

VULVODYNIA

Vulvodynia (vul-vo-DIN-ee-uh) — or chronic vulvar pain — is characterized by pain in the area around the opening of your vagina (vulva). The pain, burning or irritation associated with Vulvodynia may make you so uncomfortable that sitting still for long periods or even having sex becomes unthinkable. The condition can go on for months or years.

Experts believe Vulvodynia is underreported. There are several reasons why. It may be partly due to the absence of visible signs in Vulvodynia. Or it could be the reluctance of many women to talk about their symptoms. Treatment options are available to lessen the pain and discomfort of Vulvodynia.

The main Vulvodynia symptom is pain in your genital area, which can be characterized by:

- Burning
- Soreness
- Itching
- Stinging
- Rawness
- Painful intercourse (dyspareunia)
- Throbbing

The pain you experience may be constant or intermittent and can last for months or even years, but it can vanish as suddenly as it started. A similar condition, vulvar vestibulitis, may cause pain only when pressure is applied to the area surrounding the entrance to your vagina. Vulvar tissue may look minimally inflamed or swollen. More often, your vulva appears normal.

Many women with Vulvodynia have a history of treatment for recurrent Vaginitis or vulvitis. Some women with the condition have a history of sexual abuse. But most women with Vulvodynia have no known contributing factors. Vulvodynia isn't sexually transmitted or a sign of cancer.

For Vulvodynia, some basic questions to ask your doctor include:

- What could be causing my symptoms?
- What tests do you recommend?
- What types of treatments are most likely to improve my symptoms?
- How long will I need to be treated?
- Is this condition permanent or temporary?
- When might I expect to experience relief from my pain and discomfort?
- Is there a generic alternative to the medicine you're prescribing?

Vulvodynia treatments focus on relieving symptoms. No one treatment works for every woman and you may find that a combination of treatments works best for you. It may take weeks or even months for a new treatment regimen to noticeably improve your symptoms.

There are many topical ointments that are used to treat Vulvodynia. Some are available from pharmaceutical companies and some are compounded at specialty pharmacies. You may need to try a few different ointments to find the right one for you.

Available options may include:

- Medications. Tricyclic antidepressants and Anticonvulsants may help lessen chronic pain. Antihistamines such as hydroxyzine can reduce itching.
- Biofeedback therapy. This therapy can help reduce pain by teaching you how to control specific body responses. The goal of biofeedback is to help you enter a relaxed state in order to decrease pain sensation. To cope with Vulvodynia, biofeedback can teach you to relax your pelvic muscles, which can contract in anticipation of pain and actually cause chronic pain.
- Local anesthetics. Medications such as Lidocaine ointment can provide temporary symptom relief. Your doctor may recommend applying Lidocaine 30 minutes before sexual intercourse to reduce your discomfort. Your partner may also experience temporary numbness after sexual contact.
- Surgery. In cases where painful areas can be specifically pinpointed at the hymeneal ring (localized Vulvodynia, vulvar vestibulitis), surgery to remove the affected skin and tissue (vestibulectomy) relieves pain in some women.
- Try cold compresses. Cool compresses placed directly on your external genital area may help lessen pain and itching.
- Avoid tight fitting pantyhose and nylon underwear. Tight undergarments restrict airflow to your genital area, often leading to increased temperature and moisture that can cause irritation. Wear cotton underwear to increase ventilation and dryness, and sleep without underwear at night.
- Avoid hot tubs. Spending time in a hot tub may lead to discomfort and itching.
- Avoid excessive hygiene. Washing or scrubbing the affected area harshly or too often can increase irritation. Instead, use plain water to gently clean your vulva and pat the area dry. After bathing, apply a preservative-free emollient, such as plain A & D Ointment, to create a protective barrier.
- Use lubricants. If you're sexually active, apply lubricants before engaging in sexual intercourse.
- Try an antihistamine at bedtime. This may help reduce itching and help you rest better.
- Look for triggers and avoid them. The triggers that can make vulvar pain worse tend to be different for each woman. Your observations of what causes you pain are important. Avoid potentially irritating soaps and bath products. Use only white, unbleached toilet paper and 100 percent cotton sanitary products. **Review our vulvar care hand out for additional suggestions**
- Work with your doctor. Over time you can work with your doctor to identify the approaches that work best for you.
- Stay active. Regular exercise can help ease chronic pain, but stay away from exercises that put pressure directly on the vulva, such as bicycling.
- Accept small steps of progress. Don't expect instant cures. Have confidence that you'll feel better over time.