

PATIENT EDUCATION



The American College of
Obstetricians and Gynecologists
WOMEN'S HEALTH CARE PHYSICIANS

Disorders of the Vulva

Certain health problems can affect the **vulva**. Itching and pain are the two most common symptoms of a vulvar disorder. There also may be changes on the skin of the vulva. Some problems are short term and easy to treat. Other problems can be long term and require ongoing treatment and follow-up.

This pamphlet explains

- signs, symptoms, and treatment of vulvar disorders
- how to examine your vulva
- self-care steps you can take to prevent problems

The Vulva

The external female genital area is called the vulva. The outer folds of skin are called the **labia majora**, and the inner folds are called the **labia minora**. Within the labia minora is the **vestibule**. The **vagina** and **urethra** open into the vestibule. On either side of the opening of the urethra are the openings to tiny glands called **Skene glands**. Two additional glands, called **Bartholin glands**, are located on either side of the vaginal opening. The **clitoris** is located at the top of the labia minora. It actually extends deep inside the body. The visible part is called the glans, which is partially covered by a fold of tissue called the clitoral hood. The **perineum** is the area between the **anus** and the vagina.

Signs, Symptoms, and Treatment of Vulvar Disorders

There are a number of disorders that may affect the vulva. In addition to the disorders discussed in this pamphlet, infections (such as yeast infection) and **sexually transmitted infections** (such as **human**

papillomavirus [HPV] infection and **genital herpes**) can cause vulvar signs and symptoms.

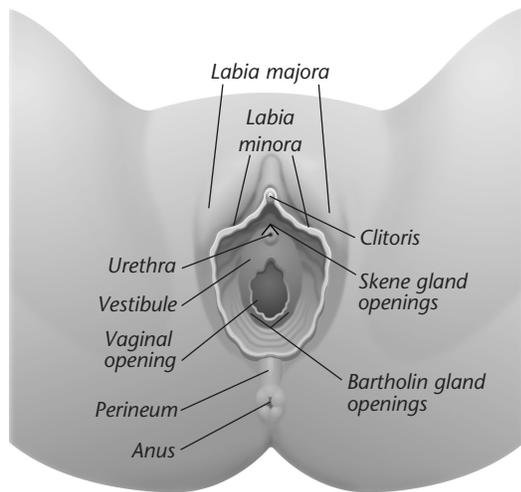
Doing a vulvar self-exam is a good way to become familiar with what is normal for you (see box “The Vulvar Self-Exam”). If you see changes on the skin of the vulva, or if you have itching, burning, or pain, contact your gynecologist or other member of your health care team. They may ask where the pain is located, when it occurs, or what has come in contact with your vulva. They may examine you or do tests on a sample of vaginal discharge collected with a cotton swab. In some cases, a **biopsy** is needed to confirm diagnosis of a disease.

Vulvar Skin Disorders

There are several kinds of skin disorders that affect the vulva. Some are caused by contact with irritating substances. Others may be **autoimmune disorders**, in which the immune system mistakenly reacts against the body's own tissues.

Folliculitis. Folliculitis appears as small, red, and sometimes painful bumps on the labia majora. Folliculitis

The Vulvar Self-Exam



When you do this exam, look for the following changes:

- Redness
- Swelling
- Dark- or light-colored spots
- Blisters
- Bumps
- Any other changes

How to Do a Vulvar Self-Exam

1. Locate a hand mirror—a magnifying mirror may work best.
2. Wash your hands before you begin. Lie or sit up in a comfortable position near a bright light. It may help to prop up your back with a pillow, or you can squat or kneel. The key is to find a position in which you can clearly see the vulvar area, perineum, and anus.
3. Gently separate the outer folds of your vulva. Look for changes or signs of a problem.
4. Next, separate the inner folds and look at the area between them. Also look at the entrance to the vagina.
5. Gently pull back the hood of your clitoris and examine the area under the hood and on the tip of the clitoris.
6. Be sure to inspect the area around the urethra, the perineum, the anus, and the outside of the labia majora.

is very common. It is caused by bacteria that infects a hair follicle. This can happen because of shaving, waxing, or even friction. Folliculitis often goes away by itself. Attention to hygiene, wearing loose clothing, and warm compresses applied to the area can help speed up the healing process. If the bumps do not go away or they get bigger, see your gynecologist or other health care professional. You may need additional treatment.

Contact Dermatitis. Contact dermatitis is caused by irritation of the skin of the vulva by things such as soaps, fabrics, or perfumes (see box “Causes of Contact Dermatitis”). Contact dermatitis is a common problem that often is avoidable. Signs and symptoms include extreme itching, rawness, stinging, burning, and pain. Treatment involves avoidance of the source of irritation and stopping the itching so that the skin can heal. Ice packs or cold compresses can reduce irritation. A thin layer of plain petroleum jelly can be applied to protect the skin. Medication may be needed for severe cases.

