

Thrush and Bacterial vaginosis

Looking after **your** sexual health

Thrush and Bacterial Vaginosis

This booklet is about two infections, thrush and bacterial vaginosis. They're not sexually transmitted infections but they can develop after you've had sex.

Thrush is an infection caused by a yeast fungus. Thrush can develop in and around the vagina, vulva, penis, or anus. It's a very common

cause of unusual vaginal discharge – three out of four people with a vagina will have thrush at some point. It's unusual for people with a penis to get thrush.

Bacterial vaginosis is the most common cause of unusual vaginal discharge. One in three people with a vagina get it at some time. People with a penis don't get bacterial vaginosis.

This booklet gives you information about what you can do if you're worried you might have either or both infections and how to get treatment.

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Thrush

What's thrush?

Thrush is usually caused by a yeast fungus called candida albicans. This yeast usually lives harmlessly on the skin and in the mouth, gut and vagina. Occasionally, however, signs and symptoms can develop. This is commonly known as thrush, thrush infection or candida. This booklet uses the term thrush. It tells you about thrush that develops in and around the genitals.

What causes thrush to develop?

Your chances of developing thrush increase if you:

- are pregnant
- wear tight clothing (such as tight jeans) or synthetic clothing (such as nylon underwear)
- are taking antibiotics
- are having chemotherapy
- have uncontrolled diabetes, HIV or other illnesses that affect your immune system
- use products that may irritate the vagina, such as vaginal deodorant or perfumed bubble bath or shower gel.

What are the signs and symptoms of thrush?

Some people won't have any signs or symptoms at all. If you do get symptoms, you might notice:

- itching, soreness and redness or fissures (like paper cuts) around the vagina, vulva (the opening to the vagina and urethra, the labia (vaginal lips) and the clitoris) or anus

- unusual, white discharge from the vagina that may be thick and look like cottage cheese – it sometimes smells yeasty
- pain when passing urine or having sex
- irritation, burning, itching, redness or fissures (like paper cuts) under the foreskin or on the tip of the penis
- a thin or thicker discharge, like cottage cheese, under the foreskin which sometimes smells yeasty
- difficulty in pulling back the foreskin.

How will I know if I have thrush?

If you think you may have thrush, speak to your doctor, nurse or pharmacist. Thrush isn't a sexually transmitted infection but it's important you don't delay getting advice if you may have been at risk of a sexually transmitted infection.

What does a test involve?

It's not always necessary to have a test for thrush.

If you do have a test, a doctor or nurse may:

- look at the genital area, the vagina or the penis
- use a swab to collect a sample from the vagina
- use a swab to collect a sample from the penis and genital area, including under the foreskin.

A swab looks like a cotton bud, but is smaller, soft and rounded. The swab is wiped over the parts of the body that could be affected and easily picks up samples. It only takes a few seconds and isn't usually painful, though it may be uncomfortable for a moment.

Sometimes it's possible for you to get the test result straight away. Otherwise you'll have to wait up to two weeks to get your result.

Sometimes thrush signs will be noticed during a cervical screening test (smear test), but you'll only need treatment if you have problems with discharge or itching. Routine blood tests don't detect thrush.

It's also possible to buy a test for thrush to do at home. The accuracy of these tests varies. If you buy a testing kit make sure you get advice from a pharmacist or your doctor:

How accurate are the tests?

The accuracy of a thrush test depends on the test and the type of sample that's collected.

Microscopy tests (where a sample is looked at with a microscope) for thrush that occurs in the vagina or around the vulva are usually accurate. They're less accurate for thrush that occurs in or around a penis, so diagnosis is often made by looking at the genital area.

Where can I get a test?

You can have a test as soon as you have signs and symptoms. There are a number of services you can go to. Choose the one you feel most comfortable with.

A test can be done at:

- your general practice
- some contraception clinics and young people's services
- a genitourinary medicine (GUM) or sexual health clinic.

For information on finding a service see page 19.

What's the treatment for thrush?

