

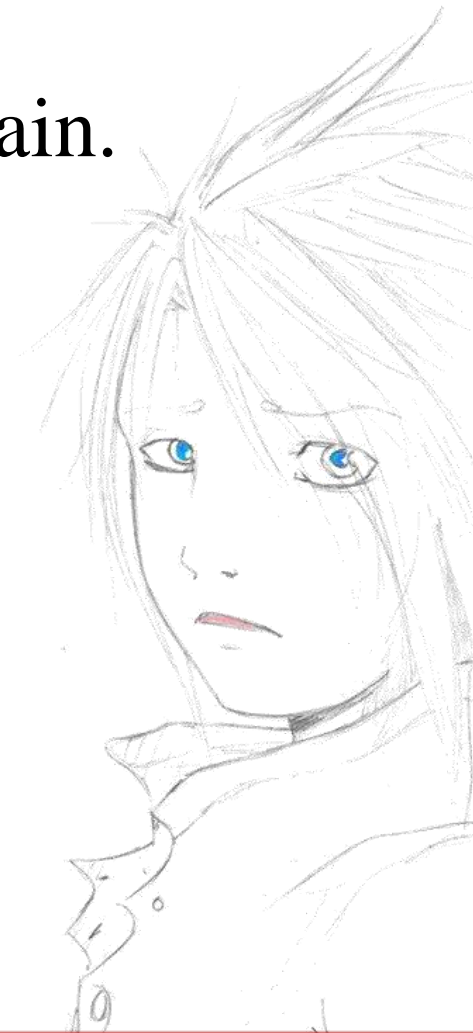
Vulvovaginal Pain in a Teenager

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Case

- 14 year old girl.
- 2.5 year history of Chronic Vulvar pain.
- Generally over the clitoris.
- Burning sensation.
- Worse with contact.
- Day to Day Function ok.



Case

- Healthy Otherwise.
- Was treated for chronic constipation as a child.
- No Surgeries.
- Mother reports normal development.
- Normal Menarche.
- Normal Menses.



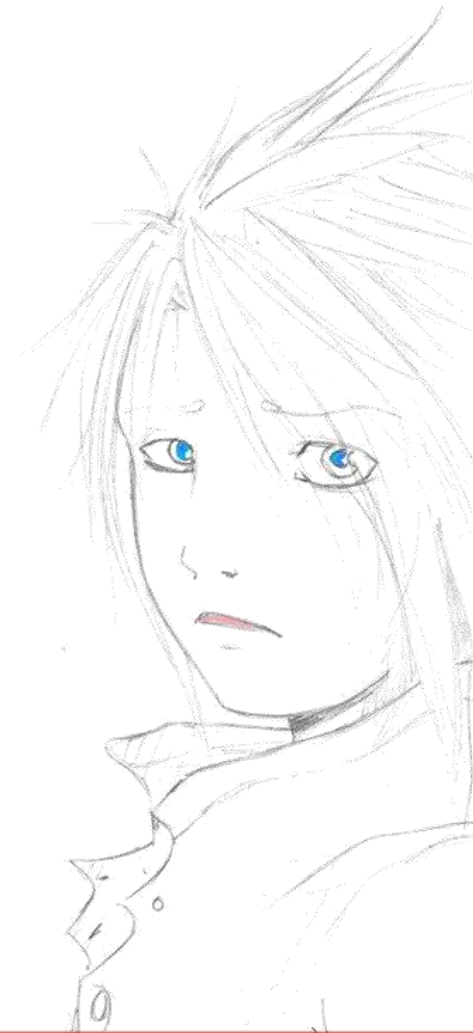
Case

- No Meds.
- No Allergies.



