# **VULVODYNIA**

Vulvodynia is chronic pain or discomfort around the opening of your vagina (vulva) for which there's no identifiable cause and which lasts at least three months. The pain, burning or irritation associated with vulvodynia can make you so uncomfortable that sitting for long periods or having sex becomes unthinkable. The condition can last for months to years.

If you have vulvodynia, don't let the absence of visible signs or embarrassment about discussing the symptoms keep you from seeking help. Treatment options are available to lessen your discomfort. And your doctor might be able to determine a cause for your vulvar pain, so it's important to have an examination.

## **Symptoms**

The main vulvodynia symptom is a pain in your genital area, which can be characterized as:

- Burning
- Soreness
- Stinging

- Rawness
- Painful intercourse (dyspareunia)
- Throbbing
- Itching

Your pain might be constant or occasional. It might occur only when the sensitive area is touched (provoked). You might feel the pain in your entire vulvar area (generalized), or the pain might be localized to a certain area, such as the opening of your vagina (vestibule).

Vulvar tissue might look slightly inflamed or swollen. More often, your vulva appears normal.

### When to see a doctor

Although women often don't mention vulvodynia to their doctors, the condition is fairly common.

If you have pain in your genital area, discuss it with your doctor or ask for a referral to a gynecologist. It's important to have your doctor rule out more easily treatable causes of vulvar pain — for instance, yeast or bacterial infections, herpes, precancerous skin conditions, genitourinary syndrome of menopause, and medical problems such as diabetes.

It's also important not to repeatedly use over-the-counter treatments for yeast infections without seeing your doctor. Once your doctor has evaluated your symptoms, he or she can recommend treatments or ways to help you manage your pain.

#### Causes

Doctors don't know what causes vulvodynia, but possible contributing factors include:

- Injury to or irritation of the nerves surrounding your vulvar region
- Past vaginal infections
- Allergies or sensitive skin
- Hormonal changes
- Muscle spasm or weakness in the pelvic floor, which supports the uterus, bladder and bowel

### **Complications**

Because it can be painful and frustrating and can keep you from wanting sex, vulvodynia can cause emotional problems. For example, fear of having sex can cause spasms

in the muscles around your vagina (vaginismus). Other complications might include:

- Anxiety
- Depression
- Sleep disturbances
- Sexual dysfunction
- Altered body image
- Relationship problems
- Decreased quality of life

# **Diagnosis**

Before diagnosing vulvodynia, your doctor will ask you questions about your medical, sexual and surgical history and to understand the location, nature and extent of your symptoms.

Your doctor might also perform a:

 Pelvic exam. Your doctor visually examines your external genitals and vagina for signs of infection or other causes of your symptoms. Even if there's no visual evidence of infection, your doctor might take a sample

- of cells from your vagina to test for an infection, such as a yeast infection or bacterial vaginosis.
- Cotton swab test. Your doctor uses a moistened cotton swab to gently check for specific, localized areas of pain in your vulvar region

### **Treatment**

Vulvodynia treatments focus on relieving symptoms. No one treatment works for every woman. For many, a combination of treatments works best. It can take time to find the right treatments, and it can take time after starting a treatment before you notice relief.

#### **Treatment options include:**

- Medications. Steroids, tricyclic antidepressants or anticonvulsants can help lessen chronic pain. Antihistamines might reduce itching.
- Biofeedback therapy. This therapy can help reduce pain by teaching you how to relax your pelvic muscles and control how your body responds to the symptoms.
- Local anesthetics. Medications, such as lidocaine ointment, can provide temporary symptom relief. Your doctor might recommend applying lidocaine 30 minutes before sexual intercourse to reduce your discomfort.

Using lidocaine ointment can cause your partner to have temporary numbness after sexual contact.

- Nerve blocks. Women who have long-standing pain that doesn't respond to other treatments might benefit from local nerve block injections.
- Pelvic floor therapy. Many women with vulvodynia have tension in the muscles of the pelvic floor, which supports the uterus, bladder and bowel. Exercises to relax those muscles can help relieve vulvodynia pain.
- Surgery. In cases of localized vulvodynia or vestibulodynia, surgery to remove the affected skin and tissue (vestibulectomy) relieves pain in some women.

#### Lifestyle and home remedies

The following tips might help you manage vulvodynia symptoms:

- Try cold compresses or gel packs. Place them directly on your external genital area to ease pain and itching.
- Soak in a sitz bath. Two to three times a day, sit in comfortable, lukewarm (not hot) or cool water with Epsom salts or colloidal oatmeal for five to 10 minutes.
- Avoid tightfitting pantyhose and nylon underwear. Tight clothing restricts airflow to your genital area, often leading to increased temperature and moisture that can cause irritation. Wear white, cotton underwear to

increase ventilation and dryness. Try sleeping without underwear at night.

- Avoid hot tubs and soaking in hot baths. Spending time in hot water can cause discomfort and itching.
- Don't use deodorant tampons or pads. The deodorant can be irritating. If pads are irritating, switch to 100 percent cotton pads.
- Avoid activities that put pressure on your vulva, such as biking or horseback riding.
- Wash gently. Scrubbing the affected area harshly or washing too often can increase irritation. Instead, use plain water to gently clean your vulva with your hand and pat the area dry. After bathing, apply a preservative-free emollient, such as plain petroleum jelly, to create a protective barrier.
- Use lubricants. If you're sexually active, apply a lubricant before having sex. Don't use products that contain alcohol, flavor, or warming or cooling agents.