



Vaginal dryness

The lining of the vagina throughout a woman's life makes a clear, lubricating fluid which moistens and maintains the elasticity of the vagina making sexual intercourse more comfortable. Alterations to the lubrication systems of the body are a common consequence of aging, having autoimmune illness, in particular, Sjögren's syndrome and people taking treatment medications. Many of us will experience dryness and it can occur at any age, it is a natural response to altered hormone levels when the vaginal or the cervix tissues are not well-lubricated, have been surgically removed or are unhealthy as a result of infection or trauma.

Physiologically, when oestrogen levels are reduced, the vaginal tissues respond by shrinking and becoming thinner. This can result in increased levels of dryness and irritation leading to inflammation. Vaginal moisture is mainly produced at the top of the vagina by the cervix with oestrogen being the main hormone produced to help maintain moisture and vaginal lining thickness. As we age or at times when oestrogen levels are altered these mechanisms for moisture production are reduced. This can be a temporary or longer term problem and can result from a number of reasons.

Reasons can include:

- childbirth and breastfeeding,
- perimenopause, menopause and post menopause,
- menstrual cycle changes
- surgery particularly after a hysterectomy or after removal of the ovaries
- a side effect of chemotherapy or radiation therapy treatments
- stress, depression and anxiety
- vaginal infections
- response to chemicals contained in washing powders, soaps, some feminine hygiene sprays and other products such as tampons, condoms, diaphragms
- lifestyle habits of alcohol and smoking
- rigorous exercise
- Medications such as allergy treatments, antidepressants, and some contraceptives such as Provera or Depo-Provera, medicines or hormones used in the treatment of breast cancer, endometriosis, fibroids, or infertility.

Importantly in the autoimmune patient, vaginal dryness can be a result of having and undergoing treatment for Sjögren's, lupus scleroderma or thyroid illness.

Despite being common, vaginal dryness is not often discussed leaving woman experiencing symptoms feeling uncomfortable and distressed. Expand Section

Symptoms of a dry vagina can include:

- Itching or burning sensations
- Vaginal soreness
- A feeling of vaginal pressure
- Pain or light bleeding with sexual intercourse
- Discharge either watery or thicker this along with odour may indicate presence of a infection

Reduced vaginal moisture over a long period of time can make you more likely to get infections of the vagina of both bacterial and yeast (thrush) organisms and also the development of sores or cracks in the vaginal wall. Expand Section

If symptoms of vaginal dryness or soreness, burning, itching, or painful sexual intercourse do not go away after use of a moisturising then it is important to contact your health care providers for more investigation and more individualised treatment. Proper treatment with some guidance will ease symptoms most of the time. It may be necessary to undergo a pelvic exam to examine the walls of the vagina for signs of irritation, infection, tears or other causes. Pathology analysis of vaginal swabs and vaginal discharge may be tested to identify pathogens or rule out other causes. You may also be asked to have hormone level tests to find out if you are beginning to have reduced oestrogen as a result of perimenopause or menopause.

TREATMENTS

There are many treatments available that can ease the symptoms of a dry vagina these can include pharmaceutical medications, topical lotions, gels and oils that are designed to supplement depleted hormones and/or provide lubrication. These preparations should be used in conjunction to some every day practises and lifestyle changes to get the most effective and sustained relief.

Localised oestrogen therapy is recommended over a more systemic therapy with caution and extra specialist advice needed in women with a past history of hormone receptive cancers. Localised prescription oestrogen has been shown to be effective in treating atrophic vaginitis and is available as a direct vaginal treatment in creams, tablet, suppository, or ring. In addition, oestrogen can be prescribed in the form of an adhesive skin patch or in a pill that you take by mouth. These more systemic treatments can ease symptoms of vaginal dryness as well as other menopausal symptoms including hot flashes; however you should discuss the risks and benefits of this therapy with your medical practitioner.

The most immediate and effective solution for dryness is to use **vaginal lubricants and moisturisers** applied directly into the vagina. Non-hormonal vaginal moisturisers provide relief from the uncomfortable symptoms of vaginal dryness, whilst vaginal lubricants provide direct moisture and lubrication to enhance the comfort and ease of sexual intercourse. A third type of cream contains oestrogens in a low dose replacing moisture and helping to retain elasticity. In this case small amount of hormone can be absorbed into the body therefore if you have had ovarian, endometrial, or breast cancer you should consult your oncologist before using any hormonally active product. Although in general, they are considered safe.

Lubricants and moisturisers have variable duration of action ranging from short number of hour(s) to longer lasting up to 3 days for some new commercially manufactured vaginal moisturisers. Many of these can be bought without prescription. Patients have previously reported positive results from coconut oil, aloe Vera gel and commercial products such as "Vagisil", "Replens", "Astroglide", "K-Y jelly" and "Sylk", however there are a number of different products on the market. Product ingredients vary, with some products having a more naturally plant based content and others, including synthetically manufactured chemicals with therapeutic and preservative properties. If using a commercial product, the use of a water-soluble vaginal lubricant is recommended as products with petroleum jelly, mineral oil, or other oils are known to damage latex condoms or diaphragms and may prevent affect the integrity and function of sperm acting as a mild spermicide.

Other ways of managing vaginal dryness

- Avoid substances that can irritate or dry the vaginal region, such as soap, lotions, douches or products containing alcohol or fragrances or scents.
- Products containing petroleum jelly and baby oil are based on mineral oils which can cause irritation.
- Use a soap-free product to wash the vaginal area.
- Wear cotton underwear and avoid tight underwear or clothing.
- Avoid excessive hot water bathing, saunas,
- Think about the foods and drinks you consume that can cause dehydration. Limit high sugar drinks, alcohol, caffeine and also salty foods.

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