

Disorders of the Vulva

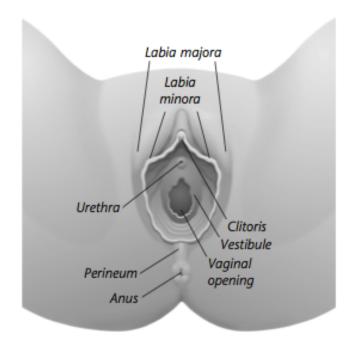
- · Where is the vulva?
- How can I check for vulvar problems?
- How is a vulvar self-exam done?
- What should I look for during a vulvar self-exam?
- What are symptoms of vulvar problems?
- What are yeast infections?
- What is contact dermatitis?
- What are the most common sexually transmitted diseases (STDs) that affect the vulva?
- What is vulvodynia?
- What is vulvar dystrophy?
- What types of cancer occur in the vulva?
- How is vulvar cancer diagnosed and treated?
- How can I prevent vulvar problems?
- Glossary

Where is the vulva?

The outside of the female genital area is called the *vulva*. The outer lips of the vulva are called the *labia majora*. The inner lips are called the *labia minora*. The *clitoris* is at the top of the inner lips. For most women, the clitoris is a center of sexual pleasure. It is partly covered by a fold of tissue called the hood. The *perineum* is the area between the anus and *vagina*. The *vestibule* is found within the inner lips. The vagina and the *urethra* open into the vestibule. Just inside the vestibule are the openings to the glands that make lubrication.

How can I check for vulvar problems?

Just as you would examine your breasts or skin for changes, you should examine your vulva. The vulvar self-exam will help you to



be aware of any changes that could signal a problem. This exam is even more important if you have ever had a vulvar problem. Some changes in the vulva may be an early sign of cancer. A good way to check for vulvar problems is to do a vulvar self-exam once a month.

How is a vulvar self-exam done?

- 1. Wash your hands before you begin. Lie or sit up in a comfortable position near a good, strong light with a hand mirror (a magnifying mirror may work best). 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.
- 2. Gently separate the outer lips of the vulva. Look for any changes or signs of a problem.
- 3. Next, separate the inner lips and look at the area between them. Also look at the en-trance to the vagina.
- 4. Gently pull back the hood of the clitoris and examine the area under the hood and the tip of the clitoris.
- 5. Be sure to inspect the area around the urethra, the perineum, the anus, and the outside of the labia majora.

What should I look for during a vulvar self-exam?

When you examine your vulva, you should look for the following:

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

What are symptoms of vulvar problems?

Some of the following symptoms indicate vulvar problems:

- Itching
- Bleeding
- Discomfort
- Burning

If a problem does occur, you are more likely to find it at an early stage if you check yourself on a regular basis.

What are yeast infections?

Yeast infections are the most common type of vulvar infections. The vagina often is infected, too. Symptoms of yeast infection include redness, itching, and a whitish, clumpy discharge. A burning feeling also may occur when you urinate.

To diagnose a yeast infection, a sample of the discharge may be taken and studied under a microscope. Good hygiene and antifungal drugs are the recommended treatment (see the FAQ Vaginitis).

What is contact dermatitis?

Contact dermatitis is caused by irritation of the skin of the vulva. Some items that may cause contact dermatitis are soaps and feminine hygiene products. The main symptoms of contact dermatitis are redness and itching. To diagnose it, your health care provider will examine the vulva and ask you about the things that come in contact with your vulva. Getting rid of the source of the irritation is the first step in treating this problem.

What are the most common sexually transmitted diseases that affect the vulva?

The most common **sexually transmitted diseases (STDs)** that affect the vulva are genital warts and genital herpes (see the FAQ Genital Herpes). Genital warts are caused by a virus called human papillomavirus (HPV) (see the FAQ Human Papillomavirus Infection).

If you are sexually active, you can reduce the chance of getting or spreading an STD by using a latex condom. A vaccine also is available that protects against the types of HPV that cause the most cases of genital warts.

What is vulvodynia?

Vulvodynia means "vulvar pain." The symptoms of vulvodynia include burning, stinging, irritation, or rawness. There are many methods of treatment to relieve symptoms. No one method works all the time for all women (see the FAQ Vulvodynia).

What is vulvar dystrophy?

Vulvar dystrophy is the growth of abnormal skin on the vulva. The skin can be too thin (lichen sclerosus), too thick (hyperplasia), or a mixture of both. When it is too thin, the skin may look like thin, wrinkled paper, and the vaginal opening may shrink. When it is too thick, hardened patches may appear on the vulva. Symptoms include redness or whiteness, itching, and burning.

A biopsy may be done to diagnose this problem. Vulvar dystrophy requires long-term treatment with creams or ointments that are rubbed into the vulvar tissue.

What types of cancer occur in the vulva?

The most common type of cancer of the vulva usually begins as precancer. Precancer means it may turn into cancer if it is not found and treated early. If skin cells are found in this stage, they are called VIN (vulvar intraepithelial neoplasia). In later stages, cancer can become invasive (spread and invade other parts of the body).

Rarely, other forms of cancer can occur in the vulva. Melanoma is a form of skin cancer. Adenocarcinoma can arise with a condition called Paget's disease. This type of cancer may look like eczema (patches of red, scaly, itchy skin) on the vulva.

How is vulvar cancer diagnosed and treated?

Invasive cancer of the vulva is diagnosed by biopsy. The type of treatment you receive depends on the stage of cancer. Treatment may include surgery to remove the cancerous tissue.

Radiation therapy and chemotherapy also may be used to treat vulvar cancer.

How can I prevent vulvar problems?

The following things may help clear up certain vulvar problems or prevent them from coming back:

- Keep the vulva clean and 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 have deodorant or a plastic coating.
- Do not use perfumed soap or scented toilet paper.
- Do not douche or use feminine sprays or talcs.
- Do not sleep in tight-fitting garments.

Glossary

Chemotherapy: The treatment of cancer using certain drugs to destroy malignant cells.

Clitoris: An organ that is located near the opening to the vagina and is a source of female sexual

excitement.

Labia Majora: The outer folds of tissue, or lips, of the opening of the vagina.

Labia Minora: The inner folds of tissue, or lips, of the opening of the vagina.

Perineum: The area between the vagina and the anus.

Radiation Therapy: Treatment by exposing the affected area to high-energy radiation.

Sexually Transmitted Diseases (STDs): Diseases that are spread by sexual contact, including chlamydia, gonorrhea,

genitalwarts, herpes, syphilis, and infection with humanimm uno deficiency virus (HIV, the cause of acquired immuno deficiency syndrome [AIDS]).

Urethra: A tube-like structure through which urine flows from the bladder to the outside of the body.

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

Vestibule: The space within the labia minora into which the vagina and urethra open.

Vulva: The external female genital area.

If you have further questions, contact your obstetrician-gynecologist.

Designed as an aid to patients, this document sets forth current information and opinions related to women's health. The information does not dictate an exclusive course of treatment or procedure to be followed and should not be construed as excluding other acceptable methods of practice. Variations, taking into account the needs of the individual patient, resources, and limitations unique to institution or type of practice, may be appropriate.