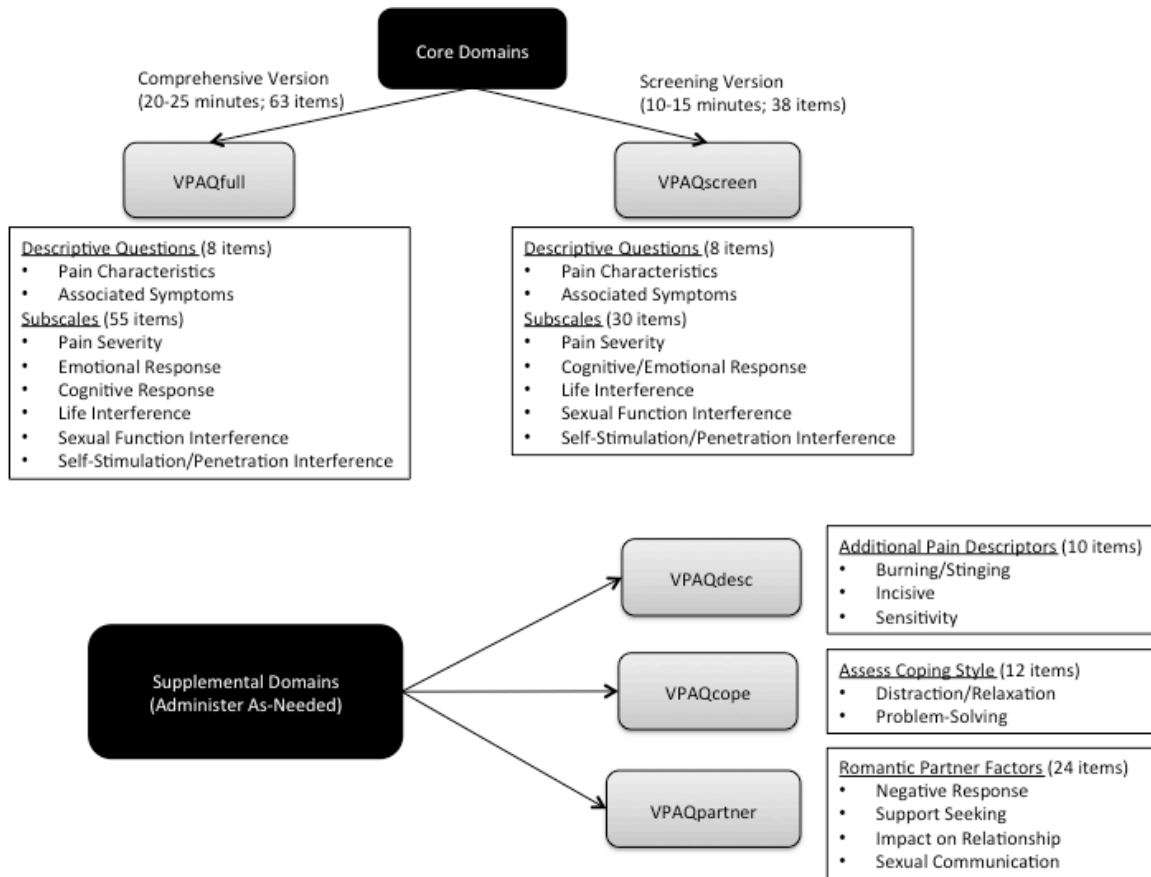


**The Vulvar Pain Assessment Questionnaire (VPAQ) Inventory**  
**(Dargie, Holden, & Pukall; accepted, minor revisions)**

The Vulvar Pain Assessment Questionnaire Inventory is a disease-specific set of measurement scales designed to capture the biopsychosocial nature of vulvodynia. Specifically, these scales were designed to assess: pain quality, the temporal nature of the pain, associated symptoms, pain intensity, emotional/cognitive functioning, physical functioning, coping strategies, and interpersonal functioning.

