

Long-term reliability of fractionated CO₂ laser as a treatment for vulvovaginal atrophy (VVA) symptoms

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Abstract

Purpose

The aim of this study was to evaluate long-term effects of the fractional CO₂ laser for the treatment of vulvovaginal atrophy (VVA) symptoms.

Methods

Women presenting with VVA symptoms and meeting inclusion criterion were enrolled to fractionated CO₂ laser therapy. Patient's satisfaction was measured on five-point Likert scale at 4 weeks and 6, 12, 18, 24 months after treatment by interview and clinical examination for vaginal livability.

Results

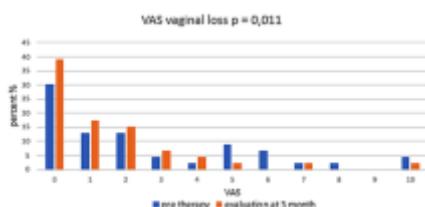
184 patients constituted the final study group: 128 women were spontaneous menopause and 56 were oncological menopause. 117 women were nulliparous and 36 had previous hysterectomy. 95.4% (172/184) of the patients declared that they were satisfied or very satisfied with the procedure at 4 weeks after treatment. At 6 months 92% (170/184) patients were satisfied; at 12 months 72% (118/162) were satisfied; at 18 months 63% (60/94) were satisfied; at 24 months 25% (4/16) of patients answered they were still satisfied. We observed a decline in patient's satisfaction between 18 and 24 months after laser therapy. Data showed that the time interval from onset of menopause was a statistically significant factor ($p < 0.05$) for treatment satisfaction in oncological group.

Conclusion

Long-term data showed that the improvement of vaginal health may continue up to 24 months after fractional CO₂ laser treatment although between 18 and 24 months benefits decline, and approximately 80% of women decide to start a new treatment cycle of laser applications.

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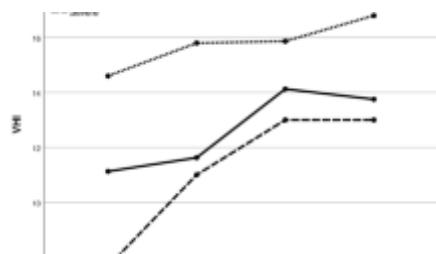
[Evaluation of the efficacy of fractional CO₂ laser in the treatment of vulvar and vaginal menopausal symptoms](#)

Article 11 November 2020



Fractional CO₂ laser for vulvovaginal atrophy (VVA) dyspareunia relief in breast cancer survivors

Article 12 May 2016



Safety and efficacy of non-ablative CO₂ laser treatment of vulvo-vaginal atrophy in women with history of breast cancer

Article 23 January 2024

Change history

- [27 September 2017](#)

[In original publication, the Fig. 1 was incorrect. The correct figure has been given below.](#)

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Contributions

Protocol/project development: AP, MGF. Data collection or management: SC, ML, AB. Data analysis: CB, NA, AP. Manuscript writing/editing: AP, CB. Administrative technical support/supervision: FP, GC.

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Ethics declarations

Conflict of interest

The authors declare that they have no conflict of interest.

Ethical approval

All procedures performed in studies involving human participants were in accordance with the ethical standards of the institutional and/or national research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards.

Informed consent

Informed consent was obtained from all individual participants included in the study. The ethical approval and the informed consent have been specified above in the manuscript text.

Additional information

An erratum to this article is available at <https://doi.org/10.1007/s00404-017-4538-y>.

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Keywords

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- Spontaneous menopause
- Follow-up