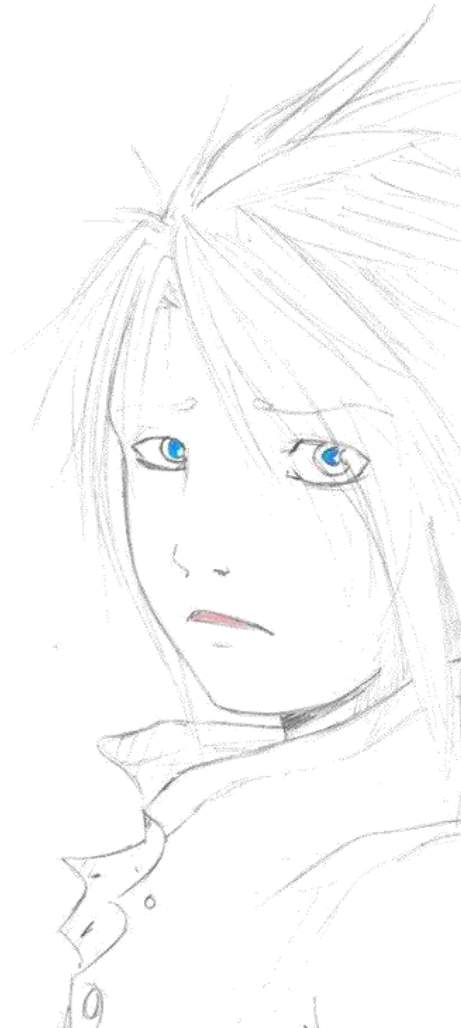
Case

- Denies Sexual Activity or Abuse.
- No Smoking.
- No Drugs.
- 9th Grade.
- Athletic.
- Straight A Student.
- All well at home.



Physical Exam

- Tanner Stage V.
- Normal Vulva.
- Normal Labia.
- Note of clitoral edema and redness.
- On careful look.....

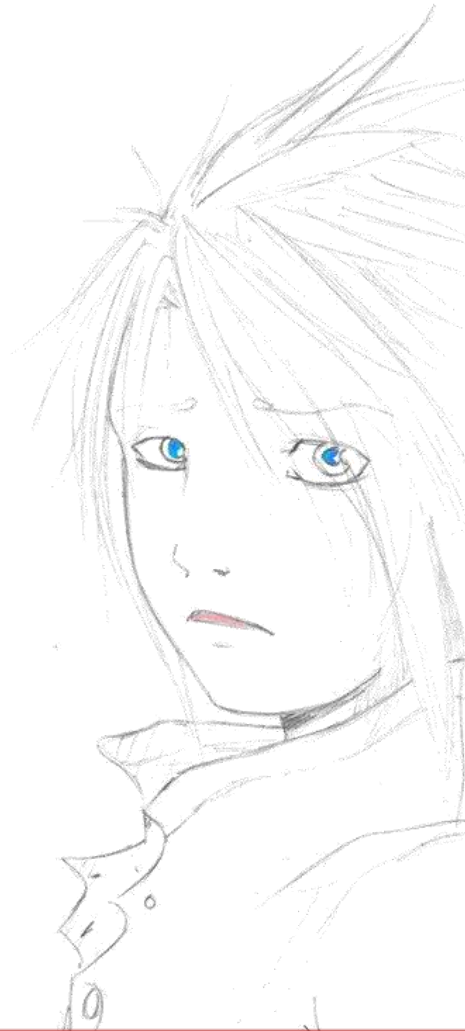


Physical Exam



Physical Exam

- Clitoris.
 - Hair Protruded under the Hood.
 - 2cm Hair was removed.
 - Coiled at the end.
 - A second hair was easily removed.
 - No necrosis.



Background

- Hair Tourniquet Syndrome reported as early as 1600.
- Literature report in 1832.
- Revengeful Baby Nurse wrapped a hair a new born male's genitals.



Background

- Fingers, Toes and Genitalia have been reported.
- Necrosis can occur.
- At least 26 cases in literature.
- Generally accidental.
- Can be self inflicted or abuse.
- Can Recur.



Review of Literature

- Pomeranz et al (2009)
 - Three cases:
 - Tourniquet of the labia minora.
 - 11-13 years old.
 - Acute onset.
 - Resolved with treatment.
 - Vulvar swelling and pain.
 - 1 patient had urinary retention.



