

## **EDUCATIONAL RESOURCES ON VULVAL DISEASE TO SATISFY THE CORE CURRICULUM FOR OBSTETRICS AND GYNAECOLOGY TRAINEES (ST3-5)**

This page provides guidance on the provision of a half-day teaching session on vulval disease for core trainees in gynaecology. The half-day was developed by members from the RCOG and the British Society for the Study of Vulval Diseases (BSSVD). Prior to the session, trainees are expected to have completed the benign vulval diseases module and assessment from the RCOG STRATOG web based educational training package. Guest lecturers are also advised to review this package. Much of the core curriculum is discussed in this resource and the half day should be used to consolidate understanding. Ideally the session should be multidisciplinary involving colleagues from dermatology and/or genito-urinary medicine. Lecturers should ideally be part of a vulval service. **The level of understanding for trainees should be directed at the core curriculum and detail into rare and uncommon conditions is best avoided as these conditions are managed by a vulval service and not a 'general' gynaecologist.** Assessment, diagnosis, counselling of patients, starting basic treatments and referral of difficult cases to a vulval service are the key themes of the half day.

### **PROGRAMME FOR THE DAY**

There are three sessions to be covered over a three hour period with a 20 minute break. A suggested programme is

9.30 – 10.20	Lecture one
10.20 – 11.10	Lecture two
11.10 – 11.30	Coffee break
11.30 – 12.30	Case discussion

### **TOPICS TO COVER**

This is a suggested breakdown of the core topics to be covered over two lectures

#### **1. ASSESSMENT OF THE PATIENT WITH A VULVAL PROBLEM**

- Vulval history (timescales, previous treatments/investigations, incontinence, impact on sexual function, concerns)
- Vulval examination (including clinical description of lesions e.g. erosion, ulceration, ecchymosis)
- Vulval biopsy (incisional or excisional, site)

#### **2. TREATMENT PRINCIPLES**

- Patient counselling – especially for complex cases
- Basic skin care – importance of emollients (consider demonstration of different emollients), problems of irritancy, allergenicity.
- Prescribing topical steroids – reassurance, application, compliance, packaging issues
- Use of vaginal trainers
- Direction to patient support groups

#### **3. THE MULTIDISCIPLINARY TEAM**

- Members (vulval clinic, dermatology, GUM, physiotherapy, pain management, psychosexual therapy, pathology, urogynaecology)
- Roles and responsibilities
- When to refer

#### **4. MANAGING SPECIFIC CONDITIONS**

Discussion on clinical presentation, aetiology, pathology, investigation and treatment of

- Lichen sclerosus
- Lichen planus
- Vulval eczema (dermatitis)
- Vulvovaginal candidiasis
- Vulvodynia
- VIN

For each condition discuss complications and when to refer on (if time - Bartholin's cyst/abscess and vulval abscess, Non-neoplastic cysts)

It is suggested that numbers 1,2 and 3 can be presented in one lecture and 4 in the second lecture, but this can be decided between lecturers prior to the session. A framework for the lectures provided here (link to the Powerpoint presentation below)

#### **CLINICAL CASES AND DISCUSSION**

Clinical cases can be used during the session to consolidate information gained from STRATOG and lectures. Examples are given in the linked document and the full cases are available on request to clinical trainers. Lecturers are welcome to provide their own cases and images. A suggested method of delivery is to form small groups of up to six people and allocate a case to each group. Each group member gets a sheet outlining the cases and questions, which they can write on. If appropriate the group reviews a printed copy of the clinical pictures. The cases are quite short so ten minutes for case preparation is adequate. The convenor then shows the case questions and picture to the whole group and allows each group to present their case and answers. Finally the convenor reveals the answers to the group and covers any missing points. It should take one hour to cover 5 cases with 6 trainees per group (30 trainees in total) with 10 minutes to initially discuss the case. Counselling/role playing sessions or a picture quiz have not been evaluated before but could be considered.

For further information please contact David Nunns Education and Training Group Chair, BSSVD on [david.nunns@nuh.nhs.uk](mailto:david.nunns@nuh.nhs.uk)

#### **EVALUATION OF HALF DAY**

An evaluation from the ST3-5 Regional Teaching in Blackpool was carried out on the 28 November 2012. Dr Haslett Consultant Obstetrician and Gynaecologist, Blackpool was the convener. David Nunns (Consultant Gynaecologist) and Caroline Owen (Consultant Dermatologist) were the lecturers. Andrew Watson TPD North West was the observer. There were 41 trainees for the afternoon session on vulval disease.

Venue 7.3/10

Assessment of vulval disorders 8.1/10 (CO)

Managing specific condition/MDT 7.2/10 (DN)

Vulval cases 7.2/10 (CO/DN)

Overall value of day 7.6/10.