Patients Don’t Ask About Vulvovaginal Atrophy

BY FRAN LOWRY
Orlando Bureau

Vulvovaginal atrophy, a condition that is readily treatable and can lead to serious urogynecologic problems if left untreated, is a taboo subject among women and their physicians. Dr. James A. Simon, professor of obstetrics and gynecology at George Washington University in Washington, lays the blame for this “conspiracy of silence” on the shoulders of clinicians. But he also says that women should become proactive and lose their inhibitions about broaching the subject with their doctors.

“How can we do anything about this problem if women are reluctant to complain and ask for treatment, and their doctors don’t even ask them about the health of their vaginas?” Dr. Simon said in an interview at the annual meeting of the North American Menopause Society. He and his associates surveyed the attitudes of postmenopausal women to vulvovaginal atrophy and its symptoms in a random sample of 2,744 women 45 years of age and older who were culled from a database of 60,000 households throughout the United States. These women had all responded positively to a screening question that asked: “Are you postmenopausal and experiencing symptoms of vaginal dryness, comfort, such as dryness, pain, irritation, itching, or similar symptoms?” The women answered the questions online, “in the privacy of their own home, without the impediments of a clinical setting. Our hope was that the women would respond normally and that we would learn what their true attitudes were,” Dr. Simon explained.

Subjects were asked how their symptoms affected their sexual function, relationships with partners, self-esteem, and feelings of well-being, and then to rate how worsome this was to them on a Likert scale ranging from 1 (not a problem) to 7 (a very significant problem).

Over half of the respondents (1,619 women) somewhat or strongly agreed that long-term vulvar/vaginal symptoms negatively affected their moods. One third admitted their symptoms affected their self-esteem, and half said that their symptoms were making sexual intimacy a problem.

Many women said their symptoms had made sexual intimacy a problem, and also admitted they were reluctant to talk about vaginal dryness problems with their doctor.

Half of those surveyed (49% or 1,345 women) said they would not bring it up, and the majority (72% or 1,976 women) said they had never been asked about vaginal dryness by their doctor.

When the women were asked if they would seek medical care for vulvovaginal atrophy if they knew that it was treatable and that left untreated, it could lead to long-term urologic complications, just half agreed they would bring it up with their practitioner.

“So we have a problem. Actually, we have two problems. One, patients know they have a condition that impacts their life, but half of them won’t bring it up with their practitioners. And two-thirds of practitioners don’t even bring it up with their patients,” said Dr. Simon.

He added that he is concerned by these findings. “Although it is exciting from a researcher’s perspective to learn just how great the abyss is between having vulvovaginal atrophy and telling one’s clinician about it, it bothers me that women are still so loathing of their vaginas that they won’t even bring up the subject.”

The problem revealed in his survey may represent only the tip of the iceberg, because, unlike many postmenopausal women, the participants had access to computers. Many postmenopausal women do not own computers or even know how to use them, he said.

“We haven’t done a good job of capturing those people, and we may actually have underestimated how bad the problem is because vaginal atrophy and its symptoms tend to get worse as women age. Aging Americans are having sex for sure, and we’ve probably missed many of them in this study because they’re not Internet savvy,” Dr. Simon said.