

Vulvodynia

What is vulvodynia?

Vulvodynia (say: "vul-vo-din-ee-a") is the word for pain in the vulva. The vulva is the external genital area in women--the area around the opening to the vagina. The pain is usually described as a burning, stinging, itching, irritating or raw feeling. Sexual intercourse, walking, sitting or exercising can make the pain worse.

Vulvodynia is more common in white women. It's rare in women of other races. It usually starts suddenly and may last for months to years. Although it isn't life-threatening, the pain may make you cut back on some of your normal activities. It can also make you upset or depressed. It might even cause problems in your relationship with your spouse or partner.

How did I get vulvodynia?

The exact cause of vulvodynia isn't known. Some factors that may be involved include:

- Frequent yeast infections
- · Frequent use of antibiotic medicines
- Chemical irritation of the external genitals (from soaps or detergents in clothing)
- · Rashes on the genital area
- Previous laser treatments or surgery on the external genitals
- · Past or present genital warts
- Nerve irritation or muscle spasms in the pelvic area

How is vulvodynia diagnosed?

You may need to have a pelvic exam and tests to check for bacteria and yeast. If any test results don't seem normal, your doctor may want you to have a colposcopy or a biopsy. Colposcopy is an exam of the genital area that uses a special magnifying glass. If you have a biopsy, your genital area is numbed with a painkiller, and a small piece of tissue is taken to be looked at with a microscope.

How is vulvodynia treated?

The treatment depends on the cause of your vulvodynia. Some types of vulvar pain get better with creams or pills made to treat yeast infections. Sometimes the pain goes away if you use creams that contain estrogen or cortisone, but cortisone cream isn't good to use for long periods of time. Some antidepressant medicines can help nerve pain and irritation. Other treatments that may help include interferon injections, laser therapy or surgery.

Muscle spasms in your pelvic area can also make vulvar pain worse. Physical therapy or biofeedback treatments (treatments that help you strengthen and relax your pelvic muscles) may help ease the spasms. If you decide to try one of these treatments, look for a therapist trained in



women's health. With practice, you can learn to relax your pelvic muscles with exercises you do at home.

What else can I do to help my symptoms?

Some of the following steps may help ease your symptoms. If they help, keep doing them. If they don't help, stop, and talk with your doctor about other treatments.

- Try to avoid using soap in the genital area. Just wash with water. Don't use creams, petroleum jelly, bubble baths, bath oils or feminine deodorant sprays. Be careful not to let shampoo drip on the genital area when showering or bathing.
- Wash your genital area frequently with plain water to wash away any vaginal secretions that may cause irritation. Rinse with clear water from a squeeze bottle after urinating.
- Wear only all-cotton underwear and loose clothing. Avoid wearing pantyhose.
- Use only white, unbleached toilet tissue and 100% cotton sanitary products (tampons and pads).
- Report any increased discharge and irritation to your doctor so that yeast and bacterial infections can be treated right away.
- Try to avoid using contraceptive devices and contraceptive creams that might irritate your genital area.
- Wash new underwear before wearing. Always rinse underwear thoroughly after washing to remove soap residue.
- Don't wear tight-fitting clothing or jeans. Don't sit around in a wet swimsuit for a long time.

Source

<u>Vulvodynia and Vulvar Vestibulitis: Challenges in Diagnosis and Management</u> (American Family Physician March 15, 1999, http://www.aafp.org/afp/990315ap/1547.html)

