

Itch, Scratch, Ad Infinitum, Part 2

Is the patient's chronic vulvar irritation, itching, and pain due to infection—or something else? Test your diagnostic skills here.

Match the diagnosis to the photo by letter

- a. Vulvar aphthae
- b. Contact dermatitis
- c. Inverse psoriasis
- d. Desquamative inflammatory vaginitis



1. A 25-year-old woman reports anogenital itching, burning, and redness, present for three months. She developed a “yeast infection” after antibiotic therapy for a dental infection. Treatment with terconazole resulted in immediate severe burning, redness, and swelling. Clobetasol cream also caused burning.



2. This 13-year-old presents with sudden-onset vulvar pain and sores. The child developed a sore throat and fever three days ago, with vulvar pain and vulvar dysuria the next day. Oral acyclovir was prescribed for herpes simplex virus infection, but the condition has not improved.

3. A 36-year-old woman reports introital itching, vulvar dysuria, and superficial dyspareunia that have lasted six months. Apparent on physical examination are redness of the vestibule, medial labia minora, and vaginal walls, with edema of the surrounding skin and yellowish, copious vaginal secretions at the introitus. Lab tests for chlamydia, trichomonas, and gonorrhea are returned as normal.



4. A 43-year-old woman reports a “recalcitrant yeast infection” of the vulva, with itching and irritation. She is overweight and diabetic, with mild stress incontinence. Physical examination reveals a fairly well-demarcated, red, rough plaque on the vulva and labiocrural folds, with satellite red papules and peripheral peeling.

All figures courtesy of Libby Edwards, MD. Itch, Scratch, Ad Infinitum, Part 1, appeared in *Clinician Reviews*. 2016;26(6):57. Answers to last month's “Picture This” (*Clinician Reviews*. 2016;26[8]:37): 1b, 2d, 3a, 4c

For answers, see the next issue; for discussion, go to www.clinicianreviews.com/articles/picture-this.html.