite zone of slight thickening and pigmentation which merges with the normal skin. These features may be greatly modified by the site and duration of the lesion.

**AETIOLOGY**

7. Lichen simplex is rare in childhood and the peak incidence is between 30 and 50 years but it is seen at any age from adolescence onwards.
8. Not all individuals are capable of developing lichenification. There is a well marked racial variation in the capacity of the skin to lichenify and Mongoloids have a high incidence of lichenification. Lichenification is a characteristic feature of the atopic state but not all atopics lichenify and lichenification is seen in many patients with no stigmata of atopy.
9. In a predisposed subject emotional tensions play an important role in the development and perpetuation of this condition.

## **CONCLUSION**

10. Lichen simplex is a primary skin disorder characterised by pruritus and thickening of the skin. Emotional tensions may cause this condition to develop in individuals with a genetically determined predisposition to lichenification.

## **REFERENCE**

Burton J L. Eczema, Lichenification, Prurigo and Erythroderma - Lichenification and lichen simplex. In: (Eds) Champion R H, Burton J L and Ebling F J G. Textbook of Dermatology. Oxford. Blackwell Scientific Publications. 5<sup>th</sup> Ed. 1992:578-580.

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