Bartholin Gland Cyst. The Bartholin glands are located under the skin on either side of the opening of the vagina. They release a fluid that helps with lubrication during sexual intercourse. If these glands become blocked, a **cyst** can form, causing a swollen bump near the opening of the vagina. Bartholin’s cysts usually are not painful unless they become infected. If this occurs, an **abscess** can form.

If a cyst is not causing pain, it can be treated at home by sitting in a warm, shallow bath or by applying a warm compress. If an abscess has formed, treatment involves draining the cyst using a needle or other instrument in a health care professional’s office.

Lichen Simplex Chronicus. Lichen simplex chronicus may be a result of contact dermatitis or other skin disorder that has been present for a long time. Thickened, scaly areas called “plaques” appear on the vulvar skin. These plaques cause intense itching that may interfere with sleep. Like contact dermatitis, this condition is

Causes of Contact Dermatitis

Contact dermatitis is caused by irritation of the skin of the vulva. Common irritants include the following:

- Perfumed or dyed toilet tissue; baby wipes
- Underwear or bathing suits
- Soaps, bubble bath, bath salts, and talcum powder
- Detergents, fabric softeners, and dryer sheets
- Feminine hygiene sprays, tampons, or deodorant pads
- Spermicidal foams, creams, and jellies
- Rubber products, such as diaphragms and condoms
- Creams or ointments applied to the vulva
- Saliva or semen
- Poison ivy or similar plants

If you have contact dermatitis and you are in contact with more than one of these irritants, it is recommended that you eliminate one irritant at a time. This can help you find out which irritant is the cause of your symptoms.

treated by stopping the “itch–scratch” cycle so that the skin can heal. Steroid creams often are used for this purpose. The underlying condition should be treated as well.

Lichen Sclerosus. The exact cause of lichen sclerosus is unknown. It may be an autoimmune disorder. Signs and symptoms include itching, burning, pain during sex, and tears in the skin. The vulvar skin may appear thin, white, and crinkled. White bumps may be present with dark purple coloring. Steroid cream is used to treat lichen sclerosus.

Lichen Planus. Although its cause is not known for certain, lichen planus is probably an autoimmune disorder. It most commonly occurs on the mucous membranes of the mouth. Occasionally, it also affects the skin of the genitals. Itching, soreness, burning, and abnormal discharge may occur. The appearance of lichen planus is varied. There may be white streaks on the vulvar skin, or the entire surface may be white. There may be bumps that are dark pink in color.

Medicated creams or ointments, vaginal tablets, prescription pills, or injections can be used to treat lichen planus. This condition is difficult to treat and usually involves long-term treatment and follow-up.

Vulvodynia

Vulvodynia may cause different types of pain. This pain is often described as burning, stinging, irritation, and rawness. Other words that may be used include aching, soreness, throbbing, and swelling. Pain may be felt over the entire vulva or only in one place, such as the clitoris or vestibule. Some women have general vulvar pain as well as areas that are especially painful.

Symptoms of vulvodynia may be constant or they may come and go. Symptoms can start and stop without warning, or they may occur only when the area is touched. Inserting a tampon, having sex, or wearing snug underwear can be triggers for some women.

A variety of methods are used to treat vulvodynia, including self-care measures, medications, dietary changes, biofeedback training, physical therapy, sexual counseling, or surgery. No one treatment works for everyone. You may need to try a number of treatments.

Genitourinary Syndrome of Menopause

Genitourinary syndrome of menopause (GSM) is a group of signs and symptoms caused by a decrease in **estrogen** and other sex hormones. This decline happens during **perimenopause** and **menopause**. Symptoms can include vaginal dryness, pain with sex, bladder problems, frequent **urinary tract infections (UTIs)**, burning, itching, and irritation. Some women also may have pain during sexual intercourse. The vulva can become more sensitive to irritants. Infections may occur more easily.

There are several treatments for GSM. Vaginal moisturizers and lubricants can help relieve vaginal dryness and painful sexual intercourse. You can buy these without a prescription. Estrogen therapy comes as a

vaginal cream, ring, or tablet. You need a prescription for this therapy. **Selective estrogen receptor modulators (SERMs)** are drugs that stimulate certain tissues that respond to estrogen while not stimulating other tissues that respond to estrogen. One SERM has been approved to treat painful intercourse in postmenopausal women. If you are interested in SERMs, talk with your gynecologist about their risks and benefits.

Vulvar Intraepithelial Neoplasia

The presence of abnormal vulvar cells that are not yet cancer is called vulvar intraepithelial neoplasia (VIN). VIN often is caused by HPV infection. Signs and symptoms include itching, burning, or abnormal skin that may be bumpy, smooth, or a different color like white, brown, or red. VIN should be treated to prevent the development of cancer. VIN can be treated with a cream that is applied to the skin, laser treatment, or surgery. The HPV vaccine may help prevent VIN.

