



Vulvar Cancer

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What Is Vulvar Cancer?

Vulvar cancer is a rare disease in which malignant (cancer) cells form in the tissues of the vulva. Vulvar cancer forms in a woman's external genitalia. The vulva includes:

- Inner and outer lips of the vagina
- Clitoris (sensitive tissue between the lips)
- Opening of the vagina and its glands
- Mons pubis (the rounded area in front of the pubic bones that becomes covered with hair at puberty)
- Perineum (the area between the vulva and the anus)

Vulvar cancer most often affects the outer vaginal lips. Less often, cancer affects the inner vaginal lips, clitoris, or vaginal glands. Vulvar cancer usually forms slowly over a number of years.

Abnormal cells can grow on the surface of the vulvar skin for a long time. This condition is called vulvar intraepithelial neoplasia (VIN). Because it is possible for VIN to become vulvar cancer, it is very important to get treatment. Having vulvar intraepithelial neoplasia or HPV infection can affect the risk of vulvar cancer.

What Are the Risk Factors for Vulvar Cancer?

Anything that increases the chance of getting a disease is called a risk factor. Having a risk factor does not mean that you will get cancer; not having risk factors doesn't mean that you will not get cancer. Risk factors for vulvar cancer include the following:

- Having vulvar intraepithelial neoplasia (VIN)
- Having human papillomavirus (HPV) infection
- Having a history of genital warts
- Smoking

Other possible risk factors include the following:

- Having many sexual partners
- Having first sexual intercourse at a young age
- Having a history of abnormal Pap tests (Pap smears)

What Are the Signs and Symptoms of Vulvar Cancer?

Vulvar cancer often does not cause early signs or symptoms. Signs and symptoms may be caused by vulvar cancer or by other conditions:

- A lump or growth on the vulva
- Changes in the vulvar skin, such as color changes or growths that look like a wart or ulcer
- Itching in the vulvar area, that does not go away
- Bleeding not related to menstruation (periods)
- Tenderness in the vulvar area

What tests are used to detect (find) and diagnose vulvar cancer?

The following tests and procedures may be used:

- **Physical exam and history**
- **Biopsy:** The removal of samples of cells or tissues from the vulva so they can be viewed under a microscope by a pathologist to check for signs of cancer.

What Determines Prognosis and How Vulvar Cancer Is Treated?

Certain factors affect prognosis (chance of recovery) and treatment options. The prognosis (chance of recovery) and treatment options depend on the following:

- The stage of the cancer
- The patient's age and general health

After vulvar cancer has been diagnosed, tests are done to find out if cancer cells have spread within the vulva or to other parts of the body.

The process used to find out if cancer has spread within the vulva or to other parts of the body is called staging. The information gathered from the staging process determines the stage of the disease. It is important to know the stage in order to plan treatment. The following tests and procedures may be used in the staging process:

- **Pelvic exam:** An exam of the vagina, cervix, uterus, fallopian tubes, ovaries, and rectum. A speculum is inserted into the vagina and the doctor or nurse looks at the vagina and cervix for signs of disease. A Pap test of the cervix is usually done. The doctor or nurse also inserts one or two lubricated, gloved fingers of one hand into the vagina and places the other hand over the lower abdomen to feel the size, shape, and position of the uterus and ovaries. The doctor or nurse also inserts a lubricated, gloved finger into the rectum to feel for lumps or abnormal areas.
- **CT scan (CAT scan):** A procedure that makes a series of detailed pictures of areas inside the body, taken from different angles. The pictures are made by a computer linked to an x-ray machine. A dye may be injected into a vein or swallowed to help the organs or tissues show up more clearly. This procedure is also called computed tomography, computerized tomography, or computerized axial tomography.

- **MRI (magnetic resonance imaging):** A procedure that uses a magnet, radio waves, and a computer to make a series of detailed pictures of areas inside the body. This procedure is also called nuclear magnetic resonance imaging (NMRI).
- **PET scan (positron emission tomography scan):**
A procedure to find malignant tumor cells in the body. A urine catheter may be inserted if needed. A small amount of radioactive glucose (sugar) is injected into a vein. The PET scanner rotates around the body and makes a picture of where glucose is being used in the body. Malignant tumor cells show up brighter in the picture because they are more active and take up more glucose than normal cells do.

How Does Vulvar Cancer Spread?

Cancer can spread through tissue, the lymph system, and the blood:

- **Tissue.** The cancer spreads from where it began by growing into nearby areas.
- **Lymph system.** The cancer spreads from where it began by getting into the lymph system. The cancer travels through the lymph vessels to other parts of the body.
- **Blood.** The cancer spreads from where it began by getting into the blood. The cancer travels through the blood vessels to other parts of the body.

When cancer spreads to another part of the body, it is called metastasis. The metastatic tumor is the same type of cancer as the primary tumor. For example, if vulvar cancer spreads to the lung, the cancer cells in the lung are actually vulvar cancer cells. The disease is metastatic vulvar cancer, not lung cancer.