Treatment is simple and only necessary if you have signs and symptoms of thrush.

- You may be given antifungal cream to apply to the genital area, vaginal pessaries (tablets that you put into your vagina), pills or a combination. The doctor or nurse will tell you how to use the treatment.
- You can buy some antifungal treatments from a pharmacy – these are useful if you're sure you have thrush and want to treat it yourself. The pharmacist will answer any questions and explain how to use the treatment.
- It's very important to take the treatment as instructed and finish any course of treatment even if the symptoms go away earlier.
- Some antifungal products can weaken latex condoms, diaphragms and caps. Polyurethane (soft plastic) types can be safely used. Ask the doctor, nurse or pharmacist for advice.
- Tell the doctor, nurse or pharmacist if you're pregnant, might be pregnant, or if you're breastfeeding. This may affect the type of treatment you're given.

How effective is the treatment?

- Antifungal cream, pessaries or pills are usually effective if you use them according to instructions. Symptoms should disappear within a few days.
- If the first treatment doesn't work, the doctor or nurse may suggest another test or a combination of treatments.

Do I need a test to check the thrush has gone?

No, this isn't usually necessary. You may wish to go back to the doctor or nurse if:

- you didn't use the treatment as instructed
- the signs and symptoms didn't go away
- you think you may have thrush again.

Some situations seem to make my thrush worse, is there anything I can do?

Some people find that different triggers cause vaginal thrush. If you notice a pattern, you may be able to help control it. For example:

- avoid wearing tight, restrictive or synthetic clothing, such as tights, nylon underwear, leggings, lycra shorts, and tight jeans or trousers
- make sure your vagina is well lubricated before and during sexual intercourse
- wash and wipe your genital area from front to back
- avoid using soap and deodorants near the genital area, genital sprays, bubble bath, and any other irritants such as disinfectants and antiseptics.

If you're prescribed an antibiotic for another condition, remind your doctor that you tend to get thrush and ask for some treatment for thrush at the same time.

I get thrush regularly, is there anything that can help?

Some people may only get thrush once. Others may get it multiple times. Getting thrush four or more times in a year is called recurrent thrush. If this happens, get medical advice and don't treat it

yourself. If you get recurrent thrush the doctor or nurse:

- will want to check that other conditions, such as diabetes, aren't the cause of the thrush
- may suggest you take antifungal treatment on a regular basis
- may check the thrush isn't being caused by a different kind of yeast
- may suggest you stop using soap and use an emollient (soap substitute) instead
- will help you to identify any thrush triggers.

What happens if thrush isn't treated?

For many people thrush goes away by itself.

Will my partner(s) need treatment?

There's no need for a partner to have treatment unless they have signs and symptoms.

Will thrush affect my chances of getting pregnant?

No. Thrush won't affect your chances of getting pregnant.

What if I get thrush when I'm pregnant?

Pregnancy can increase your chance of thrush developing. Thrush isn't harmful to you or the baby. It can be safely treated using pessaries or creams. You shouldn't take pills for thrush if you're pregnant. Always get advice before taking any treatment if you're pregnant.

Does thrush cause cervical cancer?

No. Thrush doesn't cause cervical cancer.

Bacterial Vaginosis

What causes bacterial vaginosis?

The cause of bacterial vaginosis (sometimes called BV) isn't really understood. People who have bacterial vaginosis have:

- less normal vaginal bacteria (lactobacilli)
- an overgrowth of other types of bacteria in the vagina
- a change in pH (acid/alkaline balance) of the vagina with the vagina becoming more alkaline.

Bacterial vaginosis is more common if you:

- use medicated or perfumed soaps, bubble bath or shower gel
- put antiseptic liquids in the bath
- douche or use vaginal deodorant
- use strong detergents to wash your underwear
- smoke.

Hormonal changes during the menstrual cycle, receiving oral sex, semen in the vagina after sex without a condom, an intrauterine contraceptive device (IUD) and genetic factors may also play a part.

