PATIENT INFORMATION LEAFLET

ZOON BALANITIS



WHAT ARE THE AIMS OF THIS LEAFLET?

This leaflet has been written to help you understand more about Zoon balanitis. It tells you what this condition is, what causes it, what can be done about it, and where you can find out more about it.

WHAT IS ZOON BALANITIS?

Zoon balanitis describes inflammation of the head of the penis (glans penis) and foreskin. It usually affects middle-aged to elderly men who have not been circumcised.

The word balanitis is derived from the Greek word *balanos*, which means 'acorn'. The ending '-itis' stands for inflammation. Balanitis means inflammation of the glans penis. Zoon balanitis is named after Professor Zoon, a Dutch dermatologist, who described the condition in 1952. In addition to the glans penis, the foreskin is often involved.

It has also been called 'balanitis circumscripta plasmacellularis' because the patches are well defined, and 'plasma cell balanitis' because many plasma cells (a type of white blood cell) may be seen when the affected skin is examined under the microscope.

WHAT CAUSES ZOON BALANITIS?

It is thought that Zoon balanitis is a reaction to another underlying condition. Dead skin cells, droplets of urine, soap particles and skin flora that are normally present on the skin are trapped by the foreskin that is not functioning normally. This leads to irritation and inflammation of the foreskin and the glans penis underneath it. Zoon balanitis is not caused

by an infection, and cannot be passed on to a sexual partner.

A similar condition has also been described in women affecting the vulva (Zoon vulvitis).

Zoon balanitis may be present on its own, or more often is a sign of an underlying skin condition such as lichen sclerosus or lichen planus. Lichen sclerosus can make the foreskin tight and more difficult to retract.

IS ZOON BALANITIS HEREDITARY?

No.

WHAT ARE THE SYMPTOMS OF ZOON BALANITIS?

Zoon balanitis usually causes no symptoms and looks worse than it feels. It may cause itching and discomfort.

WHAT DOES ZOON BALANITIS LOOK LIKE?

Glistening, moist, bright red or autumn brown patches are sharply demarcated (defined) from the surrounding normal-looking skin. Some dark red or brownish stippling (numerous small dots or specks) may be seen. The distribution is often symmetrical affecting the glans penis and adjacent foreskin, described as 'kissing' lesions.

HOW IS ZOON BALANITIS DIAGNOSED?

The diagnosis can be made by a doctor after carefully examining your skin.

Sometimes a small skin sample may be taken from the skin of the penis and checked under the microscope to confirm the diagnosis and check for possible

underlying conditions, as mentioned above. This is called a skin biopsy and requires a local anaesthetic injection and possibly stitches to close the wound. A small scar may result.

CAN ZOON BALANITIS BE CURED?

Zoon balanitis may last for several years, and can flare intermittently. Sometimes it can be improved with altered washing habits and the use of treatments described below.

Zoon balanitis may be cured by circumcision, a surgical procedure to remove the foreskin.

HOW CAN ZOON BALANITIS BE TREATED?

The treatment of Zoon balanitis depends on the underlying causes. Generally, steroid creams or ointments of mild to potent strength, with or without the addition of anti-bacterial or anti-yeast agents may be prescribed by your doctor and can be used for short periods intermittently. For personal hygiene, it is recommended to use a soap substitute instead of regular soap, to avoid irritating the skin. Your doctor will discuss with you how to use these treatments.

SELF-CARE (WHAT CAN I DO?)

The skin of the glans penis needs to be washed regularly, after fully retracting the foreskin. Instead of using soap, washing with a soap substitute such as a bland moisturising cream can be helpful.

It may help to retract your foreskin whenever possible, to allow any moisture to dry out naturally. This is particularly the case before and after urinating. Regularly applying a bland ointment to the glans penis and foreskin may help to provide a protective barrier.

It is good practice to keep an eye on your skin. Anything unusual, for example deeper sores which do not heal, or areas of lumpiness, should be reported to your doctor.

WHERE CAN I GET MORE INFORMATION ABOUT ZOON BALANITIS?

Web links to detailed leaflets:

http://www.dermnetnz.org/site-age-specific/plasma-cell.html

For details of source materials used please contact the Clinical Standards Unit (clinicalstandards@bad.org.uk).

This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.

This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel

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