

Vaginal Thrush

Many women have an occasional bout of thrush. Treatment is usually easy and effective. However, some women have recurring bouts of thrush which may need longer courses of treatment.

What is thrush?

Thrush is an infection caused by a yeast called Candida. Small numbers of Candida commonly live on the skin and around the vaginal area. These are usually harmless. The immune system and the harmless bacteria that normally live on the skin and in the vagina usually stop Candida from thriving. However, when conditions are good for Candida, it multiplies and may invade the vagina and cause symptoms.

The conditions Candida likes best are warm, moist, airless parts of the body. This is why the vagina is the most common site for Candida infection. Other areas of the body which are prone to Candida infection include the groin, the mouth, and the nappy area in babies.

What are the symptoms of vaginal thrush?

Thrush is the second most common cause of a vaginal discharge. (The most common cause of vaginal discharge is bacterial vaginosis.) The discharge is usually creamy white, but is sometimes watery. It can cause itch, redness, discomfort, or pain around the outside of the vagina. Sometimes symptoms are minor and clear up on their own. Often symptoms can be quite irritating and will not go without treatment.

Thrush does not damage the vagina, and it does not spread to damage the uterus (womb). If you are pregnant it will not harm your baby.

Who gets vaginal thrush?

More than half of all women have at least one bout of thrush in their life. In most cases it develops 'out of the blue' for no apparent reason.

However, certain factors can make thrush more likely to develop. The vagina contains mucus and some harmless bacteria which help to defend the vagina from Candida (and other germs). These natural defences may be altered or upset by certain situations. For example: when you are pregnant, if you have diabetes, or if you take antibiotics.

People with a poor immune system are also more likely to get thrush. For example, people on chemotherapy, on high dose steroids, with AIDS, etc.

Do I need any tests?

Do not assume a vaginal discharge is thrush. If you have never had thrush before, then see a doctor or nurse for advice on treatment. A doctor or nurse may examine you. No tests may be necessary if the symptoms and signs are typical. However, the doctor or nurse may take a small sample of the discharge with a swab if the cause of the discharge is not clear. This is sent to the lab to confirm the cause of infection.

If you have had thrush in the past and the same symptoms recur, then it is common practice to treat it without an examination or tests. Many women know when they have thrush and treat it themselves. However, see a doctor or nurse if symptoms are different to what you expect, or if the symptoms do not clear with treatment.

What are the treatment options for thrush?

Topical treatments

There are various pessaries and creams which you insert into the vagina with an applicator. They contain anti-yeast medicines such as clotrimazole, econazole, fenticonazole, or miconazole. Commonly, a single large dose inserted into the vagina is sufficient to clear a bout of thrush. However, you may also want to rub some anti-yeast cream onto the skin around the vagina for a few days, especially if it is itchy. You can get topical treatments on prescription, or you can buy them at pharmacies. Side-effects are uncommon, but read the product label for full information.

Tablets

Two options are available. Fluconazole, which is taken as a single dose, or itraconazole which is taken as two doses over the course of one day. You can get these treatments on prescription, and you can also buy fluconazole from pharmacies without a prescription. Side-effects are uncommon, but always read the product label for full information. Do not take these if you are pregnant or breastfeeding. You may also want to rub some anti-yeast cream onto the skin around the vagina for a few days, especially if it is itchy.

Tablets and topical treatments are equally effective. Tablets are more convenient, but are more expensive than topical treatments.

What if treatment does not work?

If you still have symptoms after a week from starting treatment, see your doctor or nurse.

Treatment does not clear symptoms in up to 1 in 5 cases. Reasons why treatment may fail include:

- The symptoms may not be due to thrush. There are other causes of a vaginal discharge. Also, thrush can occur at the same time as another infection. You may need tests such as a vaginal swab to clarify the cause of the discharge or other symptoms.
- Most bouts of thrush are caused by *Candida albicans*. However, about 1 in 10 bouts of thrush are caused by other strains of *Candida* such as *Candida glabrata*. These may not be so easily treated with the usual anti-yeast medicines.
- You may not have used the treatment correctly.
- You may have had a quick recurrence of a new thrush infection. (This is more likely if you are taking antibiotics, or if you have undiagnosed or poorly controlled diabetes.)

Some other points about thrush

- 'Natural' remedies for thrush include: live yoghurt inserted into the vagina; adding vinegar or bicarbonate of soda to a bath to alter the acidity of the vagina; tampons impregnated with tea tree oil. However, there is little scientific evidence that these remedies are effective.
- Thrush is not a sexually transmitted infection. *Candida* is a germ which commonly occurs on the skin and vagina. For reasons not quite clear, it sometimes multiplies to cause symptoms.
- Male sexual partners do not need treatment unless they have symptoms of thrush on their penis. Symptoms in men include redness, itch, and soreness of the foreskin and the head (glans) of the penis. Women do not 'catch' thrush from men who have no symptoms.
- Thrush occurs more commonly in pregnant women, and can be more difficult to clear. It can take several days of topical treatment to clear thrush if you are pregnant.
- Some women develop recurring thrush. This is defined as four or more times a year. If this occurs, see your doctor for advice on preventative treatment. (See also the leaflet called 'Thrush - Recurring Infections.')