The questions that comprise the VPAQ inventory are divided into two categories: **core** questions that are central to the assessment and diagnosis of vulvar pain, and **supplemental** questions that provide additional information for diagnosis and treatment formulation.



## **Core Domains**

The core domains of the VPAQ are available in two formats: a **comprehensive (full) version** consisting of 63 items, and an abbreviated **screening version** consisting of 38 items. We recommend administering the comprehensive version when possible, though the screening version can be utilized to capture similar information when time is limited, or as a follow-up while treatment progresses.

**Full Version (VPAQfull).** The full version of the questionnaire consists of 8 questions assessing the onset, location, temporal pattern, degree of burning pain, and associated symptoms (e.g., itching) of vulvar pain, along with six subscales. These subscales are composed of 55 items rated on 5-point scales with anchors tailored to the nature of the questions being asked:

1. Pain severity (intensity, unpleasantness, distress)
2. Emotional response
3. Cognitive response
4. Life interference
5. Sexual function interference
6. Self-stimulation/penetration interference

**Screening (VPAQscreen).** This shorter version begins with the same 8 questions as the VPAQfull, assessing onset, location, temporal pattern, degree of burning pain, and associated symptoms (e.g., itching), along with five subscales. These subscales are composed of 30 items rated on a 5-point scales with anchors tailored to the nature of the questions being asked. They address the same information as the VPAQfull, though the cognitive and emotional response items are combined:

1. Pain severity (intensity, unpleasantness, distress)
2. Cognitive/emotional response
3. Life interference
4. Sexual function interference
5. Self-stimulation/penetration interference

## **Supplemental Domains**

The following scales can be administered in addition to the core domains listed above, depending on the needs of the patient and provider.

**Pain Descriptors (VPAQdesc).** This pain descriptor scale contains the most common words used to describe chronic vulvar pain. It is particularly advised to administer this scale if the patient does not describe the pain as “burning”, as captured by the questions in the core domains, or if the provider is interested in more broad descriptors for follow-up, for example. These 10 items, rated on a scale from 0 (Not at All) to 4 (Very Much), allow participants to indicate the degree to which each descriptor applies to their pain. Three subscales make up the VPAQdesc:

1. Burning/stinging pain
2. Incisive pain
3. Sensitivity

**Coping Strategies (VPAQcope).** This scale addresses some common coping strategies that are utilized by women with vulvar pain. It consists of 12 items rated on a scale from 0 (Never) to 4 (Always), allowing participants to indicate the frequency with which they utilize such strategies. Items are grouped into two categories:

