

# VAGINAL THRUSH

## Introduction

Thrush is a fungal infection and can affect women from any age from puberty but most commonly affect women in their thirties and forties, and those who are pregnant. Many women are affected by vaginal thrush at some point in their lives and, in some women, it recurs regularly.

## Symptoms

The symptoms of vaginal thrush include:

- vulval itching,
- vulval soreness and irritation,
- vaginal discharge,
- pain, or discomfort, during sexual intercourse
- pain, or discomfort, during urination
- Vulvovaginal inflammation
- Vaginal discharge- it is usually odourless, white and ‘cheese like’.

## Causes

Thrush is caused by a naturally occurring fungus, usually *Candida albicans*. The fungus is naturally present in the mouth and vagina and generally does not cause any symptoms. It takes a trigger to increase the growth of candida to cause symptoms.

Triggers include:

- **Antibiotics** - thrush occurs in about 30% of women who are taking a course of antibiotics. This is because antibiotics reduce natural bacteria in the intestinal tract which normally keep candida under control.
- **Pregnancy** - if you are pregnant, changes in the levels of female sex hormones, such as oestrogen, make you more likely to develop thrush.
- **Contraceptives**- some high dose oral contraceptives can make you more prone to thrush. This is because of the higher level of oestrogen involved. There is no increased risk of thrush with low dose contraceptives.
- **Diabetes mellitus**- people with poorly controlled diabetics are more prone to thrush. This is because the higher sugar content in urine promotes the growth of the candida infection.
- **Immunodeficiency** – for example in patients using chemotherapy

There is little evidence of a link between douching and thrush. Likewise, using sanitary towels or tampons have not been shown to increase the risk. Some studies claim that

wearing tight clothing can also provoke an infection but this theory is unproved.

## Treatment

Antifungal treatments for thrush can be taken either by mouth (orally), or by inserting them into your vagina (pessaries). Topical creams are also available to treat sore parts of the vulva (eg Canestan<sup>®</sup>). Local creams are available in pharmacies and are effective in the majority of cases.

Oral antifungal treatment is usually recommended for girls who have vaginal thrush and are between 12-16 years of age. Fluconazole is an oral antifungal treatment that needs to be prescribed by a GP. They can also be used in adults where creams or pessaries have not worked. Oral antifungal treatments can cause side effects such as nausea and vomiting.

Intravaginal pessaries that are often recommended include clotrimazole, econazole, or miconazole. They are also available through pharmacies. They do not cause as many side effects as oral antifungal treatments.

In pregnant, or breastfeeding women, oral antifungal treatment should not be used because it may affect the baby. An intravaginal pessary, such as clotrimazole, econazole, or miconazole can be used for at least seven days but a GP should be consulted.

For recurrent thrush, your GP may recommend a 'maintenance therapy' to reduce recurrence. This involves an oral fluconazole on a weekly basis or itraconazole, or intravaginal clotrimazole, on a monthly basis.

## Prevention

Probiotics, such as live yoghurts or acidophilus capsules (available from pharmacies) can help treat and prevent the condition. There is no medical evidence to show they work but they are safe to use. Women taking a course of antibiotics are often recommended to take probiotics to prevent thrush during the course.