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Vulval problems

There are many different conditions that can affect your vulva, ranging from mild infections to skin conditions and, very rarely, to cancer. They can all cause very different symptoms, including itching, bleeding, rashes or a lump. It is very important that if you notice any new symptoms or lumps in your genital area then you see a doctor promptly. Your doctor will be able to examine you and decide which treatment will be appropriate to you. This will depend on the underlying cause of your symptoms.

How are vulval problems diagnosed?

- There are various conditions that can affect your vulva. Some are
 more serious than others. If you notice a new lump or swelling on
 your vulva or have any bleeding from around your vulva then you
 must see a doctor promptly.
- Most conditions that affect your vulva can be diagnosed by examining you. However, it is sometimes necessary for other tests to be undertaken - eg, swabs or a biopsy.
- The symptoms will depend on the underlying condition. Symptoms
 may range from pain, itching (pruritus vulvae), and finding a lump to
 noticing a change in appearance of your vulva. See the separate
 leaflet called Vulvitis.

What causes vulval problems?

Infections

- Thrush (yeast infection).
- Genital herpes infection.
- Genital warts.
- Chickenpox.

Other infections: these include scabies and pubic lice.

Skin conditions

- In babies and toddlers wearing nappies, nappy rash can occur and be very irritating and distressing. Nappy rash can lead to the skin of the vulva and the area round the back passage (anus) becoming bright red and very sore.
- Any skin condition can affect the vulval area too eg, eczema, psoriasis, lichen planus and lichen sclerosus.
- Vulval intraepithelial neoplasia (VIN). This is not vulval cancer but it is a pre-cancerous condition, as VIN (after several years) may develop into vulval cancer in some women.

Lumps in the vulva

- Some infections such as genital herpes and syphilis can cause lumps.
- Bartholin's cyst or abscess.
- Cancer of the vulva.

How are vulval problems treated?

Infections

- Thrush is usually treated with clotrimazole cream from the pharmacy, or sometimes a fluconazole oral tablet. Usually only a short course is required but occasionally longer courses are needed.
- Genital herpes is treated with aciclovir tablets. You can also soothe
 the symptoms by bathing in salt water, taking over-the-counter
 painkillers and drinking more water to dilute your urine. Petroleum
 jelly or local anesthetic ointments can also be helpful.
- Genital warts are usually treated at sexual health clinics, often with a self-applied topical treatment such as podophyllotoxin, imiquimod or sinecatechins. However in 30% of people they will disappear with no treatment. People with suppressed immune systems and pregnant women may require different treatments.

- Chickenpox affecting the genital area can be itchy or sore and this
 can be alleviated by paracetamol, calamine lotion or antihistamines
 such as chlorphenamine.
- Scabies and pubic lice are treated with permethrin cream or malathion lotion. The itching from scabies can continue for up to four weeks after treatment.

Skin conditions

- Nappy rash is mostly treated by measures such as frequent nappy changes, cleaning with water or non-fragranced wipes, patting rather than rubbing dry, and avoiding irritants such as talcum powder and bubble bath/soap. Barrier creams such as white soft paraffin, Metanium® and Bepanthen® help protect the skin.
 Occasionally, antifungal and steroid creams are needed if the rash is severe and simple measures are not helping.
- Eczema, pand I of the vulva are treated very similarly to other parts
 of the body, with emollients (moisturising creams/ointments) and
 steroid creams, as well as other more specialised creams in some
 cases.
- Lichen sclerosus is treated with emollients and stronger steroid creams/ointments
- Vulval intraepithelial neoplasia (VIN) is usually treated with a small operation to remove the affected area.

Lumps

- Bartholin's cyst/abscess often requires antibiotics and sometimes surgical removal.
- Cancer of the vulva requires treatment by specialist gynaecologists/oncologists and can involve surgery, chemotherapy and radiotherapy.

How to take care of your vulva

Vulval skin is very sensitive so it is important to avoid anything that may irritate it. Soap can dry the skin so soap substitutes are preferred – for example, Doublebase® or E45 wash®. Only clean the vulval area once per day as too much washing can make symptoms worse. Showering is preferred to baths but if you do bath, avoid adding bubble bath. Avoid using flannels. Pat gently dry afterwards.

Sanitary towels/panty liners and coloured toilet paper can cause irritation. Avoid tight-fitting underwear/clothing and synthetic materials - cotton is best. Fabric conditioners and biological washing powders can also irritate.

Using an emollient/moisturiser can help protect the skin, especially if it is dry. Various types are available over the counter.

Further reading

- UK National Guideline on the Management of Vulval Conditions; British Association for Sexual Health and HIV (2014)
- Reyes MC, Cooper K; An update on vulvar intraepithelial neoplasia: terminology and a practical approach to diagnosis. J Clin Pathol. 2014 Apr;67(4):290-4. doi: 10.1136/jclinpath-2013-202117. Epub 2014 Jan 7.
- Lawton S; Nappy rash: diagnosis and treatment. J Fam Health Care. 2014 Jul-Aug;24(5):36-40.

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