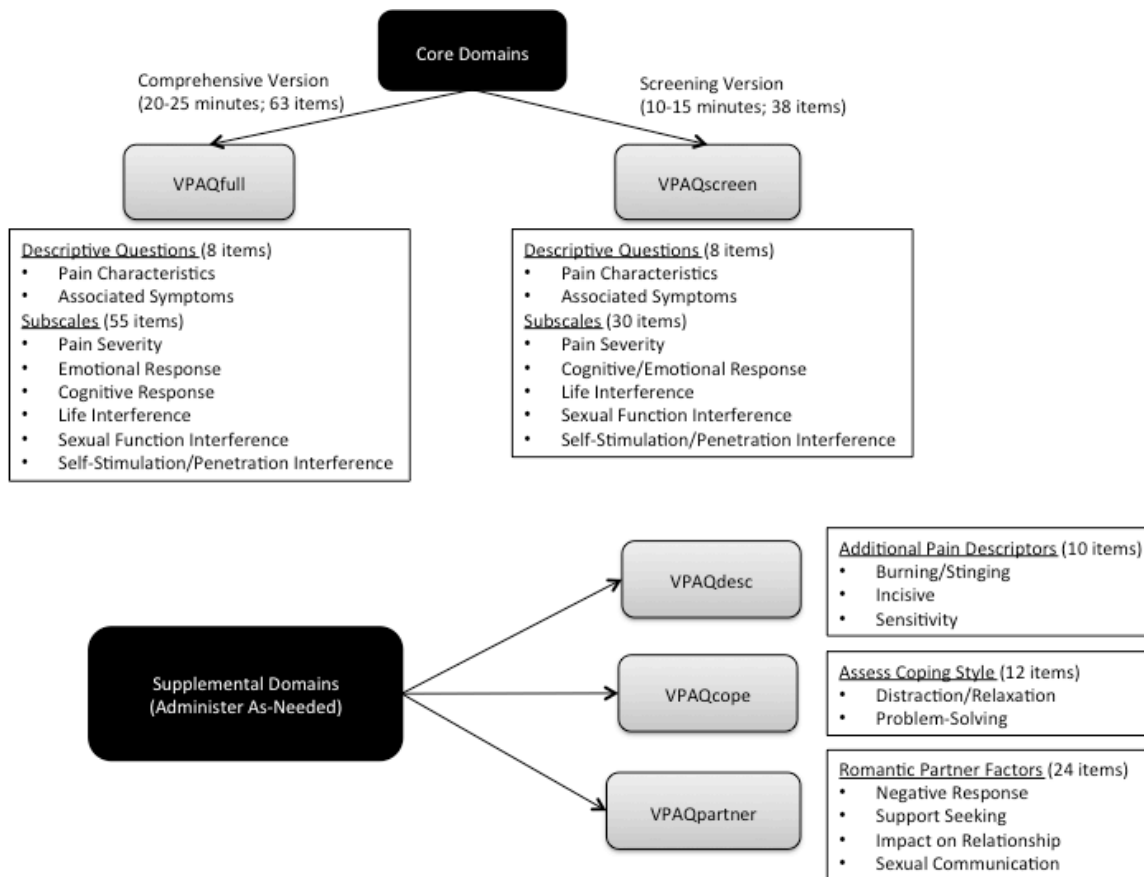
1. Distraction/relaxation strategies
2. Problem-solving strategies

**Partner Factors (VPAQpartner).** This 24-item scale encompasses how romantic partners/spouses may be impacted by/respond to vulvar pain experienced by one partner. Each question is rated on a 5-point scale with anchors tailored to the nature of the questions. Four subscales can be calculated:

1. Negative response
2. Support seeking
3. Impact on relationship
4. Sexual communication

**The Vulvar Pain Assessment Questionnaire (VPAQ)Inventory:**  
**COMPREHENSIVE (FULL) VERSION**

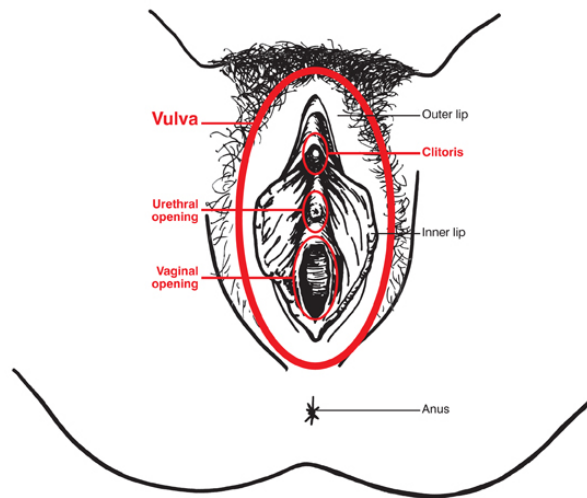
This set of empirically derived scales was designed to help capture biopsychosocial factors that characterize, contribute to, and are impacted by the experience of chronic vulvar pain. From the list below, you may choose what combination of scales/subscales will best meet your goals. Instructions for scoring accompany each subscale. This document contains the **comprehensive (full) version** that captures the core domains, along with each scale addressing the supplementary domains.