Cancer

Cancer is the growth of abnormal cells. Vulvar cancer can be caused by infection with HPV. Other forms of cancer that can affect the vulva include melanoma (skin cancer) or Paget disease. Paget disease of the vulva may be a sign of cancer in another area of the body, such as the breast or colon. Signs and symptoms may include itching, burning, **inflammation**, or pain. Other symptoms of cancer include a lump or sore on the vulva, changes in the skin color, or a bump in the groin. Cancer is diagnosed by biopsy.

The type of treatment depends on the stage of cancer. Surgery often is needed to remove all cancerous tissue. **Radiation therapy** and **chemotherapy** also may be needed in addition to surgery.

Other Conditions

Diseases that affect other parts of the body can also affect the vulva. If the main disease is treated, vulvar symptoms often go away. For example, psoriasis, a skin disease, can appear on the outer labia with distinct pink patches that may itch. Psoriasis can be treated by avoiding irritants, wearing loose clothing, and applying petroleum jelly or other prescription ointments. Crohn disease is a long-term disease of the digestive system. It can cause inflammation, swelling, sores, or bumps on the vulva.

Care of the Vulva

The following self-care measures may help clear up or prevent certain vulvar problems:

- Keep your vulva clean by rinsing with warm water and gently patting, not rubbing, it dry.
- Do not wear tight-fitting pants or underwear. Wear only cotton underwear.
- Do not wear pantyhose (unless they have a cotton crotch).
- Do not use pads or tampons that contain a deodorant or a plastic coating.

- Do not use perfumed soap or scented toilet paper.
- Do not douche or use feminine sprays or talcum powders.

Finally...

Vulvar disorders are common and can be treated. If you have signs and symptoms, contact your gynecologist or other member of your health care team. It also is a good idea to do a regular vulvar exam. Recognizing changes from what is normal for you may be helpful in the early diagnosis and treatment of many vulvar disorders.

Glossary

Abscess: A collection of pus found in tissue or an organ.

Anus: The opening of the digestive tract through which bowel movements leave the body.

Autoimmune Disorders: Conditions in which the body attacks its own tissues.

Bartholin Glands: Two glands located on either side of the vaginal opening that make a fluid during sexual activity.

Biopsy: A minor surgical procedure to remove a small piece of tissue. This tissue is examined under a microscope in a laboratory.

Chemotherapy: Treatment of cancer with drugs.

Clitoris: A female sex organ found near the opening of the vagina.

Cyst: A sac or pouch filled with fluid.

Estrogen: A female hormone produced in the ovaries.

Genital Herpes: A sexually transmitted infection (STI) caused by a virus. Herpes causes painful, highly infectious sores on or around the vulva and penis.

Genitourinary Syndrome of Menopause (GSM): A collection of signs and symptoms caused by a decrease in estrogen and other sex hormones. Signs and symptoms can include vaginal dryness, pain with sex, bladder symptoms, frequent urinary tract infections (UTIs), burning, itching, and irritation.

Inflammation: Pain, swelling, redness, and irritation of tissues in the body.

Labia Majora: The outer folds of tissue of the external female genital area.

Labia Minora: The inner folds of tissue of the external female genital area.

Menopause: The time when a woman's menstrual periods stop permanently. Menopause is confirmed after 1 year of no periods.

Perimenopause: The time period leading up to menopause.

Perineum: The area between the vagina and the anus.

Radiation Therapy: Treatment with radiation.

Selective Estrogen Receptor Modulators (SERMs): Drugs that stimulate certain tissues that respond to estrogen while not stimulating other tissues that respond to estrogen.

Sexually Transmitted Infections: Infections that are spread by sexual contact. Infections include chlamydia, gonorrhea, human papillomavirus (HPV), herpes, syphilis, and human immunodeficiency virus (HIV, the cause of acquired immunodeficiency syndrome [AIDS]).

Skene Glands: Glands located on either side of the urethra and urethral opening.

Urethra: A tube-like structure. Urine flows through this tube when it leaves the body.

Urinary Tract Infections (UTIs): Infections in any part of the urinary system, including the kidneys, bladder, or urethra.

Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

Vestibule: The tissue surrounding the opening of the vagina.

Vulva: The external female genital area.

Vulvodynia: Pain in the vulva that does not go away or keeps coming back and does not have a specific cause.

This information was designed as an educational aid to patients and sets forth current information and opinions related to women's health. It is not intended as a statement of the standard of care, nor does it comprise all proper treatments or methods of care. It is not a substitute for a treating clinician's independent professional judgment. Please check for updates at www.acog.org to ensure accuracy.

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