



Vulvovaginitis in Prepubertal Children

This leaflet offers information about vulvovaginitis in prepubertal children. If you have any further questions or concerns, please speak to the staff member in charge of your child's care.

What is vulvovaginitis?

Vulvovaginitis is local irritation and inflammation affecting the delicate skin of the vagina and vulva. It is NOT an infection. It is common and usually affects children between two and seven years old, prior to the start of puberty.

What are the signs and symptoms?

Children usually experience vaginal soreness and can have vaginal discharge. The discharge can be white, green or yellow and can have an offensive odour. The vagina and vulva may appear red and your child may describe it as itchy. Additionally, she may find it painful when passing urine.

Do I need any tests to confirm the diagnosis?

There are no specific tests for vulvovaginitis. Your doctor may check your child's urine or do a skin swab to rule out any infection.

What treatments are available?

Vulvovaginitis does not require a specific medical treatment but will resolve and be prevented by several lifestyle changes.

What happens if I do not get treatment?

Even without management, the condition will usually go away as puberty begins. There are no long-term problems associated with vulvovaginitis. It will not cause problems with periods or fertility and there is no association with pelvic inflammatory disease or tubal damage.

Is there anything I can do to help my child?

Vulvovaginitis is managed by a few lifestyle changes:

- After bathing or showering, dab your child dry with a soft, clean towel; do not rub.
- Ensure your child is wiping her bottom correctly. She should be wiping front to back.
- Keep your child well hydrated.
- Encourage your child to go to the toilet regularly and not hold on.
- Avoid wet wipes as these can irritate the delicate skin.
- Avoid your child wearing underwear at night.
- Use cotton underwear and change if at all wet or soiled.
- Avoid tight fitting clothes.
- There is no concrete evidence for this, but it may help to avoid washing your child with soaps, shower gels and bubble baths.
 Instead use plain water to wash your child.

What to look out for and when to see your GP?

Constipation This can make the problem worse. Encourage a healthy fibrous diet, a good fluid intake and plenty of exercise. If constipation continues to be a problem, then speak to your doctor about medicines such as laxatives that can help with constipation.

Urinary Tract Infections If your child is complaining of pain when

passing urine or you notice that her urine has become smelly, your doctor may want to perform a simple urine test to check for infection. Vulvovaginitis can cause pain while passing urine but it is important to rule out other causes and if your child does have a urine infection then she will need antibiotics to treat it.

Thread worms If your child is complaining that she has an itchy bottom or appears to be itching her bottom a lot, especially at night, she may have threadworms and your pharmacist or your doctor can help with medication for this.

Discharge If your child has vaginal discharge, your doctor may want to take a swab from the outside of the vagina. This should not hurt and if the swab is positive for bacteria, then your child may need a course of antibiotics.

References

National Library of Medicine
www.ncbi.nim.nih.gov/pmc/articles/PMC6028267
Journal of Pediatric & Adolescent Gynecology
www.ipagonline.org/article/S1083-3188(15)00262-4/fulltext

Contact us

If you have any questions or concerns about vulvovaginitis in pre pubertal children, contact the paediatric medical secretaries on email children.secretariesC@stgeorges.nhs.uk or 020 8725 2931 (Monday to Friday 9am to 4.30pm.) If possible, please give the name of the doctor you saw. Out of hours, please leave a voice message.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available: Monday, Tuesday and Thursday between 10am and 4pm, Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays. Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 Email: pals@stgeorges.nhs.uk

NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health. Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones. **Tel**: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure everyone – including those with accessibility needs – can access our hospital and community sites with confidence.

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