

Vulvar Intraepithelial Neoplasia (VIN)

What is VIN?

Vulvar intraepithelial neoplasia (VIN) is a skin disorder caused by abnormal cells in the skin of the vulva. VIN is not cancer, but it may slowly develop into cancer if not treated. It is considered a “precancer” condition.

VIN is divided into two subtypes:

Usual Type VIN is caused by persistent infection with high-risk human papillomavirus (HPV)

Differentiated type is mostly associated with chronic vulvar skin conditions.

Previously VIN was categorized as VIN 1, 2, and 3. There is no evidence that what had been named VIN 1 is a precancer or requires any treatment unless it is causing symptoms. VIN 2 and 3 are now included under the term Usual Type VIN.

Who gets VIN?

Risk factors for usual type VIN are HPV infection, cigarette smoking, or a compromised immune system. Differentiated type VIN is associated with vulvar skin conditions.

What does VIN look like?

Most women present with a vulvar skin lesion. Multiple lesions are present in 5% of cases. Therefore, all the surfaces of the vulva, perianal skin, vagina, and cervix should be evaluated. VIN lesions can be red, white, flesh coloured, pigmented, flat or raised.

What are the symptoms?

Most women complain of itching. Bleeding, discharge, and pain with urinating may also be encountered.

How is VIN diagnosed?

The diagnosis may be made by visual inspection. A skin biopsy will confirm the diagnosis.

How is VIN treated?

VIN is usually treated. There are a few ways depending on the size, number and location of lesions. These include removing the lesion, laser, or a topical medication called imiquimod.

Follow-up

Recurrence of VIN after treatment is common. About 1/3 of women will develop a recurrence regardless of the type of treatment that they had. VIN may also develop in different areas of the vulvar skin. It is important to keep regular follow up appointments and stay up to date with your pap smears. If you have concern regarding a new lesion that arises in between your follow up appointments, you should call your doctor and ask to be seen sooner for evaluation.

What else can I do?

If you smoke, quit smoking. Talk to your doctor about the HPV vaccine. Attend to your follow up visits.