



## **CARE OF VULVAL SKIN**

### **What are the aims of this leaflet?**

This leaflet has been written to help you understand more about the care of vulval skin. It gives general advice for women who have a diagnosed skin condition affecting the vulva or who experience symptoms such as itching, dryness or soreness in the genital region.

### **What is vulval skin?**

The “vulva” is the term used to describe the visible part of the female genitalia. The skin of the vulva is sensitive and can be easily irritated by everyday products including soap, bubble baths, shower gels, talcum powder, cleansing wipes, perfumes, deodorants, antiseptics, fragranced washing powders and fabric conditioners. Such products may make your skin sore and uncomfortable.

### **How should I care for my vulval skin?**

- Avoid using irritant products, as listed above on the vulva
- Do not wash the vulva too often (once a day is usually enough) as this may aggravate dryness and cause irritation
- Apply an emollient (moisturising) ointment, cream or lotion regularly

### **How should I wash my vulva?**

Wash your vulva gently, using either your hands or a soft flannel or cloth. Pat the area dry with a soft towel. If your vulva is inflamed, it is preferable to use an emollient as a substitute for soap. Do not use cleansing wet wipes.

### **How should I apply an emollient?**

An emollient will moisturise and soothe the vulval skin if it is sore, dry or itchy. A wide range of emollients are available, ranging from greasy products to creams. Avoid perfumed products. Your doctor or pharmacist may suggest a selection for you to try, and you should then choose the one that you prefer.

The emollient should be applied directly to your vulval skin with your fingers or a soft flannel, and gently rubbed in. Emollients should be applied as often as you need, and there is no restriction on when and how much to use. They can also be used as a protective barrier prior to passing water or opening your bowels.

### **When should I apply other treatments?**

Do not to apply your emollient at the same time as other treatments, as this might dilute their effect and risk spreading the treatment preparation to areas that do not require it. Leave an interval of at least 15-30 minutes between moisturising and applying other treatments.

### **What are the possible side effects of emollients?**

Emollients are unlikely to cause serious side effects unless you are allergic to one of the ingredients. Occasionally they might irritate or sting if you have a sensitive skin, in which case it is worth trying alternative emollients. If your skin condition worsens after using an emollient, or if you develop a rash or experience stinging, stop its use and consult your doctor.

You may find it more comfortable to wear loose fitting cotton underwear and avoid tight fitting clothing such as jeans or leggings.

**CAUTION:** This leaflet mentions 'emollients' (moisturisers). When paraffin-containing emollient products get in contact with dressings, clothing, bed linen or hair, there is a danger that a naked flame or cigarette smoking could cause these to catch fire. To reduce the fire risk, patients using paraffin-containing skincare or haircare products are advised to avoid naked flames completely, including smoking cigarettes and being near people who are smoking or using naked flames. It is also advisable to wash clothing and bed linen regularly, preferably daily.

For details of source materials used please contact the Clinical Standards Unit ([clinicalstandards@bad.org.uk](mailto:clinicalstandards@bad.org.uk)).

**This leaflet aims to provide accurate information about the subject and is a consensus of the views held by representatives of the British Association of Dermatologists: individual patient circumstances may differ, which might alter both the advice and course of therapy given to you by your doctor.**

*This leaflet has been assessed for readability by the British Association of Dermatologists' Patient Information Lay Review Panel*

**BRITISH ASSOCIATION OF DERMATOLOGISTS  
PATIENT INFORMATION LEAFLET  
PRODUCED MARCH 2009  
UPDATED JANUARY 2013, FEBRUARY 2016  
REVIEW DATE FEBRUARY 2019**

