

TULIP® FAQ

- ***Is the TULIP® procedure considered a cure for Lichen Sclerosus?*** - Currently, there is no cure for Lichen Sclerosus. The current recommended “Gold Standard” treatment for LS is high potency steroids, Clobetasol. Long term steroid creams unfortunately have side effects, The TULIP® procedure offers an alternative to steroid creams.
- ***Will one treatment be enough?*** - The TULIP® procedure is designed to be a one-time treatment. However, there are times that patients need a “Touch Up” procedure. Usually everyone is better, but may still have some areas that are bothersome to them and in those situations can have a repeat treatment in those areas. The vast majority of the patients treated with the TULIP® procedure do not need a repeat treatment. That being said, unlike steroids there is no side effects of the TULIP® procedure.
- ***How long does it take to do the TULIP® procedure?*** -The entire procedure takes about 1-2 hours. Of course this also depends on the severity of the disease.
- ***Is the procedure done under anesthesia or Local?*** - We have taken great lengths to make sure that the procedure is as comfortable as possible and is well tolerated. The TULIP® procedure is done under a combination of topical anesthetic cream, local anesthetic medication and self-administered analgesia.
- ***What are the necessary follow up appointments after the TULIP®?*** - Post TULIP® follow up appointments are strongly encouraged. We have a program where we will be in contact with all post TULIP® patients 1 week after the procedure. We want to have patients have a 1 month follow-up visit with one of our Nurse Practitioners and 3 month follow up with Dr. Coyle, so we can see how they are doing and to review before and after photos. We do however understand that it is difficult for patients to travel here, especially when then are doing so good, so a video or phone consult may be more beneficial.
- ***What are the ages of patients that Dr. Coyle treats with the TULIP® procedure?*** – Unfortunately, Lichen Sclerosus knows no age limit. So far, the youngest patient that we have had the pleasure of treating with the TULIP® procedure is 5 years old. We have treated patients from age 5-80+years old.
- ***How will I feel to travel?*** - The vast majority of our patients travel and they report that they do very well. One of the tools that we use is a topical anesthetic cream that we apply before the procedure. This cream will keep the area anesthetized for about 8 hours after the procedure. Therefore, it is feasible to travel back home the day of the procedure. One of the recommendations after the TULIP® procedure is to use ice for the first 48 hours. We recommend that you use ice for 20 minutes at a time, on and off again. This too will aid in travel if you decide to stay in the Pensacola area.
- ***What types of Lichens do you treat?***- The two most common forms of Lichens that affects the vulva are, Lichen Sclerosus and Lichen Simplex Chronicus. These conditions are traditionally treated with high potency steroid creams. Both of these conditions are successfully treated with the TULIP® procedure.

- ***Do you also treat Lichen Planus?***- Lichen Planus typically affects the inside of the vagina. This can cause severe thinning of the vaginal tissue and fusing of the vaginal epithelium. This condition requires a different set of treatments that can be done here at Coyle Institute.
- ***What can I use besides steroid creams?*** This question is one of the main reasons that we invented the TULIP® procedure. There are many other options that are an attempt to improve symptoms, such as moisturizer creams, hormone creams, boric acid baths, naturopathic oils, etc.
- ***Will I be able to resume having sexual relations after having the TULIP® procedure?*** Many patients with LS are unable to have vaginal penetration for many reasons. The LS causes pain, irritation, itching, lack of flexibility, and fusing of the tissue. The TULIP® procedure has been shown to correct and improve all of these symptoms of LS. We have had many patients that, prior to the TULIP®, were unable to have vaginal penetration and after the TULIP®, they have been able to resume normal sexual function.
- ***I have fusing of my tissue, can this be treated in the office at the time of the TULIP® procedure?***- Fusing of the tissue is unfortunately a common finding with LS. One of the goals of the TULIP® procedure is to restore the anatomy back to normal as much as possible. It is actually imperative that we separate adhesions/fusing before completing the TULIP®. Most of the time this “Fusing” can be “Un-fused” in the office and at the time of the TULIP®. In very rare cases, we have had to take patients to the hospital to surgically release the adhesions. In this situation, it is still a 3 day stay in Pensacola. Say for example, you come in on a Monday for initial consultation, then in the hospital for the out-patient un-fusing procedure on Tuesday, and then TULIP® procedure on Wednesday.
- ***Can Lichen Sclerosus reoccur after the TULIP® treatment?***- Unfortunately, there is no CURE for Lichen Sclerosus. The TULIP® is designed to improve the health of the affected tissue. It has been shown to be extremely effective. That being said, there are potential downsides to the TULIP®. 1.) We only do one biopsy- Dr. Coyle during an extensive exam and listening to you, the patient, will determine the area that looks to be the most affected area. This is where the biopsy is taken from, and therefore, makes the assumption that this is indeed the area that is the worst. This is how we set our treatment parameters. Therefore, there may be some areas that are indeed worse than the biopsy site and therefore may reoccur. 2.) Lichen sclerosus often affects the clitoral area and we cannot biopsy the clitoris because it is an organ. However, we can treat the clitoris. If the clitoral area is worse than the original biopsy site, then the Lichen sclerosus can reoccur at the clitoral area. In these situations, it may require a “touchup” TULIP® treatment.
- ***What is the difference between the diVa vaginal laser and the Mona Lisa for the treatment of Lichen Sclerosus?***- Both the diVa and the Mona Lisa are lasers designed to treat the inside of the vagina. They are designed to improve the health of the vaginal canal. They are designed to treat women with vaginal atrophy, vaginal dryness, and painful intercourse. ***Neither one of them are designed to treat Lichen Sclerosus.*** Here at Coyle Institute, we use a laser that can be customized to patients’ needs.
- ***Why do I need a second biopsy?***- Many patients that have been diagnosed with Lichen Sclerosus have already had a biopsy. Here at Coyle Institute, we do need another biopsy because we have a special way of doing the biopsy. Our biopsy will provide us with the information that we need to set your treatment parameters correctly and specifically to your disease process.