

BV PEARLS

DECODING VAGINITIS SYMPTOMS

Bacterial vaginosis (BV) is the most common cause of vaginitis in both pregnant and non-pregnant women, and the most prevalent cause of vaginal discharge and odour.¹ However, misdiagnosis of BV is a major challenge to effective treatment.² BV is often mistaken for vulvovaginal candidiasis (VVC), which may lead to inappropriate treatment with over-the-counter antifungal medicines and recurrent infections.²

In contrast to the non-odorous, thick, white, curdy discharge caused by VVC, BV presents with a thin, greyish-white, homogenous discharge accompanied by a distinctly fishy odour.^{3,4} Another common cause of a malodorous vaginal discharge is Trichomoniasis, a common sexually transmitted infection characterised by a green or yellow frothy discharge.³

CHARACTERISTIC SIGNS AND SYMPTOMS FOR DIFFERENT CAUSES OF VAGINITIS



	BACTERIAL VAGINOSIS	VULVOVAGINAL CANDIDIASIS	TRICHOMONIASIS
PROPORTION OF VAGINITIS CASES	40-50 % ³	20-25 % ³	15-20 % ³
AETIOLOGY	Anaerobic bacteria (<i>Prevotella</i> , <i>Mobiluncus</i> , <i>Gardnerella vaginalis</i> , <i>Ureaplasma</i> , <i>Mycoplasma</i>) ³	<i>Candida albicans</i> and other <i>Candida</i> species ³	<i>Trichomonas vaginalis</i> ³
VAGINAL DISCHARGE	Thin, greyish-white, homogenous ^{3,4} May worsen after intercourse ³	White, thick, cheesy or curdy ³	Green or yellow, frothy ³
ODOUR	Fishy ³ May worsen after intercourse ⁴	None ³	Foul ³
VAGINAL SIGNS & SYMPTOMS	May be itchy ⁴ Usually no inflammation ³	Vulvar burning and itching, redness and swelling ³	Vaginal pain or soreness, redness and swelling, itching, strawberry cervix ^{1,3,5}
PAINFUL URINATION	Sometimes ⁴	Yes ¹	Yes ¹
PAINFUL INTERCOURSE	Sometimes ⁴	Yes ¹	Yes ¹
VAGINAL pH	Increased ³	Normal ³	Increased ⁵

BV IS TRADITIONALLY DIAGNOSED USING THE AMSEL CRITERIA. THREE OUT OF FOUR CRITERIA MUST BE MET:³

- 1 Thin, homogeneous discharge
- 2 Positive whiff test (amine odour released when mixing 10% potassium hydroxide solution with vaginal discharge)
- 3 Vaginal pH > 4.5
- 4 Clue cells on microscopy



While short term treatment of BV with recommended first-line regimens is successful, more than 50% of women experience recurrence.⁶

Coming soon

A non-antibiotic biofilm-disrupting vaginal gel that treats BV, prevents recurrence and restores normal vaginal flora balance^{7,8}

REFERENCES: 1. Van Schalkwyk J, et al. *J Obstet Gynaecol Can* 2015;37(3):266–274. 2. Munzy CA, et al. *Sex Transm Dis* 2020;47(7):441-446. 3. Paladine HL, et al. *Am Fam Physician* 2018;97(5):321-329. 4. StatPearls. Bacterial Vaginosis. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK459216/>. Accessed 24 November 2020. 5. StatPearls. Trichomoniasis. Available at: <https://www.ncbi.nlm.nih.gov/books/NBK534826/>. Accessed 24 November 2020. 6. Bradshaw CS, et al. *J Inf Dis* 2016;214(S1):S14–20. 7. Betadine BV gel IFU, April 2020. 8. Data on file. Clinical Evaluation Report, July 2018, Starpharma Pty Ltd.