The vulva

The vulva is a general term describing a woman's external sex organs. The main parts of the vulva are the:

- mons pubis—the soft, fatty mound of tissue covered with pubic hair, above the labia
- labia—two large, outer lips (the labia majora) which surround two smaller, thinner inner lips (the labia minora)
- clitoris—a highly sensitive organ found where the labia minora join at the top.

When stimulated, the clitoris fills with blood and enlarges in size. Stimulation of the clitoris can result in sexual excitement and orgasm or climax.

The opening of the vagina is below the clitoris. There are also small glands near the opening of the vagina—called Bartholin's glands—that produce mucus to lubricate the vagina.

The skin between the vulva and anus is called the perineum.
What is vulvar cancer?

Cancer of the vulva can start in any part of the external female sex organs. The most common areas for cancer to develop are the labia minora, the inner edges of the labia majora and the perineum. Less often vulvar cancer may involve the clitoris. It can also begin in or spread to the Bartholin’s glands.

There are several types of vulvar cancer:

- **Squamous cell carcinoma**—is the most common type making up about 90 per cent of all cases. It affects the skin cells of the vulva.
- **Vulvar melanoma**—a type of skin cancer that develops from the cells that give the skin its colour. About two to four per cent of vulvar cancers are melanoma.
- **Adenocarcinoma**—cancer that begins in the glandular cells lining the skin of the vulva.
- **Extramammary Paget's disease**—which looks a lot like eczema.
- **Verrucous carcinoma**—slow-growing cancer that looks like a large wart.
- **Sarcomas**—develops from muscle, fat and connective tissue. Sarcomas tend to grow faster than other types of vulvar cancer.

Each year about 300 Australian women are diagnosed with cancer of the vulva. It commonly affects post-menopausal women. The incidence is highest for women older than 80. It sometimes occurs in younger
Symptoms of vulvar cancer

There are often no obvious symptoms of vulvar cancer. However you may have one or more of the following symptoms:

- a lump, sore, swelling or wart-like growth on the vulva
- itching, burning, soreness or pain in the vulva
- thickened, raised, red, white or dark brown skin patches
- a mole on the vulva that changes shape or colour
- blood, pus or other discharge coming from a lesion or sore spot which may have an offensive or unusual odour or colour and is not related to your menstrual period.

Many women don’t look at their vulva so they do not know what is normal for them. However if you feel any pain in your genital area or notice any of the above symptoms you should make an appointment for a check up with your GP.

Risk factors

The exact cause of vulvar cancer is unknown but there are some factors known to increase the risk of developing it:

Vulvar intraepithelial neoplasia (VIN)

This is a pre-cancerous condition of the vulva. The skin of the vulva changes and may itch, burn or feel sore. VIN may disappear without treatment but it can sometimes become cancerous. About one in three women who develop vulvar cancer has VIN.

Human papillomavirus (HPV)

Also known as the wart virus, HPV is a sexually transmitted infection that can cause women to develop VIN. Although having HPV increases the risk of vulvar cancer most women with HPV don’t develop it.

Other skin conditions

Non-cancerous (benign) skin conditions such as vulvar lichen sclerosus, vulvar lichen planus and extramammary Paget’s disease can cause itching and soreness and, after many years, may develop into cancer.

Smoking

Cigarette smoking increases the risk of developing VIN and cancer of the vulva. This may be because smoking can make the immune system work less effectively.

Vulvar cancer is not contagious and it can’t be passed to other people through sexual contact. It is also not caused by an inherited faulty gene so it can’t be passed on to children.

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