**VPAQfull**

Descriptive Questions

1. Please reference the diagram below. Where do you experience chronic vulvar/genital pain? Select all that apply.
  - Clitoris
  - Urethral Opening
  - Vulva
  - Vaginal Opening/Vestibule



2. Do you experience vulvar skin symptoms such as:

	Yes	No
Itching		
Fissures/splits/tears		
Dryness		

3. If you have looked at your vulva, have you noted that the appearance has changed?
  - Yes
  - No
  - I have not looked to note any changes
  
4. If you have vaginal discharge, do you believe that it contributes to your pain problem?
  - Yes
  - Maybe
  - No
  - No discharge

## VPAQfull + supplemental scales

5. How long ago did your vulvar pain develop?
  - < 6 months ago
  - 7 months – 2 years
  - 3-5 years
  - 6-10 years
  - 10+ years
  
6. When do you experience your pain?
  - Any time throughout the day
  - During non-sexual contact with your vulva
  - During sexual activity involving contact with your vulva
  - Other: \_\_\_\_\_
  
7. Please choose the option that best describes when your pain begins or worsens during vulvar contact/penetration.
  - When any contact is made with the vulva
  - When the finger/object/penis starts to enter the vagina
  - When the finger/object/penis has fully entered and is thrusting
  - When a male partner ejaculates in the vagina without wearing a condom
  - Only after penetration has ended
  - When the finger/object/penis is removed
  - My pain level does not change during vulvar contact/penetration
  
8. How well does the word BURNING describe how your vulvar pain typically feels?
  - Not at all
  - A little
  - Somewhat
  - Mostly
  - Very much

**Subscales****Pain Severity**

Please rate the following about your vulvar pain (in a typical month)

	None	Mild	Moderate	Severe	Worst Possible
<b>Intensity: how strong the pain sensation is</b>					
9. Average pain intensity					
10. Worst pain intensity					
<b>Unpleasantness: how much the pain bothers you</b>					
11. Average pain unpleasantness					
12. Worst pain unpleasantness					
<b>Distress: how upset the pain makes you feel</b>					
13. Worst distress about pain					
14. Average distress about pain					

**Emotional Response**In the past 6 months, how much do you experience **feeling** the following related to your vulvar pain?

	Not at all	A Little	Somewhat	A Lot	Very Much
15. Sad					
16. Unable to make changes in my life					
17. Bad about myself because of the pain					
18. Emotionally exhausted because of the pain					
19. Anger towards my pain					
20. Depressed					
21. That the pain will never stop					
22. Like my body has let me down					
23. Physically tense					
24. Like giving up					
25. That I am not a worthwhile person					
26. Distracted					
27. Hateful things about myself as a person					
28. Stressed about the pain					
29. That it is unfair that I have pain					

VPAQfull + supplemental scales

**Cognitive Response**

In the past 6 months, how much do you experience **thinking/worrying** about the following related to your vulvar pain?

	Not at all	A Little	Somewhat	A Lot	Very Much
30. That people might think I'm a bad sexual partner					
31. That my partner(s) might think I'm frigid (i.e., sexually unresponsive)					
32. That my partner(s) will leave me					
33. That people (would) think less of me because of my pain					
34. That other people are better sexual partners than me					
35. That I am a bad sexual partner					
36. That I will not be able to find [a] future partner(s)					
37. That my pelvic muscles will be too tight					

**Life Interference**

How much does your vulvar pain negatively interfere with the following?

	Not at all	A Little	Somewhat	A Lot	Very Much	I avoid because of pain
38. Sitting						
39. Walking						
40. Wearing tight-fitting clothing						
41. Taking part in recreational activities						
42. Ability to work						
43. Going out with friends						
44. Fulfilling responsibilities to your family						
45. Ability to perform tasks at work						
46. Activities involving direct or indirect pressure (e.g., bike riding)						
47. Using sanitary pads						
48. Ability to fall asleep						



**Sexual Function Interference**

How much does your vulvar pain negatively interfere with the following?

