

UNIT 5: NEOPLASIA

Educational Topic 51: Vulvar Neoplasms

Rationale: Early recognition and proper evaluation of vulvar neoplasms can reduce morbidity and mortality.

Intended Learning Outcomes:

A student should be able to:

- List the risk factors for vulvar neoplasms
- Describe symptoms and physical examination findings of a patient with vulvar neoplasms
- List the indications for vulvar biopsy

TEACHING CASE

CASE: A 67 year-old woman presents with the complaint of a pruritic area on the right side of her vulva. She has noticed this for about three months, and has used a variety of over-the-counter creams, including imidazole and corticosteroid preparations, without success. She underwent menopause at age 52, and tried hormone replacement therapy for three years, but discontinued this due to irregular bleeding. The bleeding stopped when she stopped the hormones. She does have a history of abnormal Pap smears, including a cervical conization at age 35. Her last Pap was approximately 7 years ago. The patient has a long-standing history of hypertension and takes a beta-blocker. She smokes 1 pack cigarettes per day, and has done so for 30 years. Her general physical examination is essentially unremarkable. Examination of her groin lymph nodes reveals no palpable adenopathy. Examination of the external genitalia reveals a 1 cm raised, firm, irregular, lesion on the right labia majora. Excoriations are also noted adjacent to this lesion. The rest of the vulva is notable only for atrophic changes. The vagina is also atrophic, and the cervix is grossly normal. The uterus is small and the ovaries are nonpalpable.

COMPETENCY-BASED DISCUSSION & KEY TEACHING POINTS:

Competencies addressed:

- Patient Care
- Medical Knowledge

