About Vulvar Cancer

This information explains vulvar cancer, including symptoms, diagnosis, and treatments.

You don’t need to read all of this information at once. It’s meant for you to use over time. It may help to read some sections before you speak with your healthcare provider so you will have a better idea of what to ask. Other sections may help you remember what your healthcare provider has told you.

About Your Vulva

Vulva is another name for your external sex organs, or genitals (see Figure 1). Your vulva includes:

- The inner and outer lips of your labia
- Your clitoris
- The opening of your vagina
- Your vaginal glands, which are in your perineum (the area between your vulva and anus)

Figure 1. Your vulva
About Vulvar Cancer

Vulvar cancer is rare. It can be in any area of your vulva, but it’s usually in the outer lips of your labia.

Vulvar cancer usually develops slowly over many years. It starts as abnormal cells. These abnormal cells are precancerous, which means they aren’t cancer but they may grow into cancer. Groups of abnormal cells are also called dysplasia or vulvar intraepithelial neoplasia (VIN).

Abnormal cells can grow on your vulvar skin for a long time. It’s important to have regular exams to help your healthcare provider notice them early, which makes them easier to treat. Treating abnormal cells can help keep them from turning into vulvar cancer.

About half of all vulvar cancers are caused by an infection with certain types of human papillomavirus (HPV). Vaccines that protect against these types of HPV may lower your risk of getting vulvar cancer. If you’d like more information about HPV vaccines, talk with your healthcare provider.

Signs and Symptoms of Vulvar Cancer

Vulvar cancer often doesn’t cause symptoms right away. If you have any of the symptoms listed below, don’t ignore them.

Use a mirror to examine your vulva once a month. If you see any of the things below, tell your healthcare provider.
• A lump, thickening or ulcer (sore) on your vulva.
• A patch of skin that has a different texture or color than the rest of your skin.
• A change in the way a mole looks.
• Wart-like growths.
• Itching or burning that doesn’t go away with treatment.
• Bleeding or discharge not related to menstruation (periods).
• Tenderness or pain.
• Pain during intercourse (sexual activity) or urination.
• Unusual odor.

These symptoms may be signs of vulvar cancer, or they may be caused by another condition. Your healthcare provider will talk with you and do tests to learn more.

**Diagnosing Vulvar Cancer**

There aren’t any screening tests for vulvar cancer. Your healthcare provider will ask about your medical history and do a physical exam. They may also do other medical exams and tests such as a pelvic exam, vulvar biopsy, or imaging scans.

**Pelvic exam**

During a pelvic exam, your healthcare provider will examine your vagina, cervix, uterus, fallopian tubes, ovaries, and rectum. They will wear gloves and use a lubricating gel to insert 1 finger into your vagina while placing their other hand
over your lower abdomen (belly). This will let them feel the size, shape, and position of your organs to see if anything is abnormal.

**Vulvar biopsy**

Your healthcare provider may take a sample of your vulvar tissue. This is called a biopsy. The biopsy can be done in your healthcare provider’s office. The tissue will be sent to a lab and examined under a microscope to check for signs of cancer.

**Imaging scans**

Your healthcare provider may also do other tests, such as an imaging scan.

- A computed tomography (CT) scan uses a computer linked to an x-ray machine to create pictures of the inside of your body. You may be asked to drink dye or have it injected into one of your veins to make your organs show more clearly.

- A magnetic resonance imaging (MRI) scan uses magnetic fields to make detailed pictures of the inside of your body.

- A positron emission tomography (PET) scan uses small amounts of radioactivity to make images of your entire body. A small amount of radioactive material will be injected into one of your veins. This material is absorbed mainly by tissues that use the most energy, such as cancer. The images from the PET scan can show if there’s cancer in your body.

- A PET-CT scan combines the images from a PET scan and a CT scan. They’re done at the same time on the same
Stages of Cancer

Stages are a way to describe cancer. Cancer stages are based on where the cancer is, how big it is, and if it has spread. Knowing the stage of your cancer will help your healthcare provider make the best treatment plan for you.

Metastatic cancer

When cancer has spread beyond where it started, it is called metastatic cancer. Cancer can spread:

- Into nearby tissue.
- To your lymphatic system and then to other areas in your body. Your lymphatic system helps your body fight infections. It contains tiny, bean-shaped organs called lymph nodes.
- To your blood vessels and then to other areas in your body.

Your healthcare provider will talk with you about the stage of your cancer. If you’d like to learn more about the stages of vulvar cancer, you can read the “Stages of vulvar cancer” section below.