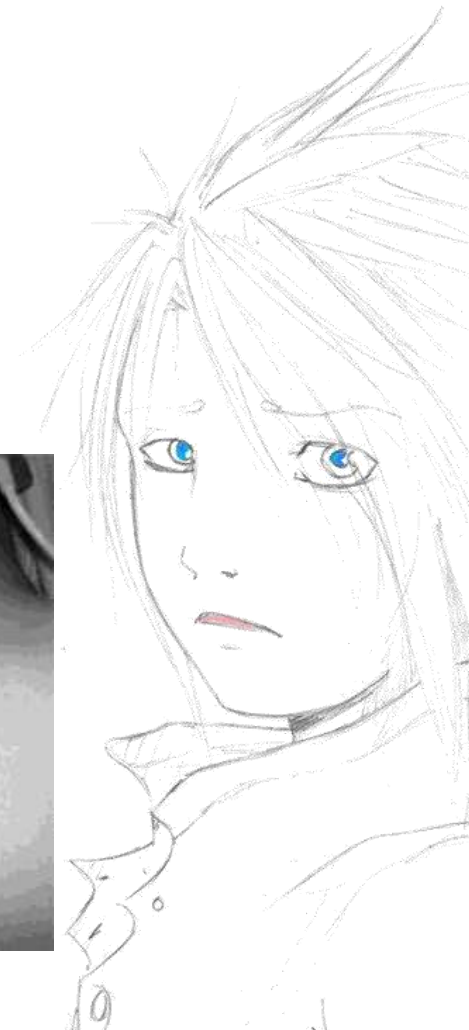
Review of Literature



Pomeranz et al
Case 3

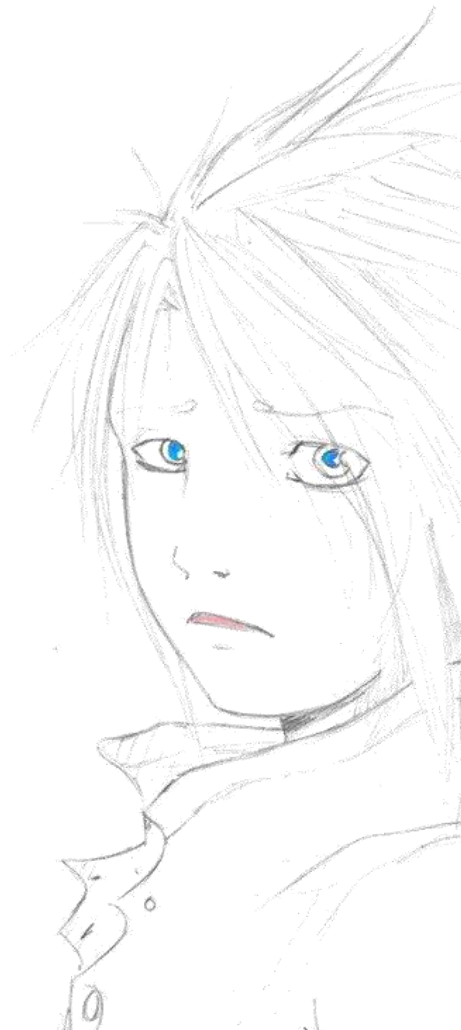
Review of Literature

- Serour et al (2007)
 - 4 year old
 - Vulvar pain and swelling.
 - Clitoral swelling noted.



Review of Literature

- Hussain (2008)
 - 6 year old boy.
 - Strangulation of Penis.
 - Ended in Shaft Amputation.



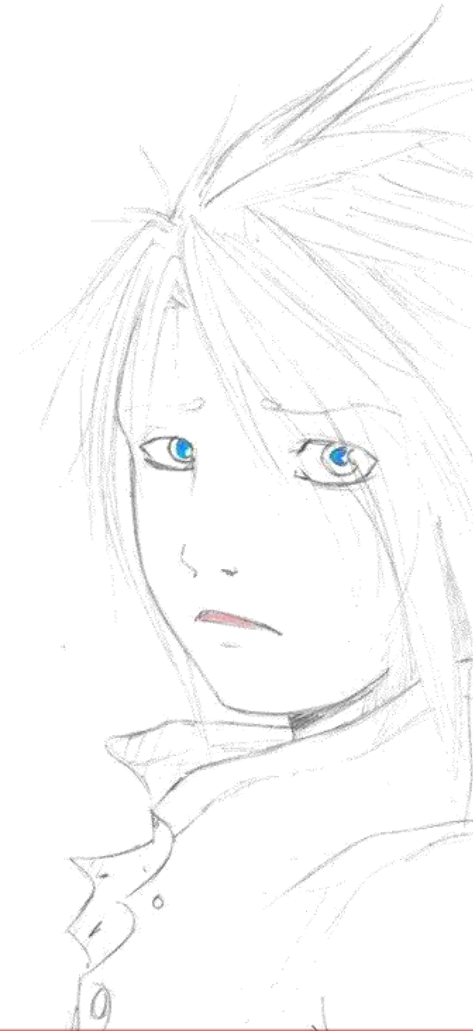
Review of Literature

- Treatment
 - Acute
 - Recognize early.
 - Remove the hair tourniquet.
 - Antibiotic.
 - May need local for removal.
 - Remove dead tissue if it does not revitalize.