What Are the Stages Used for Vulvar Cancer?

In vulvar intraepithelial neoplasia (VIN), abnormal cells are found on the surface of the vulvar skin. These abnormal cells are not cancer. Vulvar intraepithelial neoplasia (VIN) may become cancer and spread into nearby tissue. VIN is sometimes called **stage 0 or carcinoma in situ or pre-cancer**.

Vulvar cancer can be staged I (1) through IV (4), in stage I cancer is not deep and has not spread to the lymph nodes, Stage IV is the most advanced, cancer has spread to other organs.

Recurrent vulvar cancer is cancer that has recurred (come back) after it has been treated. The cancer may come back in the vulva or in other parts of the body

How Is Vulvar Cancer Treated?

Surgery

Surgery is the most common treatment for vulvar cancer. One of the following types of surgery may be done:

- **Wide local excision:** A surgical procedure to remove the cancer and some of the normal tissue around the cancer.
- **Radical local excision:** A surgical procedure to remove the cancer and a large amount of normal tissue around it. Nearby lymph nodes in the groin may also be removed.
- **Vulvectomy:** A surgical procedure to remove part or all of the vulva.
 - **Sentinel lymph node biopsy:** Sentinel lymph node biopsy may be done during surgery to remove the tumor for early-stage vulvar cancer. The sentinel lymph node is the first lymph node to receive lymphatic drainage from a tumor. It is the first lymph node the cancer is likely to spread to from the tumor. A radioactive substance and/

or blue dye is injected near the tumor. The substance or dye flows through the lymph ducts to the lymph nodes. The first lymph node to receive the substance or dye is removed. A pathologist views the tissue under a microscope to look for cancer cells. If cancer cells are not found, it may not be necessary to remove more lymph nodes.

- **Pelvic exenteration:** A surgical procedure to remove the lower colon, rectum, and bladder. The cervix, vagina, ovaries, and nearby lymph nodes are also removed. Artificial openings (stoma) are made for urine and stool to flow from the body into a collection bag.

After the doctor removes all the cancer that can be seen at the time of the surgery, some patients may be given chemotherapy or radiation therapy after surgery to kill any cancer cells that are left. Treatment given after the surgery, to lower the risk that the cancer will come back, is called adjuvant therapy.

Radiation Therapy

Radiation therapy is a cancer treatment that uses high-energy x-rays or other types of radiation to kill cancer cells or keep them from growing.

Chemotherapy

Chemotherapy is a cancer treatment that uses drugs to stop the growth of cancer cells, either by killing the cells or by stopping them from dividing. The way the chemotherapy is given depends on the type and stage of the cancer being treated.

Immunotherapy

Immunotherapy is a treatment that uses the patient's immune system to fight cancer. Substances are used to boost, direct, or restore the body's natural defenses against cancer. This type of cancer treatment is also called biotherapy.

Follow-Up Tests May Be Needed

Some of the tests that were done to diagnose the cancer or to find out the stage of the cancer may be repeated. It is extremely important to keep your follow-up appointments with your cancer provider. This will help show any early sign of cancer recurrence, and more testing can be ordered if needed.

Support is available for coping with changes that may have happened as a result of cancer treatment. Your healthcare team can offer ideas as well as a plan of care for long-term follow-up.

What Are Clinical Trials?

Clinical trials are done to find out if new cancer treatments are safe and effective or better than the standard treatment.

People who take part in a clinical trial may receive:

- The standard treatment alone or
- The standard treatment plus the new treatment being studied

Many of today's standard treatments for cancer are based on earlier clinical trials.

Ask if there is a clinical trial right for you.

Taking part in a clinical trial helps improve the way cancer will be treated in the future. Even when clinical trials do not lead to effective new treatments, they often answer important questions and help move research forward.

Some clinical trials only include people who have not yet received treatment. Other trials test treatments for those whose cancer has not gotten better. There are also clinical trials that test new ways to stop cancer from coming back or reduce the side effects of cancer treatment.

To Learn More About Vulvar Cancer

American Cancer Society

<https://www.cancer.org/>

National Cancer Institute

<https://www.cancer.gov/>

National Comprehensive Cancer Network Guidelines for Patients

<https://www.nccn.org/patients/guidelines/cancers.aspx>

MedlinePlus

<https://medlineplus.gov/>

Common Questions

What does the pathology report say?

What is the stage of my cancer?

What are my goals for treatment?

What are my treatment choices?

What kind of support services are available for me about finances, emotions, spiritual questions, etc.?

My Health Care Team	Contact Information
Surgeon:	
Medical Oncologist:	
Radiation Oncologist:	
Primary Care Doctor:	
Navigator:	
Nurse:	
Registered Dietitian Nutritionist:	
Other:	
Other:	

Adapted with permission from PDQ Vulvar Cancer Treatment. Bethesda, MD: National Cancer Institute.

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