Recurrent cancer

Recurrent cancer is cancer that has come back after it has been treated. Recurrent vulvar cancer can come back in the area of your vulva or in other parts of your body.

Stages of vulvar cancer
• Stage 0 (carcinoma in situ): The cancer is only on the surface of your vulva. It hasn’t spread from where it started.

• Stage I: The cancer is only in your vulva or perineum. It hasn’t spread to your lymph nodes or other parts of your body. This stage is divided into stage IA and stage IB.
  
  ○ Stage IA: The cancer is 2 centimeters (about 0.8 inches) or smaller. It hasn’t spread more than 1 millimeter deep into your vulvar tissue.
  
  ○ Stage IB: The cancer is more than 2 centimeters, it has spread more than 1 millimeter deep into your vulvar tissue, or both.

• Stage II: The cancer has grown into tissues near your vulva and perineum, such as the lower part of your urethra, vagina, or anus. It hasn’t spread to your lymph nodes or other parts of your body. It can be any size.

• Stage III: The cancer has spread to lymph nodes near your vulva.

• Stage IV: The cancer has spread to other places near your vulva or to distant organs. This stage is divided into stage IVA and stage IVB.
  
  ○ Stage IVA: The cancer has spread to any of the following places near your vulva:
    
    ■ Your upper urethra, vaginal mucosa, bladder mucosa, rectal mucosa, or fixed to your pelvic (hip) bone.
    
    ■ Fixed (meaning they don’t move when you feel them)
or ulcerated inguina-femoral lymph nodes, which are in your groin

- Stage IVB: The cancer has spread to distant parts of your body.

**Treatments for Vulvar Cancer**

Treatment for vulvar cancer depends on:

- The size and location of the cancer.
- If the cancer has spread.
- Your overall health.

Your healthcare provider will talk with you about your treatment options.

**Surgery**

Surgery is the main treatment for vulvar cancer.

The cancer may be in more than one area, so a large amount of tissue may need to be removed. If the tumor is large (more than 2 centimeters) or has grown deeply into your vulva, the lymph nodes in your groin area may also be removed.

**Types of surgery**

There are 4 main types of vulvar surgery:

- Laser surgery is the use of a focused beam of light that burns cells off your skin. It’s only used to treat precancerous conditions.
• A wide local excision is the removal of the tumor and some nearby tissue. The nearby healthy tissue is removed to make sure all of the cancer is gone.

• A vulvectomy is the removal of all or part of your vulva.
  ○ Partial vulvectomy: The part of your vulva where the cancer is located is removed.
  ○ Simple vulvectomy: Your entire vulva is removed.
  ○ Radical vulvectomy: Part or all of your vulva and nearby tissue is removed.

• A lymph node dissection is the removal of 1 or more lymph nodes.
  ○ Sentinel node dissection: Only the first nodes that drain the area near the cancer are removed.
  ○ Complete lymph node dissection: All of the lymph nodes near your vulva are removed. It can be done on 1 or both sides of your perineum. A complete lymph node dissection increases the risk of lymphedema (swelling) in your leg on the side the nodes were removed.

If you’re having surgery, your healthcare provider will talk with you about which type may be right for you. Your nurse will give you written information about the surgery you’re having.

If you’re having vulvar reconstruction as part of your surgery, you will also meet with a plastic surgeon to plan your care.

**What to expect after surgery**
You will need time to heal and recover. Recovery time depends on the specific surgery and how much tissue was removed. Some women need longer to heal than others. Ask your healthcare provider what you should expect.

The area where you had surgery will be sore for a few weeks after your surgery. You will get pain medication while you’re in the hospital and a prescription for pain medication before you go home. You may also go home with drains in or around your incision. If you do, your nurse will teach you how to care for them before you leave the hospital.

You will see your surgeon 7 to 10 days after your surgery. They will check your surgery site and remove any stitches and drains.

Sitting may be painful for 3 to 4 weeks after your surgery. You will be able to lie down and stand. If you had major surgery or reconstructive surgery, you may not be able to sit for up to 8 weeks.

**Radiation therapy**

You may have radiation therapy if the cancer has spread to other areas in your body, such as your lymph nodes or other organs. Radiation therapy can also be used before surgery to shrink the tumor.

There are 2 main types of radiation therapy:

- External beam radiation therapy is the most common type
of radiation therapy. It’s given by a machine from outside of your body.

- Brachytherapy is radiation therapy that’s given internally (from inside your body) using radioactive implants.

If you’re having radiation therapy, your healthcare provider will talk with you about which type may be right for you. Your nurse will give you written information about the type of radiation therapy you’re having.

