

## 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.

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### 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.

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## 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.

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## 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.

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## 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.

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## 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.

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## Protecting and Maintaining Vaginal and Vulvar Health

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

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## 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.**

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## 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.**