



Editorial

Female genital dermatoses

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Received: 26 January 2022
Accepted: 26 January 2022
Epub Ahead of Print: 30 April 2022
Published: 14 October 2022

DOI
[10.25259/JSSTD_4_2022](https://doi.org/10.25259/JSSTD_4_2022)

Quick Response Code:



The vulvar region is a complex mucocutaneous area which is seen at the confluence of urinary, vaginal, and anal apertures, which makes it susceptible to various infectious and inflammatory conditions. Vulvar pathology is often multifactorial and overlapping. In obscure vulvar conditions, a multidisciplinary approach involving the dermatologists, gynecologists, urologists, and gastroenterologists is ideal.^[1]

However, vulvar dermatoses are an under-evaluated group, mainly due to reticence of women to come forth with their problems due to fear and cultural taboos, along with the awkwardness associated with a genital examination. Fear of sexually transmitted diseases and malignancies further complicates the situation. There is often a delay in diagnosis and proper treatment due to the hesitancy of the patient in seeking care and hesitancy of the doctor in ordering a biopsy or other specific investigations. Many a condition often appears different on skin and genitalia, confusing the non-dermatologist.^[2]

Vulvar diseases may be specific to the vulva or may occur as part of a generalized disorder. Clinical features may be modified due to friction, moisture, and occlusion. Chronic vulvar dermatoses are often associated with dyspareunia.^[3] Sexual dysfunction is seen in up to 50% of women with chronic vulvovaginal disease, which amounts to twice the frequency of the same in general population.^[4] Vulvar dermatoses are often a field of contention between dermatology and gynecology. However, the study of the vulva is now emerging as a recognized branch of clinical dermatology, with growing research and dermatologists are expected to perform a key role in the multidisciplinary approach to this hitherto neglected branch.

The International Society for the Study of Vulvovaginal Disease (ISSVD) was founded in 1970 and has quickly grown into a society that globally promotes education regarding vulvovaginal diseases among interested health-care professionals, especially dermatologists and venereologists.^[5] The ISSVD has also put forth various classifications which have been adopted universally.

The fourth review article of the issue discusses premalignant conditions of the vulva. This is followed by a review on vulvar inflammatory disorders which encompass a varied group of conditions such as contact dermatitis, lichen planus, and lichen sclerosus, which if left untreated have a tendency to chronicity, and even malignancy in select cases. The sixth review article deals with the non-sexually acquired bacterial infections of the vulva and their appropriate management. The seventh and the last review is on the controversial entity “cytolytic vaginosis,” a condition that closely mimics vulvovaginal candidiasis symptomatically. However, there are conflicting opinions regarding the existence of an entity which causes vaginal discharge, pruritus, dysuria, and dyspareunia in the affected due to the overgrowth of vaginal lactobacilli.

These topics are selected considering their importance in day-to-day clinical practice.

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Declaration of patient consent

Not required as there are no patients in this article.

Financial support and sponsorship

Nil.

Conflicts of interest

Dr. Smitha Prabhu is on the editorial board of the Journal.

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How to cite this article: Prabhu SS. Editorial: Female genital dermatoses. *J Skin Sex Transm Dis* 2022;4:178-9.