



**[The Lambda Clinic - Sexual Health Advice - Patient Information Leaflet](http://www.lambdaclinic.co.uk/bacterial-vaginosis.html)**  
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**Bacterial Vaginosis (BV)**

Bacterial vaginosis (BV) is a common cause of a vaginal discharge. At least 1 in 10 women have bacterial vaginosis at some time in their life. Bacterial vaginosis is not a sexually transmitted infection. Symptoms are often mild and may clear without treatment. A course of antibiotics usually clears bacterial vaginosis and this is an effective form of treatment.

**What is bacterial vaginosis?**

Bacterial vaginosis is caused by an overgrowth of various bacteria which occurs when the pH (acid / alkali balance) of the vagina is altered. Men do NOT get bacterial vaginosis.

**How do you get bacterial vaginosis?**

Bacterial vaginosis occurs when the pH of the vagina is altered and becomes more alkali. This can happen if you:

- Frequently douche the vagina i.e. push water into the vagina to clean it
- Use scented soaps / perfumed bubble bath
- Use strong detergents to wash your underwear
- Smoke

Other triggers may include genetic factors, hormonal changes during the menstrual cycle and having semen in the vagina after sex when a condom has not been used.

**What are the symptoms of bacterial vaginosis?**

The main symptom of bacterial vaginosis is having a vaginal discharge. The discharge is often thin and watery, a white-grey colour and often described as having a strong fishy smell. The discharge tends to be heaviest just after a period or after having sex. The smell may also be noticeable during / after sex. The discharge of bacterial vaginosis does not usually cause itching or soreness, unlike thrush.

Up to 50% of women with bacterial vaginosis do not have any symptoms. In these women bacterial vaginosis is often a chance finding when vaginal swabs are taken for other reasons.

**How is bacterial vaginosis diagnosed?**

The discharge of bacterial vaginosis has a typical alkali pH which can be measured using a sample of vaginal discharge wiped on a piece of specially treated paper. A specimen of discharge may also be added to a chemical called potassium hydroxide which produces the characteristic fishy smell if you have bacterial vaginosis

A sample (swab) of the discharge may also be sent for testing. Large numbers of various bacteria that occur with bacterial vaginosis are seen under the microscope.



Sometimes bacterial vaginosis may be noted on a routine cervical smear test, but you only need treatment if you have problems with the discharge.

### **What are the possible complications with bacterial vaginosis?**

#### *Pregnancy*

If you have untreated bacterial vaginosis during pregnancy, you have an increased risk of early labour, miscarriage, and infection of the uterus (womb) after childbirth. There is, however, no evidence that bacterial vaginosis will affect your chances of getting pregnant.

#### *Surgery*

If you have untreated bacterial vaginosis, the chance of developing an infection of the uterus is higher following certain operations such as a termination of pregnancy or a vaginal hysterectomy. Antibiotics can be given before these operations to prevent this from occurring.

#### *HIV*

If you have untreated bacterial vaginosis, you may have an increased risk of developing HIV infection if you have sex with someone who is infected with HIV.

### **What is the treatment for bacterial vaginosis?**

Oral antibiotics – a course of metronidazole usually clears bacterial vaginosis in about 7 – 8 in 10 cases.

- The usual dose is 400 mg given twice a day for five days. A single dose of 2 grams is an alternative, although this may be less effective and may cause more side-effects.
- Alcohol should be avoided while taking metronidazole, and for at least 48 hours after stopping treatment. This is because the interaction with alcohol can cause vomiting and other problems.
- Breastfeeding: metronidazole can get into breast milk, but is not thought to affect breast fed babies. However, to play safe, the standard lower dose 5-day course is preferred.

#### *Antibiotic cream / gel*

Metronidazole vaginal gel or clindamycin vaginal cream introduced into the vagina can be a topical treatment if the unpleasant side-effects with metronidazole oral tablets are intolerable. However, some vaginal creams can cause weakening of condoms, diaphragms and caps. When using these topical treatments one must not rely on using condoms to protect against pregnancy and sexually transmitted diseases during the treatments and for 5 days after the start of the treatment.

#### *Not treating is an option if you are not pregnant*

For many women the balance of the bacteria in the vagina correct itself and bacterial vaginosis can go away without treatment. However, if you are pregnant you will usually be advised to take antibiotic treatment to prevent the increased risks during pregnancy if you have bacterial vaginosis (described above).



### *Treating recurrences*

Half of women with bacterial vaginosis can get a recurrence of infection within three months. If it does recur, a repeat course of antibiotics will usually be successful. A small number of women have repeated episodes of bacterial vaginosis, and need repeated courses of antibiotics.

### **How can I prevent further episodes of bacterial vaginosis?**

Most episodes of bacterial vaginosis occur for no apparent reason, and cannot be prevented. Maintaining a normal pH balance in the vagina helps to prevent episodes of bacterial vaginosis. One can do this by:

- Avoiding cleaning the vagina with water (douching)
- Not adding detergents, bath oils, bubble bath to bath water

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