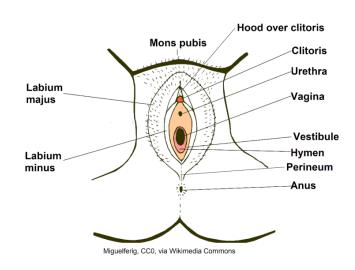


Psoriasis of the Vulva

What is psoriasis of the vulva?

Psoriasis is a skin disease that causes **chronic inflammation** (long-lasting redness, heat, swelling, and pain). Psoriasis is caused by an overactive **immune system** (your body's way of recognizing and fighting germs, infections, and diseases). We don't know exactly what causes this, but it may include a disorder in your genes that was passed to you from your parents. Most people with psoriasis of the vulva also have it on other parts of their body, but about 5% (or 1 out of 20 people with psoriasis) have it only on the vulva.

• The **vulva** is the part of the body that includes all the external (outside the body) genital parts. It covers the area from where pubic hair grows (the **mons pubis**) to the opening that stool comes out of (the **anus**). The vulva includes the large



outer lips of skin (**labia majora**), small inner lips of skin (**labia minora**), the clitoris, the opening that urine comes out of (**urethra**), and the opening to the vagina.

Psoriasis is not an infection. It is not something you can get from someone else, and you cannot give it to others by touching them.

What are the symptoms of psoriasis of the vulva?

- **Plaque psoriasis** causes thick, raised, red or gray-colored patches with silvery or white scales that often itch. If you have plaque psoriasis, your skin cells grow faster than normal, and sometimes the thickened patches of skin get painful cracks.
- Another type of psoriasis, called **inverse psoriasis**, is often seen on the vulva and in the folds between the thighs and the vulva. It can also occur in skin folds on other parts of the body, such as your underarms (armpits) and under your breasts. Skin affected by inverse psoriasis is red-colored and smooth (no scales). Sweat or rubbing of skin against skin may make it worse.
- Some things that may trigger (cause) psoriasis or make it worse include:
 - Emotional stress
 - o Skin injury
 - Infections
 - Medications (such as antimalarials, propranolol, lithium, or quinidine)

How is psoriasis of the vulva diagnosed?

- Often, your provider can diagnose psoriasis based on the way your vulva looks during an exam. Finding psoriasis on other parts of your body helps confirm the diagnosis.
- Sometimes your provider may do a **biopsy** (removing a small piece of skin for lab testing) to confirm a psoriasis diagnosis. We will give you an injection of numbing medicine before the skin is removed.

How is psoriasis of the vulva treated?

There are different kinds of treatment for psoriasis of the vulva. Your treatment will depend on the severity of your disease. We will work with you to

make a plan that works best for you. Psoriasis is a **chronic** illness, so you may need some form of treatment for the rest of your life.

Comfort measures

- Comfort measures are things you can do to decrease irritation, itching, and pain to your vulva. We have created a handout with information on comfort measures that you can read online at: bit.ly/MM- ComfortMeasuresVulvarDisease.
- Thick, unscented ointments or creams such as petroleum jelly, Eucerin®, or Aquaphor® will reduce scaling and cracking.

Treatment for infections

Cracked skin from psoriasis increases your risk of getting a yeast or bacterial infection. We will check for this and give you **topical** (cream or ointment put on the skin) or **oral** (taken by mouth) medication if needed.

Topical steroid treatment

- We will give you a prescription and schedule for using a topical steroid ointment every day. It is very important to continue treatment on this schedule, even if your itching or other symptoms stop. The symptoms you feel will stop before the inflammation is fully treated. It's important to continuing using this treatment to prevent your symptoms from returning.
- After your symptoms (itching, burning, pain, rash, etc.) have stopped and we have seen that your vulvar skin has responded to the treatment, we will give you a schedule for ongoing treatment.

Other treatments

If you need more complex treatment for your vulvar psoriasis, we will talk with your dermatologist to develop a plan. Other treatment options may include:

- Medications that target a specific part of the immune system (often called biologics)
- Methotrexate
 - This medication was first used as a cancer treatment, but it has been found to work well for psoriasis. Being on methotrexate requires careful monitoring (watching) of your blood counts and liver function.

Where can I find more information on psoriasis of the vulva?

Resource	QR code
International Society for the Study of Vulvovaginal Disease www.issvd.org/resources/vulvar-psoriasis	
National Psoriasis Foundation: The NPF is a non-profit organization with a mission to drive efforts to cure psoriatic disease and improve the lives of those affected. Visit their website at: www.psoriasis.org	

Disclaimer: This document contains information and/or instructional materials developed by University of Michigan (U-M) Health for the typical patient with your condition. It may include links to online content that was not created by U-M Health and for which U-M Health does not assume responsibility. It does not replace medical advice from your health care provider because your experience may differ from that of the typical patient. Talk to your health care provider if you have any questions about this document, your condition, or your treatment plan.

Author: Abby Brown, CNM/FNP Reviewers: Kathryn Welch, MD, Hope Haefner, MD Edited by: Brittany Batell, MPH MSW

Patient Education by <u>U-M Health</u> is licensed under a <u>Creative Commons Attribution-NonCommercial-ShareAlike 4.0 International Public License</u>. Last revised 01/2024