



How Does Vulvodynia Impact the Vaginal Microbiome?

Vulvodynia is defined as chronic pain or discomfort localized to the vulvar region, persisting for at least three months, without an identifiable underlying etiology. Symptoms may include sensations of burning, stinging, itching, irritation, stabbing pain, and/or a feeling of rawness.



Present in
over 8%
of Women

8% Lifetime Prevalence
remains relatively stable
across all age groups up to
70 years of age¹



Affects more than
200,000 Women in
the US per year

Provoked vestibulodynia (PVD) is
considered the most common cause of
dyspareunia in women under 30 years
of age and typically presents in women
between the ages of 20 and 40¹



The annual estimated
economic burden of
vulvodynia in the US is
\$31–\$72 billion¹

Contributing Factors in Vulvodynia



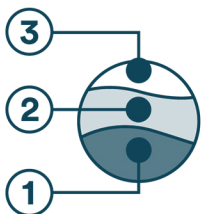
Women who wore tight-fitting jeans
or pants four or more times per
week had twice the increased risk of
developing vulvodynia²



Women who removed hair
from the mons pubis showed
a 74% increased likelihood of
developing vulvodynia²



70% of patients with vulvodynia reported prior yeast infections that recurred
four or more times or did not resolve despite several months of treatment³



Bio- Match®

Powered by patented Bio-Match® technology, our products are scientifically formulated to match the natural characteristics of healthy vaginal fluid—optimal pH, iso-osmolality, and a proprietary lactic acid blend. This biomimetic approach protects vaginal tissue, supports a Lactobacillus-dominant microbiome, and helps reduce disruptive symptoms like dryness, irritation, and imbalances. For women experiencing symptoms of vulvodynia, Bio-Match® products offer gentle, science-backed relief that soothes discomfort and restores balance to the vaginal environment. Unlike hyper-osmolar products that can damage tissue and the microbiome, Bio-Match® alleviates symptoms while helping maintain the natural integrity of vaginal health.

To request samples or begin offering Bio-Match® products to your patients, visit theivh.org.

¹Sadownik LA. Etiology, diagnosis, and clinical management of vulvodynia. Int J Womens Health. 2014;6:437–449. doi:10.2147/IJWH.S37673

²Klann AM, Rosenberg J, Wang T, Parker SE, Harlow BL. Exploring hygienic behaviors and vulvodynia. J Low Genit Tract Dis. 2019;23(3):220–225. doi:10.1097/LGT.0000000000000477

³Falsetta ML, Foster DC, Bonham AD, Phipps RP. A review of the available clinical therapies for vulvodynia management and new data implicating proinflammatory mediators in pain elicitation. BJOG. 2017;124(2):210–218.