Educational Topic 35: Vulvar and Vaginal Disease

Rationale: Vulvar and vaginal conditions occur frequently, can be distressing, and may have serious consequences.

Intended Learning Outcomes:
A student should be able to:

• Formulate a differential diagnosis for vulvovaginitis
• Interpret a wet mount microscopic examination
• Describe the variety of dermatologic disorders of the vulva
• Discuss the steps in the evaluation and management of a patient with vulvovaginal symptoms

TEACHING CASE

CASE: A 20 year-old female college student comes to see you because of a persistent vaginal discharge. She is also interested in discussing contraceptive options. She and her boyfriend have been sexually active for 6 months. They use condoms “most of the time,” but she is interested in using something with a lower failure rate for birth control. She has regular menses and no significant past medical or gynecologic history. She describes her vaginal discharge as yellowish and also notes mild vulvar irritation. On physical exam, she has normal external female genitalia without lesions or erythema, a gray/yellow discharge on the vaginal walls and pooled in the posterior fornix. Her cervix is grossly normal but bleeds easily with manipulation. The bimanual exam is unremarkable.

COMPETENCY-BASED DISCUSSION & KEY TEACHING POINTS:
Competencies addressed:
• Patient Care
• Medical Knowledge
• Systems-Based Practice
1. What is your differential diagnosis?

2. What tests are currently available to help in the diagnosis of these disorders?

3. What test findings would suggest trichomoniasis?

4. What two findings can be used to diagnose vulvovaginal candidiasis?

5. What are Amsel's Criteria for the diagnosis of Bacterial Vaginosis?

6. The patient is diagnosed with trichomoniasis. What is your treatment plan for this patient?
7. What are the additional reproductive health issues you would want to discuss with this patient?

8. Would you recommend screening for additional sexually transmitted infections in this patient and if so, how?

REFERENCES


