

Recurrent thrush

Some women have repeated episodes of thrush, despite following the prevention guidelines. This may result in many courses of treatment. In such cases, it is important for a doctor to establish that the symptoms are really due to thrush, and not some other vaginal condition.

Once this is done, anything contributing to the growth of thrush should be identified and eliminated, if possible.

If recurrent thrush has been confirmed and no contributing factors are identified, a course of preventative treatment usually stops further episodes.

Treatment for recurrent thrush

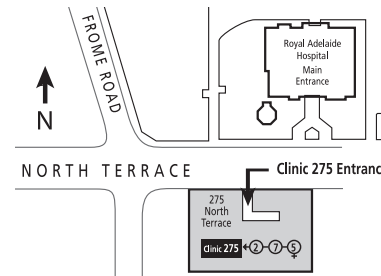
If your doctor has diagnosed recurrent thrush, a common treatment is insertion of a single 500mg pessary each week for six months. If this does not help, the doctor may prescribe an oral antifungal medication.

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Please refer any questions about this information to your treating medical officer and/or nursing staff.

Location



For more information

STD Services web site:
www.stdservices.on.net/std/vaginalthrush

Email: std.services@health.sa.gov.au

Monday, Thursday and Friday
10am – 4.30pm

Tuesday and Wednesday
11am – 6.30pm

1st floor, 275 North Terrace
Adelaide 5000

Telephone: 8222 5075

Toll free country call: 1800 806 490

Non-English speaking: for information in languages other than English, call the Interpreting and Translating Centre on (08) 8226 1990 and ask them to call the Royal Adelaide Hospital. This service is free.

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Vaginal thrush

(also known as Candidiasis and Monilia)

No appointment necessary
Free and confidential advice, testing and
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Vaginal thrush (also known as Candidiasis and Monilia)

Thrush is a very common vaginal infection. It is caused by a yeast (Candida) which lives naturally in the bowel and, in small numbers, in the vagina.

Symptoms

Normally, Candida does not usually cause symptoms. Sometimes, overgrowth of Candida occurs and symptoms develop. Women with symptoms of thrush may experience:

- > vaginal itch, discomfort or irritation
- > a thick, clumpy discharge
- > redness and/or swelling of the vagina or vulva
- > stinging or burning when passing urine.

Thrush is not the only cause of these symptoms. Other conditions such as genital herpes or urinary tract infection may have similar signs, so it is important to have the diagnosis confirmed before commencing treatment.

Diagnosis

Thrush can only be diagnosed when a doctor examines the genitals. Sometimes the doctor observes obvious inflammation and discharge and can diagnose thrush from the

examination.

Swabs taken from the affected area may show yeast organisms under the microscope.

At Clinic 275, this result is usually available 'on the spot'. Further tests to grow the organism in culture can take several days.

Causes of thrush

Sex is not important in the growth of thrush. Candida is present normally and symptoms occur because of excessive growth (overgrowth) of the yeast.

Overgrowth may be associated with:

- > antibiotic treatment
- > the oral contraceptive pill
- > diabetes
- > pregnancy
- > immune system disorders and general illness.

Sometimes the reason for the growth of thrush cannot be identified.

Treatment

Treatment reduces the number of organisms so they no longer cause symptoms. Sometimes symptoms only last for a short time (eg the week before a period) and treatment is not necessary.

Treatment is usually an antifungal cream or suppositories such as miconazole (eg Monistat) or clotrimazole (eg Canestan).

There is no evidence that dietary changes help prevent thrush.

Notes on vaginal pessaries

Place one suppository in the vagina each night until all the suppositories have been used.

- > Wear old underwear to bed, as the suppository will melt and may soil your bedding.
- > You may have sex during treatment, but insert the suppository after intercourse. Antifungal agents in suppositories may weaken condoms.
- > If a period occurs during treatment, continue to use the suppositories.

Prevention

- > Always wipe from front to back after using the toilet, to avoid spreading yeast from the anus to the vagina.
- > Wash the genital area daily with mild soap or sorbolene and glycerine cream.
- > Do not have vaginal intercourse immediately after anal intercourse.
- > Avoid antiseptic or irritating douches and perfumed sprays.
- > Do not wear tight fitting pants or synthetic underwear.