	Not at all	A Little	Somewhat	A Lot	Very Much	I avoid because of pain
49. My response to sexual advances made by my partner						
50. Desire for sexual activity						
51. Feeling sexual pleasure						
52. Orgasm frequency						
53. Taking part in non-penetrative sexual activity						
54. Taking part in penetrative sexual activity						
55. Worrying about sexual satisfaction no longer being possible						
56. Worrying that any sensation in your genitals will lead to pain						
57. Taking off your clothes around your partner						
58. Worrying about the next time your partner(s) will want sexual activity						

**Self-Stimulation/Penetration Interference**

How often do the following situations/activities cause vulvar pain?

	Never	Rarely	Sometimes	Often	Always	I avoid because of pain
59. Using tampons						
60. Solitary sexual stimulation of my vulva (i.e., masturbation)						
61. Masturbation when partner is present						
62. Self penetration with fingers (partner absent)						
63. Self penetration with sex toy (partner absent)						

\*\* "N/A" option available for all Subscales but Pain Severity, and is coded as 0

\*\* "I avoid because of pain" is coded as 4

\*\* All other scaled responses range from 0-4

\*\* Mean scores are computed for each subscale

\*\* *Note:* the Cognitive and Emotional questions can be combined to create an overall Psychological Distress subscale

**Supplemental Domains****Pain Descriptors (VPAQdesc)**

When you experience vulvar pain, how well do the following words describe how your pain typically feels?

	Not at all	A Little	Somewhat	A Lot	Very Much
1. Burning					
2. Stinging					
3. Sharp					
4. Stabbing					
5. Aching					
6. Irritating					
7. Raw					
8. Sensitive					
9. Tender					
10. Sore					

\*\*Burning Pain subscale: compute mean of items 1 & 2

\*\*Incisive Pain subscale: compute mean of items 3 & 4

\*\*Sensitivity subscale: compute mean of items 5-10

**Coping Strategies (VPAQcope)**

To cope with my vulvar pain, I:

	Never	Rarely	Sometimes	Often	Always
1. Relax my body					
2. Breathe deeply					
3. Go to my "happy place"					
4. Practice yoga/stretching					
5. Do something that takes my mind off the pain					
6. Focus on staying optimistic					
7. Visit my doctor(s)					
8. Look for information on my pain					
9. Use prescription medication					
10. Talk to people in my social network					
11. Talk to others with similar pain					
12. Avoid anything that might cause pain					

\*\*Distraction/Relaxation Strategies subscale: compute mean of items 1-6

\*\*Problem-Solving Strategies subscale: compute mean of items 7-12

**Partner Factors (VPAQpartner)**

	Never	Rarely	Sometimes	Often	Always
<i>How does your romantic partner/spouse respond to your vulvar pain?</i>					
1. Asks what s/he can do					
2. Wants to talk about it					
3. Tries to acknowledge my pain					
4. Gets angry					
5. Blames me					
6. Appears frustrated					
7. Is visibly upset					
8. Looks sad					

<i>How do you interact with your romantic partner/spouse when you are in pain?</i>					
9. Seek emotional support					
10. Seek physical comfort					
11. Share your feelings					
12. Problem solve					

	Much Worse	Somewhat Worse	No Change	Somewhat Better	Much Better
<i>How has your vulvar pain impacted the following in your romantic relationship?</i>					
13. Physical intimacy					
14. Emotional intimacy					
15. Sexual intimacy					
16. Relationship quality					
17. General communication					
18. Sexual communication					

	Largely Uncomfortable	Somewhat Uncomfortable	Neither Comfortable or Uncomfortable	Somewhat Comfortable	Largely Comfortable
<i>How comfortable do you feel communicating (verbally or non-verbally) with your romantic partner/spouse about the following when experiencing vulvar pain?</i>					
19. Sexual desire					
20. Frequency of activity					
21. Amount of "foreplay"					
22. Duration of activity					
23. Sexual position					
24. Technique					