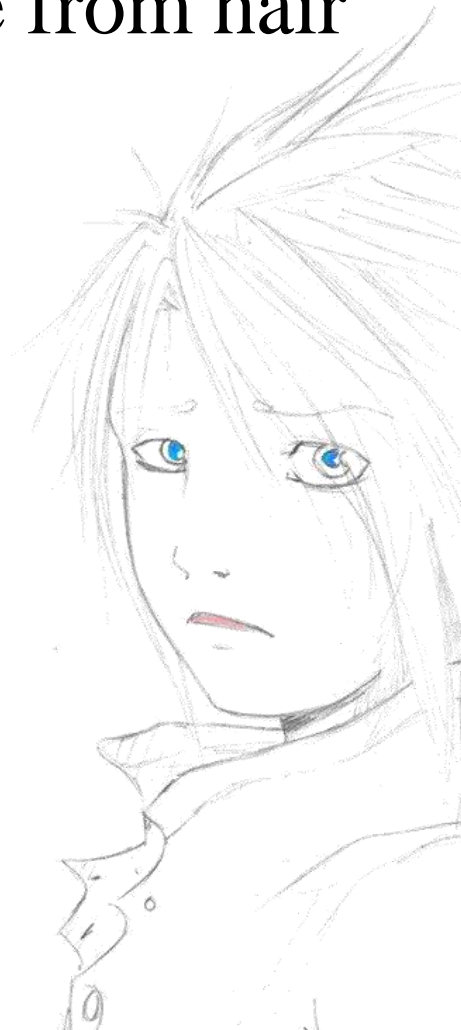
Review of Literature

- Differential
 - Trauma.
 - Sexual Abuse.
 - Herpetic Lesion.
 - Folliculitis.
 - Vulvar Infection.
 - Necrotizing Fasciitis.



Review of Literature

- No reports of chronic pain syndrome from hair tourniquet in literature.



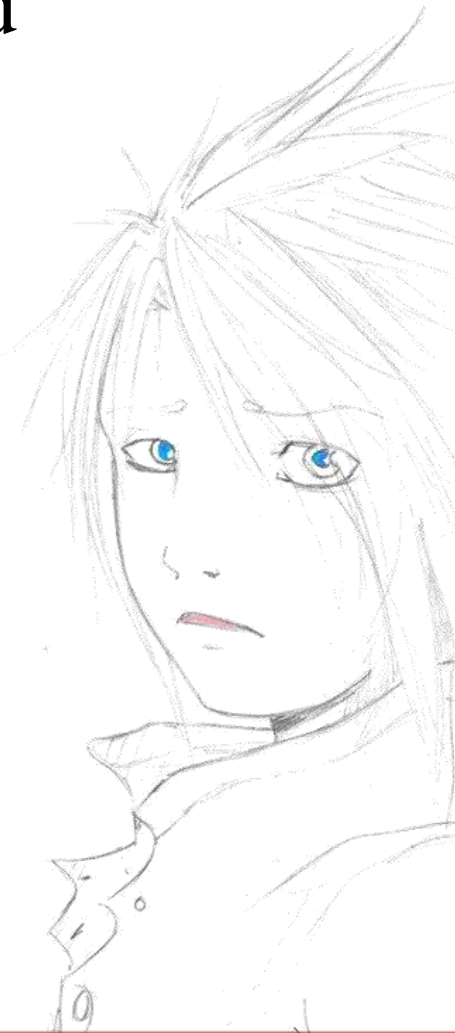
Case

- Initial Improvement.
- 3 week follow-up.
 - Significant Clitoral Pain and Burning.
 - Described Vaginal Pain.
 - Burning with insertion of tampons.
 - External Pain.
 - Positive Cotton Swab Test.
 - Significant Vulvovestibular sensitivity and pain.



