Desquamative Inflammatory Vaginitis

Desquamative Inflammatory Vaginitis (DIV) is an inflammatory skin condition of the vagina. It is called a vaginitis because of the strong inflammatory reaction of the vaginal skin but it is not a true infection caused by a specific organism like yeast. This reaction often leads to symptoms of pain, discharge, irritation and itching. Intercourse can become quite uncomfortable and some women report a scratchy, raw sensation. It is unclear what causes DIV but it is not contagious or hereditary. The inflammation can lead to a disruption of the bacterial ecosystem which also likely contributes to the symptoms.

Diagnosis of DIV is made on physical exam and microscopic analysis. On pelvic exam, some women may have signs of redness and inflammation at the vaginal opening. These same changes can be seen intravaginally when the speculum is placed. Petechiae or red blotches may be seen at the vaginal opening, vaginal walls and cervix. In addition, the discharge is often greater than usual and has a yellow-green hue. An abnormal vaginal pH (acid base balance) is almost always noted. On evaluation of the discharge under the microscope (wet mount), a great deal of inflammation (white cells) is seen along with a reduction or absence of lactobacillus, the “good” bacteria of the vagina.

Treatment includes the use of antibiotics and steroids. The antibiotics help to correct the bacterial ecosystem change and the steroids help to reduce the inflammation. For some it recurs frequently and seems chronic, and for others treatment provides a cure. Some vulvar experts believe that DIV may be a mild variant of a skin condition called Lichen planus. Symptoms may wax and wane. There is a strategy for treatment and another for preventive maintenance. It is not well understood if DIV spontaneously remits or if treatment will be necessary for a long period of time. Most women find relief with the use of medications.