\*\*Negative Partner Response subscale: mean of items 4, 5, 6, 7, & 8

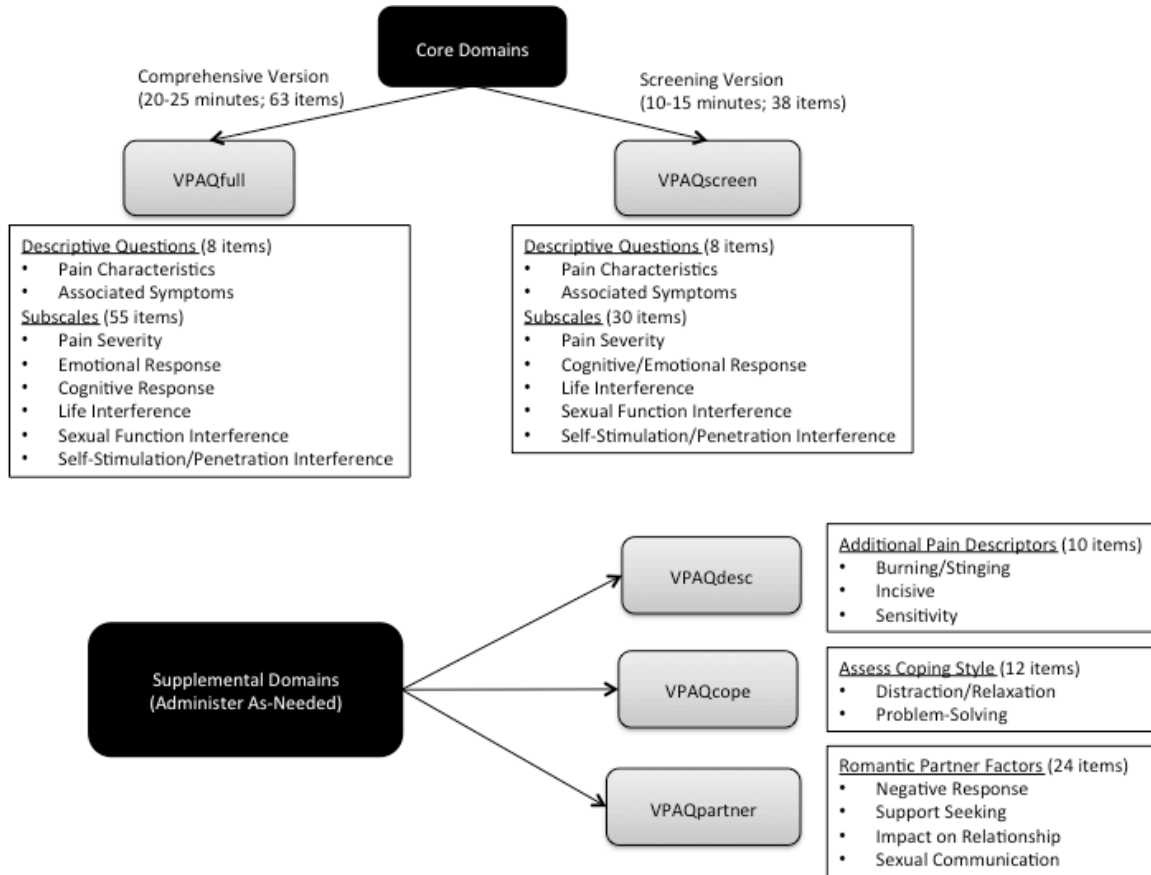
\*\*Supportive Response subscale: mean of items 1-3, 9-12

\*\*Relationship Impact subscale: compute mean of items 13-18

\*\*Sexual Communication Comfort subscale: compute mean of items 19-24

**The Vulvar Pain Assessment Questionnaire (VPAQ) Inventory:**  
**SCREENING VERSION**

This set of empirically derived scales was designed to help capture biopsychosocial factors that characterize, contribute to, and are impacted by the experience of chronic vulvar pain. From the list below, you may choose what combination of scales/subscales will best meet your goals. Instructions for scoring accompany each subscale. This document contains the **screening version** that captures the core domains, along with each scale addressing the supplementary domains.