Case

- Palpation of the bulbospongiosus and superficial transverse perinei.
 - Significant muscle spasm and pain.
- ?Secondary Chronic Pain Syndrome.
 - ?Neuropathic type pain.
 - Pelvic floor physiotherapist.
 - Self-desensitization.
 - Amitriptyline 50 mg qhs.



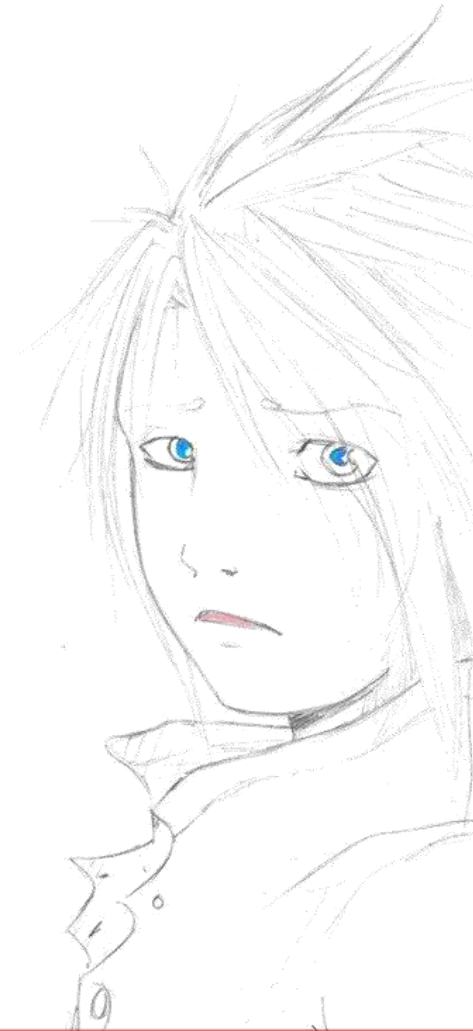
Case

- 5 week later....
 - Patient's pain was significantly improved.
 - Very sleepy during the daytime.
 - Amitriptyline dose was decreased to 25 mg qhs.



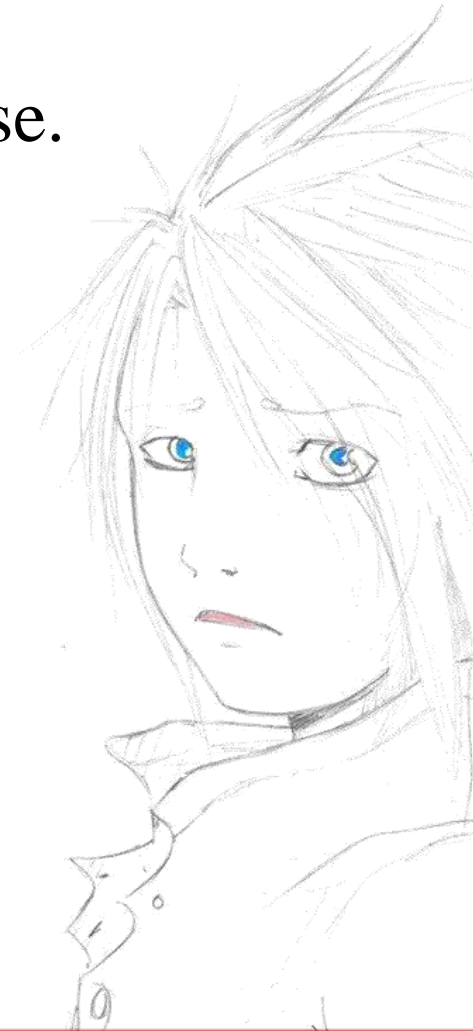
Case

- 8 weeks.....
 - Overall improvement.
 - Amitriptyline to 10 mg qhs x 4/52 then taper.



Case

- 14 weeks later....
 - Pain better controlled on the 25 mg dose.
 - Much Improvement.
 - Awaiting physio.
 - Advised slow taper when tolerated.



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Thank
you



References

- Hussain. Journal of Pediatrics and Child Health. Volume 44, Issue 10, 2008; 606-607.
- Serora et al. Journal of Emergency Medicine. Volume 33, Issue 3, 2007; 283-284.
- Pomeranz et al. Journal of Pediatric and Adolescent Gynecology. Volume 22, Issue 5, 2009; 111-113.
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