Bacterial vaginosis isn't a sexually transmitted infection, but people with a vagina who are sexually active and have had a change of partner are more likely to have it, including those in same-sex relationships.

What are the signs and symptoms of bacterial vaginosis?

Around half of people with bacterial vaginosis won't have any signs and symptoms at all, or may not be aware of them. If you do get symptoms

you might notice a change in your usual vaginal secretions (discharge). This may increase, become thin and watery, change to a white/grey colour and develop a strong, unpleasant, fishy smell, especially after sex. Bacterial vaginosis isn't usually associated with soreness, itching or irritation.

How will I know if I have bacterial vaginosis?

If you think you may have it, talk to a doctor or nurse who might recommend a test if you have signs and symptoms. You may notice these yourself or they may be noticed by a doctor or nurse during a vaginal examination.

You may be offered a test during pregnancy if you have symptoms. You should be offered a test before some gynaecological procedures and before an abortion.

Bacterial vaginosis isn't a sexually transmitted infection but it's important you don't delay getting advice if you may have been at risk of a sexually transmitted infection.

What does a test involve?

A doctor or nurse may examine inside of your vagina to look at any vaginal discharge and to collect a sample from the vaginal walls using a swab. A swab looks like a cotton bud, but is smaller and rounded. It sometimes has a small plastic loop on the end rather than a cotton tip. It only takes a few seconds to wipe over the area and isn't usually painful, though it may be uncomfortable for a moment.

The pH (alkaline/acid balance) of the vagina may be measured by wiping a sample of vaginal discharge over a piece of specially treated paper.

Sometimes your test result will be available

straight away, but other times it can take up to two weeks.

Sometimes bacterial vaginosis is noticed during a cervical screening test (smear test), but you'll only need treatment if you have problems with discharge. Routine blood tests don't detect infections such as bacterial vaginosis.

It's also possible to buy a bacterial vaginosis test to do at home. If you buy a testing kit, get advice from a pharmacist or your doctor:

It's not always necessary to have a test for bacterial vaginosis.

How accurate are the tests?

The accuracy of a bacterial vaginosis test depends on the test used and the type of sample that's collected. Microscopy tests (where a sample is looked at with a microscope) for bacterial vaginosis are usually accurate.

Where can I get a test?

There are a number of services you can go to. Choose the one you feel most comfortable with.

A test can be done at:

- your general practice
- some contraception clinics and young people's services
- a genitourinary medicine (GUM) or sexual health clinic.

For information on finding a service see page 19.

What's the treatment for bacterial vaginosis?

- Treatment for bacterial vaginosis is simple and involves taking antibiotic tablets. There are several different antibiotics that can be used. These are taken either as a single dose or a longer course (up to one week).
- You may be given a cream or gel instead. You'll need to use this in the vagina for 5–7 days.
- The doctor or nurse will advise you how to use the treatment. If you're given the antibiotic metronidazole, either as tablets or a vaginal gel, you'll be advised not to drink alcohol during the treatment and for 48 hours afterwards. This is because it reacts with alcohol and can make you feel very unwell.
- Some creams can weaken latex condoms, diaphragms and caps. Polyurethane (soft plastic) types can be safely used. Ask the doctor or nurse for advice.
- Tell the doctor, nurse or pharmacist if you're pregnant, think you might be, or you're breastfeeding. This can affect the type of treatment you're given.

How effective is the treatment?

Treatment is effective if used correctly.

It's quite common for bacterial vaginosis to return, and some people get it multiple times.

Do I need a test to check the bacterial vaginosis has gone?

You only need another test if:

- signs and symptoms don't go away
- signs and symptoms come back.

What happens if bacterial vaginosis isn't treated?

For many people bacterial vaginosis goes away by itself.

What if bacterial vaginosis keeps coming back?

We don't know why bacterial vaginosis keeps recurring in some people. There's no agreed preferred way of treating recurrent infection. Some people may be given a course of antibiotic gel to use over a number of months. Others may be given antibiotic tablets to use at the start and end of their period. Some people may find it helpful to use a lactic acid gel (available from a pharmacy) to restore the pH balance in the vagina. Ask your doctor, nurse or pharmacist for advice.