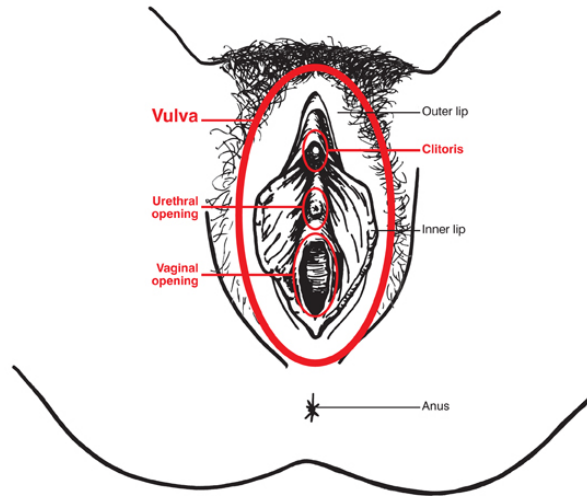


**VPAQscreen**

Descriptive Questions

1. Please reference the diagram below. Where do you experience chronic vulvar/genital pain? Select all that apply.

- Clitoris
- Urethral Opening
- Vulva
- Vaginal Opening/Vestibule



2. Do you experience vulvar skin symptoms such as:

	Yes	No
Itching		
Fissures/splits/tears		
Dryness		

3. If you have looked at your vulva, have you noted that the appearance has changed?

- Yes
- No
- I have not looked to note any changes

4. If you have vaginal discharge, do you believe that it contributes to your pain problem?

- Yes
- Maybe
- No
- No discharge

## VPAQscreen + supplemental scales

5. How long ago did your vulvar pain develop?
  - < 6 months ago
  - 7 months – 2 years
  - 3-5 years
  - 6-10 years
  - 10+ years
  
6. When do you experience your pain?
  - Any time throughout the day
  - During non-sexual contact with your vulva
  - During sexual activity involving contact with your vulva
  - Other: \_\_\_\_\_
  
7. Please choose the option that best describes when your pain begins or worsens during vulvar contact/penetration.
  - When any contact is made with the vulva
  - When the finger/object/penis starts to enter the vagina
  - When the finger/object/penis has fully entered and is thrusting
  - When a male partner ejaculates in the vagina without wearing a condom
  - Only after penetration has ended
  - When the finger/object/penis is removed
  - My pain level does not change during vulvar contact/penetration
  
8. How well does the word BURNING describe how your vulvar pain typically feels?
  - Not at all
  - A little
  - Somewhat
  - Mostly
  - Very much

**Subscales**

**Pain Severity**

Please rate the following about your vulvar pain (in a typical month)

	None	Mild	Moderate	Severe	Worst Possible
<b>Intensity: how strong the pain sensation is</b>					
9. Average pain intensity					
<b>Unpleasantness: how much the pain bothers you</b>					
10. Average pain unpleasantness					
<b>Distress: how upset the pain makes you feel</b>					
11. Average distress about pain					

**Cognitive/Emotional Responses**

In the past 6 months, how much do you experience **feeling/thinking/worrying** about the following related to your vulvar pain?

	Not at all	A Little	Somewhat	A Lot	Very Much
12. That people might think I'm a bad sexual partner					
13. That my partner(s) might think I'm frigid (i.e., sexually unresponsive)					
14. That my partner(s) will leave me					
15. That people (would) think less of me because of my pain					
16. Sad					
17. Unable to make changes in my life					
18. Bad about myself because of the pain					
19. Emotionally exhausted because of the pain					
20. Anger towards my pain					
21. That the pain will never stop					



VPAQscreen + supplemental scales

**Life Interference**

How much does your vulvar pain negatively interfere with the following?

	Not at all	A Little	Somewhat	A Lot	Very Much	I avoid because of pain
22. Sitting						
23. Walking						
24. Wearing tight-fitting clothing						
25. Taking part in recreational activities						
26. Ability to work						
27. Ability to fall asleep						

**Sexual Function Interference**

How much does your vulvar pain negatively interfere with the following?

