

Understanding Vaginal and Vulvar Health After Menopause and Cancer Treatment

Why Vaginal and Vulvar Health Matters

The health of the **vagina and vulva** is essential at all stages of life, yet many people only consider vaginal health in relation to reproductive or sexual activity. **After menopause or certain cancer treatments, estrogen loss leads to significant changes in vaginal and vulvar tissues, impacting overall well-being.**

Understanding the Female Anatomy

The female reproductive anatomy consists of:

- **Vulva (external structures)** – Includes the **labia majora (outer lips), labia minora (inner lips), clitoris, urethral opening, and vaginal opening.**
- **Vagina (internal muscular canal)** – A flexible passage extending from the vaginal opening to the cervix.

Estrogen plays a crucial role in maintaining the structure, elasticity, and lubrication of these tissues. When estrogen declines, these tissues become thinner, drier, and more fragile, leading to discomfort and increased risk of irritation and infections.

What is Vulvovaginal Atrophy (VVA)?

Vulvovaginal atrophy (VVA) is part of **Genitourinary Syndrome of Menopause (GSM)**, a term used to describe the effects of estrogen loss on the **vulva, vagina, and urinary tract.**

Causes and Risk Factors of VVA

- **Natural Menopause** – Gradual estrogen decline leads to vaginal and vulvar changes.
- **Surgical Menopause (Oophorectomy)** – Sudden estrogen loss results in **more severe symptoms.**
- **Cancer Treatments** – **Chemotherapy, pelvic radiation, and endocrine therapies** (aromatase inhibitors, tamoxifen) can **accelerate estrogen depletion**, worsening symptoms.

Common Symptoms of VVA

- **Vaginal dryness, irritation, and burning**
- **Pain during intercourse (dyspareunia)**
- **Urinary symptoms** – Urgency, increased risk of **recurrent urinary tract infections (UTIs)**, and burning with urination.

- **Thinning and shrinking of vulvar and vaginal tissues**
- **Tightening or narrowing of the vaginal canal (vaginal stenosis)**

Symptoms do not always correlate with physical findings—many women experience significant discomfort despite minimal visible changes on examination.

How Cancer Treatment Can Impact Vaginal and Vulvar Health

Cancer treatments that **reduce estrogen levels or directly affect the pelvic area** can worsen VVA:

- **Chemotherapy** – May suppress ovarian function, reducing estrogen production.
 - **Aromatase Inhibitors & Tamoxifen** – Common breast cancer treatments that block estrogen, worsening vaginal dryness.
 - **Pelvic Radiation** – Can **damage vaginal tissue**, increasing scarring and narrowing.
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Importance of a Pelvic Exam for Diagnosis and Treatment

A pelvic exam is critical before starting treatment. This allows your provider to:

- ✓ **Confirm the diagnosis** of VVA and rule out other causes (e.g., infections, inflammatory conditions, vulvodynia, trauma).
- ✓ **Ensure appropriate treatment selection** based on symptom severity and individual risk factors.
- ✓ **Monitor response to treatment** and adjust as needed.

If postmenopausal **spotting or bleeding** occurs, a **thorough evaluation** is necessary, which may include a transvaginal ultrasound (TVUS) and/or endometrial biopsy.

Treatment Options for Vulvovaginal Atrophy

VVA is treatable. There are several non-hormonal and topical hormonal options available, tailored to individual needs. **It is imperative that patients do not self-treat this condition and seek management with their healthcare providers. All products should be reviewed with their oncology team for approval.**

Non-Hormonal Options (First-Line Therapies)

These options can **significantly improve symptoms** and are often used as the first line of defense:

1. Vaginal Moisturizers (Internal Use)

- Designed to be used **regularly** (2–5 times per week), not just during intercourse.
- Help **retain moisture**, improve vaginal elasticity, and support tissue health.
- Best applied **at bedtime** for maximum absorption.

2. Vulvar Moisturizers (External Use)

- Target **dryness and irritation of the vulva** (labia and surrounding tissues).
- Help soothe **itching, burning, and discomfort**.
- Can be used **daily** to maintain skin integrity.

3. Vaginal Lubricants (For Sexual Activity)

- Reduce **friction and discomfort during intercourse**.
- Available as **water-based or silicone-based** formulas.
- Choose **fragrance-free and paraben-free** options to avoid irritation.

Topical Hormonal Options (For Moderate to Severe Symptoms)

When **non-hormonal treatments** do not provide enough relief, **low-dose vaginal estrogen** or **vaginal DHEA** may be considered:

1. Vaginal Estrogen

- Available in **low-dose formulations** (cream, ring, tablet).
- Provides **localized symptom relief** with **minimal systemic absorption**.
- Recommended for women with **moderate to severe symptoms** who do not respond to non-hormonal options.
- Women with a history of hormone-positive breast cancer **should consult their oncology team for discussion** before use.

2. Vaginal DHEA (Prasterone)

- A **non-estrogen option** that helps restore vaginal tissue health.
- **There is not enough safety data on its use in women with hormone-positive cancers.** The effects on breast cancer recurrence risk are **unknown**, so it should be used with caution in this population.

For women with a history of hormone-positive breast cancer, treatment decisions should be **individualized** in collaboration with their oncology team.

Protecting and Maintaining Vaginal and Vulvar Health

Taking proactive steps can **support long-term vaginal health** and minimize discomfort.

Daily Care and Prevention

- **Gentle Hygiene** – Wash with **water or mild, unscented soap**. Avoid douches, perfumed products, and antiseptic washes.
- **Clothing Choices** – Wear **cotton underwear** and loose-fitting clothing to allow airflow. Avoid tight **yoga pants** or synthetic fabrics.
- **Managing Moisture** – Change out of **wet swimsuits or sweaty clothes** promptly.
- **Proper Wiping Technique** – Always wipe **front to back** to prevent infections.

pH Balance and Vaginal Health

The **normal vaginal pH is between 3.8 and 4.5**, which helps protect against infections. **With estrogen decline, vaginal pH increases**, making infections more likely.

- **Moisturizers help maintain pH balance and support the vaginal microbiome.**

When to See a Specialist

If symptoms of VVA **significantly impact your quality of life**, speak with your provider about treatment options.

For personalized guidance, ask your provider for a referral to:
Baptist MD Anderson Cancer Center's Women's Sexual Health Clinic.