Is there anything that can help reduce the risk of bacterial vaginosis?

Using the combined oral contraceptive pill and using condoms during vaginal sex may help reduce the risk of bacterial vaginosis occurring.

Will my partner(s) need treatment?

If your partner has a vagina, they should get advice from a doctor or nurse about whether they need treatment.

Will bacterial vaginosis affect my chances of getting pregnant?

No. There's no evidence that bacterial vaginosis will affect your chances of getting pregnant.

What if I get bacterial vaginosis when I'm pregnant?

Bacterial vaginosis has been found in some people who've had a miscarriage, a premature (early) birth or a low birth weight baby.

If you have symptoms of bacterial vaginosis (see page 10) during pregnancy, it's important to go for a check-up so treatment can be given if needed. Bacterial vaginosis can safely be treated when you're pregnant or breastfeeding. It won't harm the baby, but tell the doctor or nurse if you're pregnant or breastfeeding as this may affect what treatment you get.

Does bacterial vaginosis cause cervical cancer?

No. There's no evidence bacterial vaginosis causes cervical cancer.

General information

How can I help protect myself from sexually transmitted infections?

It's possible to get a sexually transmitted infection by having sex with someone who has an infection. This is possible even if they have no symptoms.

The following measures will help protect you from most sexually transmitted infections including HIV, chlamydia and gonorrhoea. If you have a sexually transmitted infection they'll also help prevent you from passing it on.

- Use condoms (external/male or internal/female) every time you have vaginal or anal sex.
- If you have oral sex (going down, giving head), use a condom to cover the penis, or a dam (latex or soft plastic square) to cover the vulva (external female genitals) or the anus.
- Avoid sharing sex toys. If you do share them, wash them or cover them with a new condom before anyone else uses them.
- If you're not sure how to use condoms correctly visit www.sexwise.org.uk for more information.

When should I have a test for sexually transmitted infections?

If you or a partner think you may have a sexually transmitted infection it's important you don't delay in getting a test.

A test is recommended if:

- you or a partner have or think you might have symptoms
- you've recently had unprotected sex with a

new partner

- you or a partner have unprotected sex with other partners
- during a vaginal examination, your doctor or nurse says that the cells of the cervix are inflamed or there's a discharge
- a sexual partner tells you they have a sexually transmitted infection
- you have another sexually transmitted infection
- you're pregnant or planning a pregnancy.

Will I have to pay for tests and treatment?

All tests are free through NHS services. Treatment is also free, unless you go to your general practice when you may have to pay a prescription charge for the treatment.

Using a service

- Wherever you go, you shouldn't be judged because of your sexual behaviour or who you have sex with.
- All advice, information and tests are free.
- All services are confidential.
- All tests are optional and should only be done with your permission.
- Ask as many questions as you need to – and make sure you get answers you understand.
- The staff will offer you as much support as you need, particularly if you need help on how to tell a partner.

Where can I get more information and advice?

The National Sexual Health Helpline provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123. It's open Monday to Friday from 9am-8pm.

For more information on sexual health visit www.fpa.org.uk or www.sexwise.org.uk

Information for young people can be found at www.brook.org.uk

Clinics

To find your closest clinic you can:

- use Find a Clinic at www.fpa.org.uk/clinics
- download FPA's Find a Clinic app for iPhone or Android.

Details of general practices and pharmacies in England are at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland, details of general practices are at www.nhsinform.scot and in Northern Ireland at www.hscni.net

A final word

This booklet can only give you general information.

The information is based on evidence-based guidance produced by The British Association for Sexual Health and HIV (BASHH) and The Royal College of General Practitioners (RCGP).



the sexual health charity



sexwise.org.uk

www.fpa.org.uk

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If you'd like information on the evidence used to produce this booklet or would like to give feedback email feedback@fpa.org.uk



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