	Not at all	A Little	Somewhat	A Lot	Very Much	I avoid because of pain
28. My response to sexual advances made by my partner						
29. Desire for sexual activity						
30. Feeling sexual pleasure						
31. Orgasm frequency						
32. Taking part in non-penetrative sexual activity						
33. Taking part in penetrative sexual activity						

VPAQscreen + supplemental scales

**Self-Stimulation/Penetration Interference**

How often do the following situations/activities cause vulvar pain?

	Never	Rarely	Sometimes	Often	Always	I avoid because of pain
34. Using tampons						
35. Solitary sexual stimulation of my vulva (i.e., masturbation)						
36. Masturbation when partner is present						
37. Self penetration with fingers (partner absent)						
38. Self penetration with sex toy (partner absent)						

\*\* "N/A" option available for all Subscales but Pain Severity, and is coded as 0

\*\* "I avoid because of pain" is coded as 4

\*\* All other scaled responses range from 0-4

\*\* Mean scores are computed for each subscale

**Supplemental Domains**

**Pain Descriptors (VPAQdesc)**

When you experience vulvar pain, how well do the following words describe how your pain typically feels?

	Not at all	A Little	Somewhat	A Lot	Very Much
1. Burning					
2. Stinging					
3. Sharp					
4. Stabbing					
5. Aching					
6. Irritating					
7. Raw					
8. Sensitive					
9. Tender					
10. Sore					

\*\*Burning Pain subscale: compute mean of items 1 & 2

\*\*Incisive Pain subscale: compute mean of items 3 & 4

\*\*Sensitivity subscale: compute mean of items 5-10

**Coping Strategies (VPAQcope)**

To cope with my vulvar pain, I:

	Never	Rarely	Sometimes	Often	Always
1. Relax my body					
2. Breathe deeply					
3. Go to my "happy place"					
4. Practice yoga/stretching					
5. Do something that takes my mind off the pain					
6. Focus on staying optimistic					
7. Visit my doctor(s)					
8. Look for information on my pain					
9. Use prescription medication					
10. Talk to people in my social network					
11. Talk to others with similar pain					
12. Avoid anything that might cause pain					

\*\*Distraction/Relaxation Strategies subscale: compute mean of items 1-6

\*\*Problem-Solving Strategies subscale: compute mean of items 7-12

VPAQscreen + supplemental scales

**Partner Factors (VPAQpartner)**

	Never	Rarely	Sometimes	Often	Always
<i>How does your romantic partner/spouse respond to your vulvar pain?</i>					
1. Asks what s/he can do					
2. Wants to talk about it					
3. Tries to acknowledge my pain					
4. Gets angry					
5. Blames me					
6. Appears frustrated					
7. Is visibly upset					
8. Looks sad					
<i>How do you interact with your romantic partner/spouse when you are in pain?</i>					
9. Seek emotional support					
10. Seek physical comfort					
11. Share your feelings					
12. Problem solve					

<i>How has your vulvar pain impacted the following in your romantic relationship?</i>					
	Much Worse	Somewhat Worse	No Change	Somewhat Better	Much Better
13. Physical intimacy					
14. Emotional intimacy					
15. Sexual intimacy					
16. Relationship quality					
17. General communication					
18. Sexual communication					

<i>How comfortable do you feel communicating (verbally or non-verbally) with your romantic partner/spouse about the following when experiencing vulvar pain?</i>					
	Largely Uncomfortable	Somewhat Uncomfortable	Neither Comfortable or Uncomfortable	Somewhat Comfortable	Largely Comfortable
19. Sexual desire					
20. Frequency of activity					
21. Amount of "foreplay"					
22. Duration of activity					
23. Sexual position					
24. Technique					

\*\*Negative Partner Response subscale: mean of items 4, 5, 6, 7, & 8

\*\*Supportive Response subscale: mean of items 1-3, 9-12

\*\*Relationship Impact subscale: compute mean of items 13-18

\*\*Sexual Communication Comfort subscale: compute mean of items 19-24