Vaginitis

What is vaginitis?

Vaginitis is inflammation or infection of the vagina. Many different things can cause vaginitis.

What are the symptoms?

Symptoms of vaginitis include pain, dryness, itching, burning of the vagina sometime extending to the outside skin, pain with intercourse or when urinating, and increased or abnormal discharge.

What might be found on exam?

When the vagina is examined, there may be nothing abnormal to see. Some of the abnormal changes that can be seen are vaginal sores, swelling, and redness. Discharge may be white, grey, or yellow and pus-like. Vaginal tenderness (soreness when the area is examined) is often present. Swelling, cracking, redness, and sores may extend to the outer lips of the vulva.

What is the cause?

There are many causes of vaginitis including infections, immune/autoimmune-induced inflammation, hormonal conditions, and environmental allergies.

Causes of vaginitis:

- **Infectious diseases** - Candida (yeast), Trichomonas vaginalis, Gardnerella Vaginalis (bacteria), and Herpes.
- **Immune/autoimmune induced inflammation** – some autoimmune diseases can occur in the vagina or vulva.
- **Low estrogen (atrophic vaginitis)** – can happen in menopause, patients using medroxyprogesterone (contraceptive injection) or after childbirth, especially with prolonged breastfeeding.
- **Environmental allergies or Contact dermatitis** - various creams, soaps, intravaginal medications, the use of some sex toys and lubricants can cause inflammation. Allergy to latex (condoms) has also been observed but this is not common. Sometimes the use of condoms, especially if they are poorly lubricated, can cause an irritation and intolerance on the skin but this is not a true allergy.
- **Miscellaneous** – trauma, sexual intercourse without proper lubrication, foreign body (for example, retained tampon) can also cause vaginal irritation.
What is the treatment for vaginitis?

Different problems have different treatments. That’s why it’s so important to be examined by a provider when you have symptoms instead of trying to treat yourself.

- **Infection**—usually an antibiotic or antifungal treatment. This may be a cream or ointment to apply, or a tablet to take by mouth.
- **BV**—usually treated with Metronidazole (oral pills or vaginal gel) or Clindamycin (vaginal cream or vaginal ovules) or rarely, with tinidazole. Some will also eat yogurt with lactobacilli to try to increase the number of “good” bacteria in the vagina.
- **Immune/auto-immune induced inflammation**—this is usually treated with a strong anti-inflammatory steroid ointment.
- **Hormonal**—treatment with estrogen replacement may be offered.
- **Environmental allergy/ Contact dermatitis**—treatment begins by first removing what is causing the problem. Anti-inflammatory steroid ointments may also be needed.

**Bacterial vaginosis (BV)**

BV produces increased abnormal and bad-smelling vaginal discharge and sometimes vaginal burning. BV happens when there are too few “good” bacteria (lactobacilli) in the vagina, and too many “bad” bacteria. BV is not a sexually transmitted disease, and can be treated with an antibiotic. Unfortunately, BV symptoms return after treatment for some patients.

How do I know what type of vaginitis I have?

Your provider will taken a detailed medical history followed by vaginal examination, and laboratory tests.

ASCCP is a professional society for an interdisciplinary group of healthcare professionals including physicians, physician assistants, nurse practitioners, midwives and researchers, who are focused on improving lives through the prevention and treatment of anogenital and HPV-related diseases. For more information visit www.asccp.org.