

Vulvoscopy



Colposcopy Department

What is the vulva?

The vulva is the area surrounding the opening of the vagina. It includes the labia (inner and outer lips of the vagina) and the clitoris.

Why am I having a vulvoscopy?

You have been offered this appointment because you have vulval skin symptoms such as itching, pain or a change in colour. The appointment is about 20 minutes long and you are welcome to bring someone with you if you wish.

What conditions might be causing my symptoms?

There are several skin conditions of the vulva that may affect the vulva including:

Lichen sclerosus – this can affect women of any age but is most often found in women after the menopause. It is thought to be caused by a problem with the immune system. It is not related to the use of HRT or hormonal contraceptives. It can cause pain and itching, and can change the way the vulva looks. There may be problems with pain on intercourse and passing urine.

Lichen planus – this rash tends to cause pain rather than itching. It can affect the skin anywhere on the body, particularly the mouth

Vulval dermatitis – this can happen if you have sensitive skin, dermatitis or eczema. It can also be found on your inner thighs or pubic area. Stress and chemical irritants may make your symptoms worse.

Vulval atrophy – this can happen when the levels of the female hormone oestrogen fall, usually after the menopause. It causes the skin to become pale and can cause itching and soreness.

VIN (vulval intraepithelial neoplasia) – this is a pre-cancerous condition that can become cancer in the future. It is similar to the pre-cancerous changes we look for on the cervix with smear tests. The doctor may wish to check your cervix and vagina at the same time if VIN is seen. Women who have lichen sclerosus may sometimes have VIN as well.

Candida infection (thrush) – this tends to cause soreness and irritation of the vulva – it can be passed between sexual partners, so you will both need to be tested and treated if this is the cause

Psoriasis – this may affect the vulva as well as other parts of the body, and cause dryness and thickening of the skin

What happens during the appointment?

Before the examination, the doctor will ask you a few health questions. If you want to go ahead, you will be asked to change into a gown and remove your underwear etc. We have a private toilet and changing room within the Investigation Suite, and you will be accompanied during your appointment by a female chaperone.

You will then be asked to sit in our reclining chair that lies you back with your feet apart in rests. The doctor will examine your vulva using a brightly lit microscope. He/she may put a liquid on your vulva with cotton wool which can highlight any patches of abnormal cells. This can sting a little.

With your permission, photos will be taken for your file and either kept safely in a sealed envelope or on the hospital's photo database. These are to monitor any changes or improvements in the future.

The doctor may need to take a biopsy if there is a change in the skin. A biopsy is a tiny piece of skin that gets sent to the lab and confirms the diagnosis. You will be given some local anaesthetic to numb the area first. About 5mm of skin is taken and to stop any bleeding, you will either have a stitch put in, or a small cauterisation stick will be used. You will be given a small pad to use in case of spotting.

How will I feel after my appointment?

Occasionally people can feel a little light-headed after lying down for a while during the appointment. If this happens, we will look after you until you feel better. You should be able to carry on with your day as normal.

If you have had a biopsy, you will be given a sanitary pad to wear, in case there is any spotting from the wound. The local anaesthetic will wear off after about 2 hours. You might feel some pain or discomfort – we suggest taking over the counter pain relief, such as paracetamol or ibuprofen, before the local anaesthetic wears off completely. Please do not get the wound wet for 24 hours. When washing, please pat dry very carefully so the stitch stays in place. The stitch will dissolve and fall away after about 10 days. Please use soap free shower gel or plain water to wash, and avoid talcum powder.

You will be given an after care leaflet before you go.

What are the possible risks or side effects of having a vulvoscopy?

It is possible that your vulva may feel irritated or sore after the doctor has touched it. He or she knows that you are sore and will try to keep this to a minimum.

There is a small risk of discomfort/pain, infection and bleeding after a biopsy. If you feel you have an infection, please see your GP for advice. Your usual pain relief should be enough to help with any discomfort/pain. If your stitch comes out and you are bleeding, please apply gentle pressure for 10 minutes with a clean, lint-free cloth or tissue. Please phone the Colposcopy Nurse 01483 406841 if you would like further advice.

Will I need to be seen again?

You will receive a letter from us explaining what happened at the appointment and what the future plan is. If you had a biopsy, the results will come in a separate letter in approximately 4 to 6 weeks.

If you have VIN, you will be followed up at the same clinic. Other conditions may be managed by your GP.

You should check your vulva regularly. You could ask your GP or practice nurse to do this, but you can also do it yourself with a mirror. If you examine yourself regularly, you know what is normal for you, and can very quickly find any changes.

What treatments are available?

Most symptoms may be relieved by simple measures such as wearing cotton underwear, avoiding irritants like strongly scented washing powder, avoiding certain toilet papers, using a soap substitute for washing and using a moisturiser. However, sometimes a treatment is needed, and each one depends on the skin condition you have.

Medication such as antihistamines or anti-itching drugs can sometimes help, especially if you aren't sleeping well.

If you have lichen planus or lichen sclerosus, you may need a steroid ointment – these can improve symptoms in most people, and help manage them longer term. Unfortunately, 1 in 10 women with lichen sclerosus do not improve with steroid ointments.

If vulval atrophy is the cause, you may be offered oestrogen cream.

Candida is treated with antifungal creams, pessaries or tablets. If it keeps coming back, you may need treatment for longer, sometimes up to 6 months.

VIN can be treated with cream, laser or be removed surgically. If the area is small, you can have it removed in the Outpatients Department. If it is large, you may need to have an operation under general anaesthetic.

Reference sources

This leaflet is based on information from:

- Skin conditions of the vulva – information for you – Royal College of Obstetricians and Gynaecologists, December 2013
- Standards of care for women with vulval conditions – British Society for the Study of Vulval Disease, April 2013

Further information on vulval skin conditions can be found at:

- British Association of Dermatologists: www.bad.org.uk
- International Society for the Study of Vulvovaginal Disease: <http://issvd.org/patient-education/>

Contact details

If something is worrying you, please do not hesitate to call us – we are here to help. We try very hard to make this experience as positive as we can for you – if you have any requests or need help accessing further information on your condition, please phone us:

Colposcopy Office: 01483 406683

Colposcopy Nurses: 01483 406841

PALS and Advocacy contact details

Contact details of independent advocacy services can be provided by our Patient Advice and Liaison Service (PALS) who are located on the right hand side as you enter the main reception area. PALS are also your first point of contact for health related issues, questions or concerns surrounding RSCH patient services.

Telephone: 01483 402757

Email: rsc-tr.pals@nhs.net

Opening hours: 9.00am–4.00pm, Monday to Friday

If you would like information documents in large print, on tape or in another language or form please contact PALS.

Past review date: N/A

Future review date: October 2018

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PIN151016–1018

