

Author Response to: Letter To the Editor Concerning 'Lichen Sclerosus in Prepubertal Males: Breaking the Paradigm'



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Dear Editor and Dr Morrel,

We sincerely appreciated your paper on penile lichen sclerosus (LS),¹ and we are glad to have the chance to disambiguate possible misrepresentation of such publication from our side.

The aim of our work was to underline that surgery can be applied as a first-line treatment. This was also the shared starting assumption for further reflections in the cited publication. Therefore, the citation of such work was only aimed at sharing such premises, and not at attributing to you the claim that surgery always eliminates the need for chronic steroidal therapy, which of course is not in line with the conclusions of your paper.

We completely agree that a multidisciplinary approach is in general the safer option for patients affected by LS, with topical corticosteroids and combined medical and surgical treatments playing a key role. We also acknowledge that surgical treatment alone is

not suitable for all cases: disease localisation in the glans area provides a paradigmatic example that nearly inevitably requires long-term topical steroidal therapy.

On the other hand, our retrospective evaluation on a paediatric casuistry² is encouraging towards the possibility of employing surgery as a steroid-sparing curative strategy in most cases of LS-related phimosis.

Lastly, as also stated in our abstract, we are totally open to different positions in this setting, since longer-term follow-up and larger studies are needed to confirm our findings.

Sincerely,
Alessia Paganelli
Paolo Viscardo Fabbri
Filippo Ghidini
Laura Bigi
Claudia Lasagni
Pier Luca Ceccarelli

References

1. Morrel B et al. Penile lichen sclerosus, circumcision and sequelae, what are the questions? *Transl Androl Urol.* 2022;11(7): 910-3.
2. Paganelli A et al. Lichen sclerosus in prepubertal males: breaking the paradigm. *EMJ Dermatol.* 2023;11[1]:52-4.