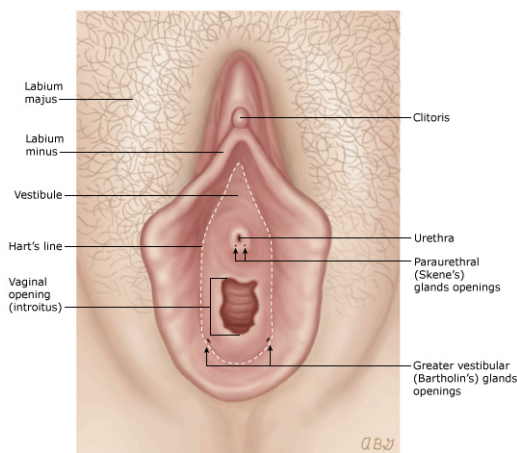




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Vestibulodynia



What is vestibulodynia?

Also called vulvodynia, vulvar vestibulitis and focal vulvitis, this is a pain syndrome lasting greater than 3 months that can be localized to the vulvar vestibule. There is no identifiable cause of vestibulodynia but it is thought to be triggered by infection or trauma. Vestibulodynia is most commonly seen in premenopausal women. Symptoms include significant pain upon contact with the vestibule or localized burning, both which can cause worsened pain with intercourse and tampon insertion. The pain is typically not worsened with menstruation. Many women will experience pelvic floor muscle dysfunction, as well.

How do we treat vestibulodynia?

Your provider will recommend medication to treat. This is typically *at least* a 3 month treatment course, so be patient with your symptoms. You should notice a slow but gradual improvement of symptoms over time. You may experience remission and flares, as well. It is not a "one-size-fits-all" process.

There are also lifestyle changes you can make to reduce the incidence and severity of symptoms that we recommend:

- Reduce stress!
- Avoid soap, fragrance and other products to the vulva
- Avoid constrictive underwear; wear only cotton underwear during the day and no underwear to sleep
- Avoid activities that place direct pressure to the vulva, such as biking
- Use a donut if going to be sitting for prolonged periods of time at a desk or in a car
- Apply cool packs before and after sexual activity to reduce pain and swelling
- Use water based topical lubricants and/or intravaginal moisturizers during sexual activity
- Coconut oil and vitamin E oil may reduce symptoms, but the data is limited

Pelvic floor therapy and/or cognitive behavioral therapy may be needed in conjunction with medication treatment and lifestyle changes.