

Gynecology | Urology Tips

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Tips based on Urogynecologist, Rita Melkonian, MD, FACOG, Corte Madera CA presentation
at ACR 2016 Luncheon Program and Sjögren's Quarterly Article Vol 11(3) 2016.*

Sjögren's is an autoimmune inflammatory disease targeting exocrine glands, including the vestibular glands (vulva). Lymphocytic perivascular infiltration of predominately CD4+ T-helper cells can result in gland destruction and decrease in lubrication by glairy fluid. Vaginal dryness and itching, painful intercourse (dyspareunia) and frequent yeast infections contribute to decrease in QOL, including sexual dysfunction.

In addition to vaginal dryness (common), the following occur in Sjögren's:

- Lichen planus and Lichen sclerosis
- Vaginal yeast infections
- Cervical dysplasia and cancer, especially in the setting of HPV (human papillomavirus)
- Interstitial cystitis (~10%) | pelvic pain relieved by voiding; urgency, and frequency
- Endometriosis (4-fold increase) | pelvic pain around menses, excessive bleeding, back pain, painful urination
- Primary ovarian failure (20%) | premature menopause, infertility

Treatment Tips

- Topical estrogen products (vaginal cream, pill, ring) or systemic Hormone Replacement Therapy (HRT)
- Topical lubricants for dryness (see the Foundation Online Product Directory, available as a benefit to Foundation members, for a list of vaginal moisturizers.)
- PAP or visual inspection (if prior hysterectomy) every 1-2 years; | PAP yearly and colposcopy for high risk patients
- Lichen planus or sclerosis may warrant topical steroids
- Antifungals (topical or oral) for frequent or severe vaginal yeast infections
- Refer to Urogynecologist for interstitial cystitis and pelvic pain symptoms

For more information on Sjögren's, visit the Foundation website at www.sjogrens.org, call 301-530-4420, email info@sjogrens.org, or write to the Sjögren's Foundation, 10701 Parkridge Blvd, Ste 170, Reston, VA 20191