Vaginal thrush is caused by abnormal colonization of the vagina by yeast cells mainly *Candida Albicans*. Candida can be present in women with no symptoms. A number of factors may contribute to the patient developing vaginal thrush. Evidence is limited, but these may include:

- Diet and emotional wellbeing
- Tight fitting clothes
- Medicines e.g., broad spectrum antibiotics, contraceptive pill or steroids
- Female hygiene and sanitation
- Irritants (bath products, soap powder or perfume)
- Pregnancy (needs referred)
- Co morbidity – diabetes, immunosuppression (needs referred)

**Symptoms:**
Onset of symptoms tends to be rapid.
- Itching and soreness of the vulva and the vagina
- Redness and swelling of the vaginal area
- Vaginal discharge often thick white, cheese-like or sometimes colourless with no smell
- Dysuria
- Superficial dyspareunia

Advice on self-care (page 2)
### Advice for Self-Care / Non Pharmaceutical Treatment

#### General advice
- Use a soap substitute to clean the vulval area (advise the patient not to use internally and not to use more than once daily)
- Use an emollient to moisturise the vulval skin.
- Avoid applying topical irritants such as perfumed products.
- Wear loose-fitting underwear (although there is little evidence to support this).
- Avoid washing underwear in biological washing powder and using fabric conditioners.
- As a general health precaution, always wipe the bottom from front to back after using the toilet.
- Consider using probiotics (such as live yoghurts) orally or topically to relieve symptoms*

*CKS recommends advising the woman to consider using probiotics because although there is no evidence that they are effective, there is no evidence of (or concerns about) serious adverse effects.

<table>
<thead>
<tr>
<th>Drug</th>
<th>Dose and Duration</th>
<th>Advice</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clotrimazole 500mg pessary</td>
<td>insert 1 pessary into the vagina once at night as a single dose</td>
<td>The choice of treatment and formulation will depend on factors such as contraindications and cautions, the licensed age and indication for the product, and the person's preference. If there are vulval symptoms, consider prescribing a topical imidazole in addition to an oral or intravaginal antifungal. Fluconazole is teratogenic so sexually active women of child-bearing age should ensure they take adequate contraceptive precautions. Creams and pessaries may damage latex condoms and diaphragms.</td>
</tr>
<tr>
<td>Clotrimazole 10% cream</td>
<td>insert 5 g into the vagina as a single dose at night</td>
<td></td>
</tr>
<tr>
<td>Clotrimazole Combi / cream Combi</td>
<td>insert 1 pessary / 10% VC into the vagina once at night and apply the 2% cream two or three times daily to the vulva and surrounding area</td>
<td></td>
</tr>
<tr>
<td>Fluconazole 150mg capsule</td>
<td>150mg capsule as a single dose</td>
<td></td>
</tr>
<tr>
<td>Clotrimazole 2% cream</td>
<td>The cream should be applied thinly two or three times daily and rubbed in gently to vulva and surrounding areas for at least 14 days. It should be used as an adjunct to treatment of candidal vaginitis.</td>
<td></td>
</tr>
</tbody>
</table>

**References:** Clinical Knowledge Summary: Candida: Female genital [https://cks.nice.org.uk/candida-female-genital#](https://cks.nice.org.uk/candida-female-genital#)

See individual product SPC for further information/advice.

Reviewed January 2018 - HSCB