

Laser therapy gains credibility as effective option for treating vaginal problems

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Nearly 50% of menopausal women complain of vaginal dryness, itching, and burning, among other commonly reported menopause symptoms. Laser therapy is one of the newer techniques for addressing these problems. A new study suggests that it is as effective and safe as vaginal estrogen in improving sexual and urinary functionality. Results are published online today in *Menopause*, the journal of The North American Menopause Society (NAMS).

As a result of declining estrogen levels during menopause, women may experience a variety of genital and urinary problems such as [vaginal dryness](#), reduced elasticity, vaginal burning, discharge, and itching, collectively known as the genitourinary syndrome of menopause (GSM). Such symptoms are the result of the vagina decreasing in caliber and the constriction of the vaginal opening.

The first line of defense in addressing these symptoms, assuming they are mild, is often prescribing vaginal lubricants or moisturizers. Women with more severe symptoms may be prescribed vaginal estrogen, which has proven highly effective and safe. A drawback of vaginal estrogen therapy, however, is that women don't always follow through with it. Studies have shown that compliance rates vary from only 50% to 74%. In addition, there is a lack of long-term efficacy data, especially in high-risk women, such as those with breast or [uterine cancer](#).

More recently, fractional CO2 [laser therapy](#) has been suggested as a viable treatment option. Lasers have already been effectively used on other parts of the body to remodel tissue and produce new collagen and elastic fibers. Their use for treatment of vaginal symptoms related to menopause is still somewhat new, with most studies reporting results just 12 weeks after the procedure. This latest study is the first to compare the safety and effectiveness of laser therapy with

vaginal estrogen after 6 months of follow-up.

At 6 months, researchers found that laser therapy and vaginal estrogen resulted in similar improvements in GSM symptoms, as well as urinary and sexual function. They reported that 70% to 80% of study participants were satisfied or very satisfied with either treatment option, with no serious adverse effects.

Findings were published in the article "A randomized clinical trial comparing vaginal laser therapy to vaginal estrogen therapy in women with genitourinary syndrome of menopause: The VeLVET Trial."

"Although vaginal laser therapy for treatment of the genitourinary syndrome of [menopause](#) is promising, data are still lacking regarding long-term safety and efficacy using well-designed placebo-controlled studies," says Dr. Stephanie Faubion, NAMS medical director.

Provided by The North American Menopause Society

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