



Referral Support Service

GY22 Vulval Disorders

Gynaecology

Definition

Commonly present with pruritis and pain

*benign small cysts/lumps not causing symptoms do not require treatment or referral which includes Bartholin's cysts.

Exclude Red Flag Symptoms

Vulval ulceration or increasing lesion of vulval skin-refer Suspected Gynaecological Cancer 2WW fast track referral proforma

General Points

See flow chart

Management - see links to conditions below

- Exclude vulval candidiasis
- Examine vulval, perianal area, vagina, cervix.
- Look for any evidence of systemic illness by examining rest of skin and oral mucosa
- Commonest vulval disorders are:
 - o Lichen sclerosus for management see below
 - o <u>Atrophic vulvovaginitis</u>

Referral Information

Indications for referral

• Lesions or conditions not responding to management below

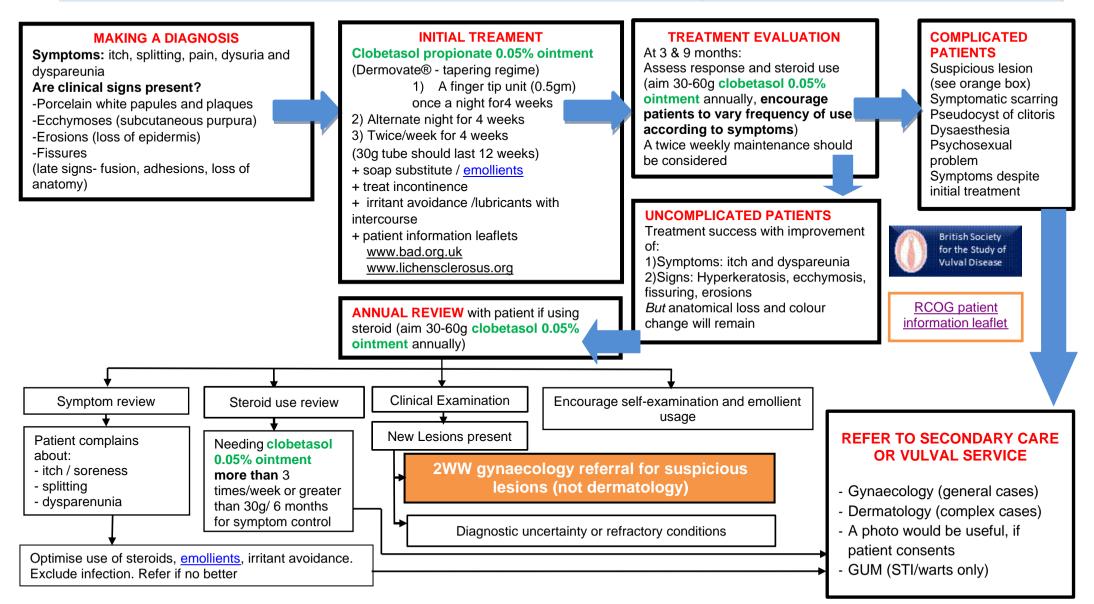
Information to include in referral letter

- Description of vulva and any lesion
- Smear history
- Relevant past medical/surgical history
- Current regular medication
- BMI
- Smoking Status

Investigations prior to referral

- Consider TFT/HbA1c
- Consider vulval swabs

VULVAL LICHEN SCLEROSUS- GUIDANCE FOR HEALTH CARE PROFESSIONALS (HOSPITAL TEAM OF GP SPECIALIST INTEREST)



Referral Criteria

- Lesions or conditions not responding to management above
- Detail treatments tried, duration, problems etc and results of suggested investigations

Patient information leaflets/ PDAs

- <u>http://patient.info/health/vulval-problems-leaflet</u>
- <u>British Association of Dermatologists Patient Information Leaflets (PILs)</u> (bad.org.uk)
- <u>Skin conditions of the vulva patient information leaflet (rcog.org.uk)</u>

References

 British Association for Sexual Health and HIV BASHH- Guideline on Management of Vulval Conditions

http://www.bashh.org/documents/UK%20national%20guideline%20for%20the%20manage ment%20of%20vulval%20conditions%202014.pdf

Responsible Consultant: Miss Claire Oxby Responsible GP: Dr Jacqui Caine Responsible Pharmacist: Faisal Majothi ©NHS Vale of York Clinical Commissioning Group Version: Final: June 2021 Next Review: June 2026

The on-line version is the only version that is maintained. Any printed copies should, therefore, be viewed as 'uncontrolled' and as such may not necessarily contain the latest updates and amendments.