Yeast Vaginitis

Brown Health Services Patient Education Series

Yeast is a normal fungal inhabitant of the vagina. Usually, the yeast and bacteria in the vagina live in happy harmony, however, some factors cause an overgrowth of yeast in the vagina with inflammation, when this happens it is called yeast vaginitis.

Symptoms include some or all the following:

- irritation
- thick, white, curd-like discharge (similar to cottage cheese)
- intense itching which leads to swelling of the vulvar and cracking of the vulvar skin
- possibly a burning sensation when you urinate
- itching of the rectal opening
- pain with intercourse

A yeast infection is not considered an infection that is sexually transmitted or “caught” from someone else.

Lifestyle choices that can contribute to yeast vaginitis:

- Antibiotic use
- Starting oral contraceptives
- A new sexual partner
- Stress
- Dietary changes
- Tight-fitting clothing and nylon underwear
- Prolonged time in a wet bathing suit or damp clothing

Treatment

Many yeast remedies are available without a prescription (i.e., clotrimazole or miconazole). It is best to choose a 5-7 days course of treatment as the 1 day course can cause intense burning and may not resolve all symptoms. You may elect to first try a course of over-the-counter treatment prior to calling your provider.

Your provider may prescribe an oral antifungal pill (i.e. Fluconazole) or vaginal cream/ suppository. An oral treatment is typically dosed as 1 pill to be taken on day one and the second 72 hours later if symptoms remain.

Important Note:

During treatment of a yeast infection, it is usually more comfortable to wear cotton underwear and loose clothing; this allows for greater air circulation.

Be sure to use any prescribed vaginal creams or suppositories for the full course recommended.

If your menstrual period interrupts the course of medicine, use pads rather than tampons. When your period is over, restart the medication for the whole prescribed course.

When to Contact Your Healthcare Provider

- If you have symptoms and a recent change in sexual partner(s) and/or unprotected genital sex.
- If your symptoms do not go away within one week, (Be sure you have not used any vaginal creams for at least 24 hours before you come in for an exam).

Recommendations for Recurrent or Persistent Symptoms:

Recurrent yeast infections should be discussed with your provider especially if you have had more than 3 in the past 6 months, as further lab tests may be in order and preventative measures may be considered. Guidelines strongly recommend screening for sexually transmitted infections which may coexist with persistent yeast infections.
Considerations for Sexual Partners:

Sexual partners with penises may occasionally develop genital irritation and itch from yeast, especially if they are uncircumcised, but usually there is no discharge.

Sexual partners without symptoms don’t need treatment, but a partner with symptoms should see a medical provider for evaluation and concurrent treatment.

Keep in mind that the ingredients in some yeast creams and suppositories may compromise the integrity of latex barrier methods (condoms and dental dams); concurrent use is not recommended as the latex may break. It is best to abstain from intercourse while treating a yeast infection.