PREVENTION

BV is not completely understood by scientists, and the best ways to prevent it are unknown. However, it is known that BV is associated with having a new sex partner or having multiple sex partners.

The following basic prevention steps can help reduce the risk of upsetting the natural balance of bacteria in the vagina and developing BV:

- Be abstinent.
- Limit the number of sex partners.
- Do not douche.
- Use all of the medicine prescribed for treatment of BV, even if the signs and symptoms go away.



Some women with BV don't know they have it because they have no symptoms. Women who have never had sexual intercourse may also be affected by BV, and it is common in pregnant women. Having BV can increase a woman's susceptibility to other STDs. Pregnant women may deliver premature or low birth-weight babies.



SAGINAW COUNTY DEPARTMENT OF PUBLIC HEALTH

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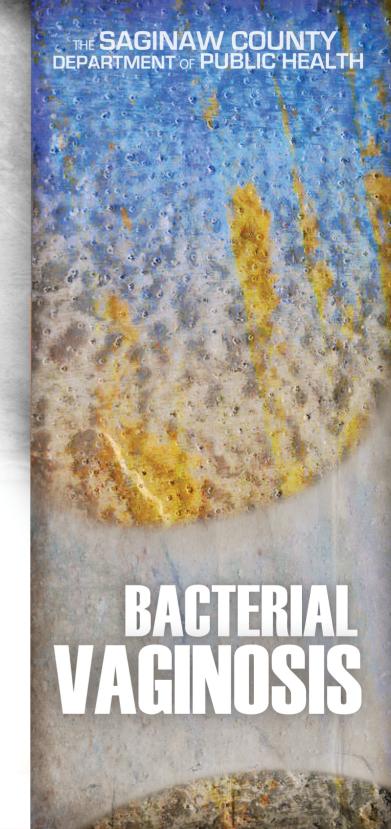
1600 N MICHIGAN AVE. SAGINAW, MI 48602 (989) 758-3800

PERSONAL AND PREVENTIVE HEALTH SERVICES

UNIT 1 (FAMILY PLANNING)

MAIN CLINIC (989) 758-3670 or 758-3676 CHESANING CLINIC (989) 845-3911

UNIT 3 (STD) (989) 758-3880



BACTERIAL VAGINOSIS

Bacterial vaginosis (BV) is the name of a condition in women where the normal balance of bacteria in the vagina is disrupted and replaced by an overgrowth of certain bacteria. It is sometimes accompanied by discharge, odor, pain, itching, or burning. It is the most common vaginal infection in women of childbearing age. In the United States, BV is common in pregnant women.

Not much is known about how women get BV, but any women can. BV is associated with an imbalance in the bacteria that are normally found in a woman's vagina. The vagina normally contains mostly "good" bacteria, and fewer "harmful" bacteria. BV develops when there is an increase in harmful bacteria.

However, some activities or behaviors can upset the normal balance of bacteria in the vagina and put women at increased risk including:

- Having a new sex partner or multiple sex partners
- Douching

It is not clear what role sexual activity plays in the development of BV. Women do not get BV from toilet seats, bedding, swimming pools, or from touching objects around them. Women who have never had sexual intercourse may also be affected.

SYMPTOMS

Women with BV may have an abnormal vaginal discharge with an unpleasant odor. Some women report a strong fish-like odor, especially after intercourse. Discharge, if present, is usually white or gray; it can be thin. Women with BV may also have burning during urination or itching around the outside of the vagina, or both. However, most women with BV report no signs or symptoms at all.

In most cases, BV causes no complications. But there are some serious risks from BV including:

- BV can increase a woman's susceptibility to HIV, herpes simplex virus (HSV), chlamydia, and gonorrhea if exposed.
- BV increases the chances that an HIV-infected woman can pass HIV to her sex partner.
- BV has been associated with an increase in the development of an infection following surgical procedures such as a hysterectomy or an abortion.
- Having BV while pregnant may put a woman at increased risk for some complications of pregnancy, such as preterm delivery or babies with a low birth weight (less than 5.5 pounds).

The bacteria that cause BV can sometimes infect the uterus (womb) and fallopian tubes (tubes that carry eggs from the ovaries to the uterus). This type of infection is called pelvic inflammatory disease (PID). PID can cause infertility or damage the fallopian tubes enough to increase the future risk of ectopic pregnancy and infertility. Ectopic pregnancy is a life-threatening condition in which a fertilized egg grows outside the uterus, usually in a fallopian tube which can rupture.

DIAGNOSIS

A health care provider must examine the vagina for signs of BV and perform laboratory tests on a sample of vaginal fluid to look for bacteria associated with BV.

TREATMENT

Although BV will sometimes clear up without treatment, all women with symptoms of BV should be treated to avoid complications. Male partners generally do not need to be treated. However, BV may spread between female sex partners.

Treatment is especially important for pregnant women. All pregnant women who have ever had a premature delivery or low birth weight baby should be considered for a BV examination, regardless of symptoms, and should be treated if they have BV. All pregnant women who have symptoms of BV should be checked and treated.

Some physicians recommend that all women undergoing a hysterectomy or abortion be treated for BV prior to the procedure, regardless of symptoms, to reduce their risk of developing an infection.

BV is treatable with antibiotics prescribed by a health care provider. Two different antibiotics are recommended as treatment for BV: metronidazole or clindamycin. Either can be used with non-pregnant or pregnant women, but the recommended dosages differ. Women with BV who are HIV-positive should receive the same treatment as those who are HIV-negative.

BV can recur after treatment.