

Title: Bacterial Vaginosis

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Abstract: Bacterial vaginosis (BV) is the most common vaginal infection in women of childbearing age. There is increasing evidence that BV is associated with potentially severe gynecologic and obstetric complications. Many patients with BV experience frequent recurrence of their symptoms after standard treatment. This brochure describes signs and symptoms, diagnosis, treatment, complications, and prevention of bacterial vaginosis. It also addresses the role of suppressive therapy for recurrent infections.

This document was created by a medical student enrolled in the Primary Care Clerkship at the University of Minnesota Medical School as part of the course project. The aim of the project is to present information on a medical topic in the format of a patient education handout. It does not necessarily reflect the views of the University of Minnesota Medical School physicians and faculty. These materials are provided for informational purposes only and are in no way intended to take the place of the advice and recommendations of your personal health care provider. The information provided may no longer be up to date since it has not been reviewed since the date of creation. The information provided should not be used to diagnose a health problem or disease, or as a means of determining treatment. In the event of a medical emergency, immediately contact a doctor or call 911.

PREVENTION

Because bacterial vaginosis is not completely understood, the best ways to prevent it are unknown. However, basic steps you can take include:

- Abstinence
- Limit number of sexual partners
- Do not douche
- Use all medications prescribed for treatment, even if symptoms resolve before you finish the entire course of treatment

For further information on bacterial vaginosis:

Division of STD Prevention
Centers for Disease Control and Prevention
<http://www.cdc.gov/std>

National Institute of Allergy and Infectious Disease
<http://www3.niaid.nih.gov/topics/bacterialVaginosis/>

FamilyDoctor.org
<http://familydoctor.org/online/famdoc/en/home/women/reproductive/vaginal/234.html>

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BACTERIAL VAGINOSIS

University of Minnesota
Family Medicine Clerkship
Patient Education Tool

WHAT IS BACTERIAL VAGINOSIS?

Bacterial vaginosis (BV) is a condition in women where the normal balance of bacteria in the vagina is disrupted. The vagina normally has a balance of mostly “good” bacteria and fewer “harmful” bacteria. In bacterial vaginosis, there is an increase in “harmful” bacteria.

Bacterial vaginosis is the most common vaginal infection in women of childbearing age.

SIGNS AND SYMPTOMS

- Abnormal vaginal discharge
- Discharge is usually white or gray
- Discharge may have “fishy” odor, especially after intercourse
- May have burning during urination
- May have itching around outside of vagina
- Many women with bacterial vaginosis report no signs or symptoms

CAUSES OF BACTERIAL VAGINOSIS

The cause of bacterial vaginosis is not fully understood. However, there are some activities and behaviors that can upset the normal balance of vaginal bacteria and increase a woman’s risk.

- Having new sex partners or multiple sex partners increases your risk.
- Douching also increases your risk.
- Women who have never had sexual intercourse may be affected.

DIAGNOSIS

Your doctor will perform a vaginal exam and take a sample of vaginal fluid to look for the bacteria associated with bacterial vaginosis.

TREATMENT

All women with symptoms of BV should be treated to prevent complications.

BV is treated with antibiotics. Your doctor may prescribe metronidazole or clindamycin. Antibiotics can be taken as a pill you swallow or as a medication you insert into your vagina.

COMPLICATIONS

- Most cases are not associated with complications
- Pregnant women are at increased risk of preterm delivery and lower birth weight babies
- BV increases susceptibility to STDs such as herpes simplex virus, chlamydia, gonorrhea and HIV
- BV increases the risk for infection following surgical procedures such as abortion and hysterectomy
- BV can cause pelvic inflammatory disease, which is an infection of the uterus and fallopian tubes. This can lead to infertility and ectopic pregnancy

RECURRENCE OF SYMPTOMS

Recurrence of symptoms after treatment is common and frustrating. Up to 1/3 of women experience recurrent symptoms at 3 months following treatment and up to 80% at 9 months. Recurrences are often treated with a repeated full treatment course of antibiotics. Another option for frequent symptomatic recurrences is suppressive therapy with metronidazole gel two times per week.