

Vaginal Tearing



Here we explain what causes vaginal tears, their symptoms, how they are treated, and when you should seek help from your doctor.

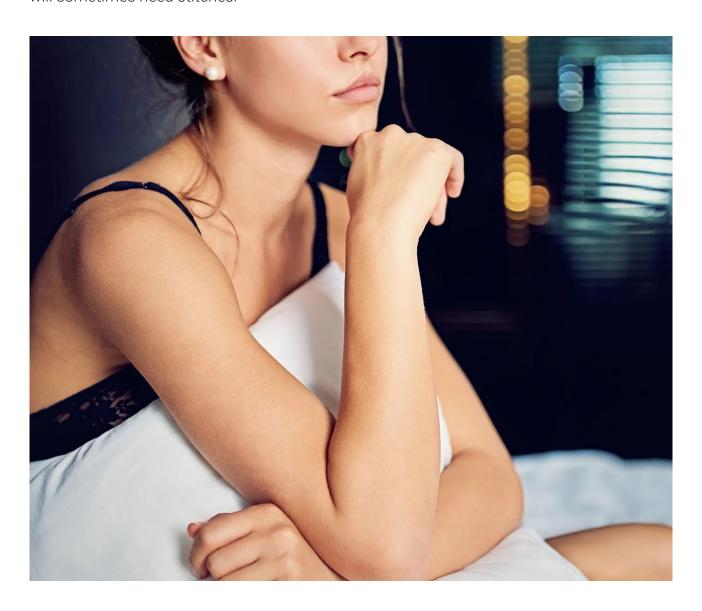
What are vaginal tears?

Vaginal tears or cuts are injuries to the vaginal tissues and are surprisingly common. They usually affect the vagina or the labia (vulva), the external genitals. These smaller vaginal cuts are quite common affecting the delicate skin and tissue around the vaginal area, but a superficial cut or tear usually heals very quickly without intervention or leaving scars.

The skin around your vagina, vaginal walls and inside your labia is sensitive and if you're having sex or doing anything down there without sufficient lubrication the skin cannot move against friction and instead will be pulled until it tears.

Understanding why the cut occurred in the first place is often the key to effective treatment and preventing recurrence.

More serious vaginal tears, however, can occur after vaginal delivery during childbirth and will sometimes need stitches.



Superficial labial grazes and tears

If you are experiencing any of the following; mild pain or stinging when urinating, pain when inserting a tampon or during sexual intercourse, some light bleeding or spotting, itching, or burning, then it's likely you have a tear.

Grazes or tears to the labia (vulva) can often be left to heal naturally, depending on their size, position and if they are bleeding. They might be visible to the naked eye but the smaller injuries to vaginal tissue will be harder to see.

To reduce the risk of vulval or vaginal tears, particularly after sex, avoid dryness and ensure the area is lubricated.

Other contributory factors include menopause when vaginal walls can become dryer, and conditions like lichen sclerosis, severe yeast infections and courses of medicine, like steroid treatment.



Perineal tears as a result of childbirth

Different types of cuts can occur during childbirth.

The perineum is the area between the vaginal opening and back passage (anus). It is common for the perineum to tear to some extent during childbirth.

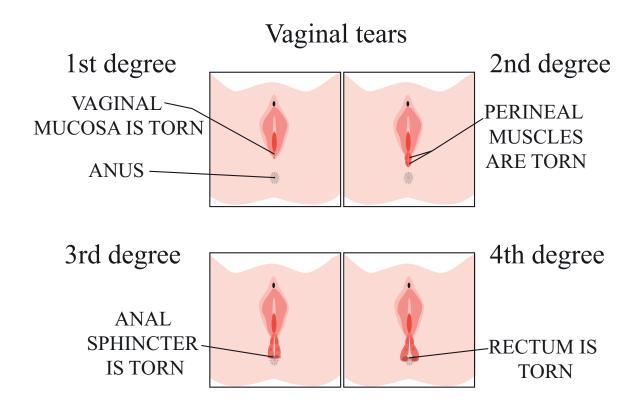
Up to 9 in every 10 first-time mothers who have a vaginal birth will experience some sort of tear, graze or episiotomy. For most women, these tears are minor and heal quickly.

Episiotomy

An episiotomy is when a cut is made into the perineum and vaginal wall to make more space for a baby to be born and is always done with a woman's consent.

They are only done when there is a risk to the baby and it needs to be born quickly, often during an instrumental (forceps or vacuum-assisted) birth, or if a woman is at risk of a serious perineal tear.

It is slightly less common for mothers who have had a vaginal birth before.



Types of perineal tear

First-degree tears are small and superficial affecting only the skin which usually heals quickly and without treatment.

Second-degree tears affect the muscle of the perineum and the skin. These usually require stitches.

Third and fourth-degree tears are less common but for a small number of women, the tear may be deeper. Also known as obstetric anal sphincter injuries (OASI), they extend into the muscle that controls the anus (anal sphincter). These deeper tears need surgical repair and women who experience them will usually have surgery after childbirth.

Seeking treatment

If your vaginal cuts are caused by underlying conditions, or if they are recurring or get infected, you should seek advice from your doctor.

They will need to perform a physical examination and take your medical history to understand your symptoms, as well as any other medical conditions or other factors that could be the reason for the injury. They will also ask if the symptoms are new or recurring to find out if you have a history of vaginal cuts.

In many cases self-care; like avoiding sex when the tear is healing, avoiding harsh chemicals in soaps, using tampons and keeping the area clean and dry will be enough to heal the tears.



Why choose the Lancashire Gynaecologist?

Mr Eric Mutema is a highly experienced and respected Consultant Obstetrician and Gynaecologist. His private practice, The Lancashire Gynaecologist, provides the latest and most effective treatments available now to help women experiencing a wide range of issues.

Mr Mutema's specialist training was in urogynaecology and he has wide-ranging experience in vaginal surgery and the treatment of obstetric anal sphincter injuries.

We offer individual attention and an empathetic, compassionate approach that puts the needs of patients firstfirst. They will receive a full consultation that takes their overall health into account, and subsequent treatments will be tailored to meet individual needs.

Many vulval/vaginal tears are common and will clear up on their own without specific treatment but if you are concerned then please get in touch. It's what we are here for. Do not underestimate how troublesome they can, so if simple measures aren't working for you, let us help.



For more information, contact

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