



Vulvovaginitis

Information for patients

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What is Vulvovaginitis?

Vulvovaginitis is a common condition affecting girls between the ages of two and seven years, before the start of puberty. It is inflammation of the vagina and vulva (private parts).

What are the symptoms?

The main symptoms are vaginal discharge and soreness. The discharge can be white, green or yellow and can be smelly. Other symptoms may include redness of the vagina and vulval area, itching and pain when passing urine.

Please note: If any blood is noticed in the discharge then please inform your doctor as further investigation is required.

What causes vulvovaginitis?

Vulvovaginitis is usually caused by repeated infections with bugs that are a normal part of the body. They often live in the gut, bowel, nose or mouth. These bugs are easily transferred to the vulval area by young girls as they learn to be responsible for their own hygiene.

Other factors that make young girls who have not yet gone through puberty more prone to infections in this area are:

- A lack of female hormones which make the vagina and vulva thin and less resistant to infection
- The vagina is not acidic like after puberty so bugs can easily grow and cause infection
- The vulva is very close to the anus (bottom) so making it easy to spread bugs from the bowel to the vulva
- The labia (lips) are flat and undeveloped so do not pose a barrier to infection

It is very unlikely that the symptoms are caused by thrush in girls prior to puberty.

Are any tests necessary?

Sometimes your doctor may take a swab from the discharge on the outside of the vagina. This should not hurt. If there is pain on passing urine, a urine sample may be sent to look for an infection. If any infection shows up on either of these tests, it may be treated with antibiotics.

Are there any other treatments?

There is no single treatment, and the condition will go away as puberty begins. Here are some helpful tips to improve the symptoms:

- Teach your child to wipe from the front to the back when they have been to the toilet
- Make sure her bottom is completely clean after she has moved her bowels
- Avoid all soaps, shower gels and bubble baths. Your doctor will be able to prescribe you a moisturiser to be used as a soap substitute such as Dermal
- Avoid wet wipes
- Avoid fabric conditioners and biological washing powders
- Wear cotton underwear and avoid tight fitting clothing
- Avoid wearing knickers at night
- Use a barrier cream or ointment on the skin at least twice daily. Your doctor may prescribe you some cream such as hydromol, dermol, aveeno or balneum. If there is pain when she

is passing urine, you can apply a barrier cream before going to the toilet

- Constipation can make the problem worse, so try and avoid it by having a healthy diet. If it is a problem, you might want to get it treated by your GP

Will there be any long-term problems?

The infections associated with vulvovaginitis are different from those that adult women get, and do not cause any problems with periods or fertility. There is no association with pelvic inflammatory disease or tubal damage.

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*Revised by Dr Cara Williams on behalf of
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