**Chemotherapy**

If you’re having chemotherapy, your nurse will give you written information about the chemotherapy medications you will receive.

**Biologic therapy**

Biologic therapy is also called biotherapy or immunotherapy. It’s a treatment that uses your immune system to fight cancer.

With biologic therapy, substances made by your body or in a laboratory are used to boost, direct, or restore your body’s natural defenses against cancer. One example of biologic therapy is imiquimod (Zyclara®, Aldara®). Imiquimod is a medication that’s applied to your skin as a cream.

Your blood and tumor may be tested for certain genes that could make you eligible for immunotherapy.

**Clinical trials**

Clinical trials are a type of research study. They can help us find
the best treatments for cancer. Clinical trials can also help find ways to manage cancer symptoms and side effects of treatment.

Ask your healthcare provider about clinical trials for vulvar cancer. You can also go to www.cancer.gov/clinicaltrials/education/what-is-a-clinical-trial for more information.

After Treatment for Vulvar Cancer

After you finish your treatment, your healthcare provider will give you a follow-up care plan. The plan explains what exams and tests you should have in the future and how often you should have them. Following the plan can help your healthcare provider notice recurrent vulvar cancer or new cancer.

After your treatment, you should look at the area around your vulva every month. Ask your nurse to show you how to use a mirror to do this. If you notice any changes or symptoms, call your healthcare provider. Don’t wait until your next follow-up appointment.

After you finish your treatment, try to:

- Get to and remain at a healthy weight.
- Eat a balanced diet. For more information about healthy eating after cancer treatment, read our resource Nutrition Basics for Cancer Survivors (www.mskcc.org/pe/nutrition_cancer_survivors).
- Exercise. This will help you build strength and energy.
- Stop smoking. If you’d like to quit smoking, you can make an appointment with Memorial Sloan Kettering (MSK)’s Tobacco Treatment Program by calling 212-610-0507.

**Emotional Support**

Having cancer can cause many emotions. Recovering from cancer treatments can take time. Please take advantage of our staff’s experience. They can help you at every step and can refer you to other professionals if needed. Let us know how you’re feeling and what we can do to help.

**Counseling center**

Coping with vulvar cancer can be difficult. You may want help dealing with its emotional impact on you and your family and friends. If you have questions or worries, or if you feel anxious or depressed, talk with the members of your healthcare team. They can also refer you to a counselor who can help you express, understand, and cope with your feelings.

**Support groups**

MSK offers support groups for people with cancer. Groups are a way for people with cancer to support each other. They can help you understand your feelings and experiences. Talk to your healthcare provider about support groups that are available to you.

**Sexual health**

You may have questions about sex. You can discuss them with
your healthcare provider, nurse or social worker. You can also speak with someone from MSK’s Female Sexual Medicine & Women’s Health Program. For more information or to make an appointment, call 646-888-5076.

Social work
A social worker can provide emotional support and suggest resources for financial aid, transportation, and home care.

Integrative medicine
MSK’s Integrative Medicine Service offers many therapies to complement (go along with) traditional medical care. They offer:

- Massage
- Acupuncture
- Hypnotherapy
- Meditation
- Visualization and other mind-body therapies
- Music therapy
- Nutritional counseling
- Classes in yoga, t’ai chi, and aerobics

For more information or to make an appointment, call 646-888-0800.

Resources

American Cancer Society (ACS)
www.cancer.org
800-227-2345
Offers a variety of information and services, including Hope
Lodge, a free place for patients and caregivers to stay during cancer treatment.

**CancerCare**

www.cancercare.org
800-813-4673
275 Seventh Avenue (Between 25th & 26th Streets)
New York, NY 10001
Provides counseling, support groups, educational workshops, publications, and financial assistance.

**National Cancer Institute**

www.cancer.gov
800-4-CANCER (800-422-6237)

**OncoLink**

www.oncolink.upenn.edu
Provides information about specific types of cancer, updates on cancer treatments, and news about research advances.

**The Wellness Community**

www.wellness-community.org
Provides professionally led support groups nationwide and education, stress management, and social networking in a home-like community setting with a focus on enhancing health and well-being.

**Society of Gynecologic Oncology**

www.sgo.org/patients-caregivers-survivors
The SGO’s mission is to support research, education and public
awareness of gynecologic cancer prevention, early diagnosis, and optimal treatment. This page offers information for people affected by gynecologic cancers and their caregivers.

If you have any questions, contact a member of your healthcare team directly. If you're a patient at MSK and you need to reach a provider after 5:00 PM, during the weekend, or on a holiday, call 212-639-2000.

For more resources, visit www.mskcc.org/pe to search our virtual library.

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