GYNAECOLOGY DEPARTMENT UNIVERSITY HOSPITAL OF WALES

Atrophic Vaginitis.

What is Atrophic Vaginitis?

Atrophic vaginitis is a condition that mostly occurs after the Menopause, when the lack of the female hormone, oestrogen, causes changes to the skin of the vagina and genital area.

The vagina is kept supple and moist by fluids and mucus which are made by the glands at the neck of the womb. The reduction of oestrogen affects these glands and the tissues in and around the vagina. After the menopause the ovaries make less oestrogen. The lack of oestrogen leads to a thinning of the tissues around the vaginal area, and the number of small glands that make mucus reduces. You may also lose some fat tissue from around the genital area. This can cause the vulva and vagina to look slightly different than before the menopause.

What symptoms can occur?

- Painful intercourse the skin of the vagina becomes drier and less likely to become lubricated during sex, this can cause pain.
- Vaginal bleeding as the skin becomes thinner and more fragile this can lead to spotting and bleeding. Any post-menopausal bleeding must always be reported to your GP.
- Infection and discharge an atrophic vagina is more likely to develop infection causing an offensive smelling discharge and may need antibiotic treatment.
- Discomfort and/or Itching of the vulva and vagina some women experience itching which produces a tendency to scratch, this is more likely to make the skin itch and can develop the itch/scratch cycle, this in turn can be distressing.
- Urinary problems due to thinning of the skin around the neck of the bladder, or urethra passing water too often (frequency) and/or not being able to hold on (urgency). Atrophy tends to aggravate any prolapse of part of the vaginal wall, and this may also cause urinary problems.

What are the treatments for Atrophic Vaginitis?

Treatment depends on what symptoms are most troublesome.

• Hormone Replacement Therapy (HRT) – can be given in different forms, gel, tablet, patch, cream, pessary and implant. You can discuss this more fully with your GP. However, if the only menopausal problem is atrophic vulvo-vaginitis

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the use of HRT may not be the best option. Local treatments are often best in this situation

- Local oestrogen creams or pessary both contain oestrogen to treat the vagina and surrounding tissues, usually used every night for 2 weeks and then twice a week for as long as needed. This treatment is normally effective but may occasionally require slightly high dosages (if agreed with your doctor) and unfortunately the symptoms quickly return if the creams or pessaries are stopped. Both local preparations are very safe and are not associated with increased risks as seen with HRT
- Non-hormonal moisturisers if dryness is the only symptom, or hormone creams can't be used because of other medical conditions, gels such as Yes, Replens, Regelle or Sylk can be purchased from the local pharmacy or with a prescription from your GP. You can also buy these on-line and ask for free samples
- Lubricants these are used with sex if dryness is a problem. Most postmenopausal women will require a 'lube' with sex. Many preparations are available over the counter and your GP can also prescribe. Again, these are available on-line.

Useful web sites: https://www.yesyesyes.org/ https://sylk.co.uk/ https://www.regelle.co.uk/ https://www.replens.co.uk/

Contact numbers;

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