

Breastfeeding and Medication



Bacterial vaginosis and Breastfeeding

Symptoms of bacterial vaginosis

The most common symptom of bacterial vaginosis is unusual vaginal discharge that has a strong fishy smell, particularly after sex. The discharge may be greyish-white and watery. However, 50% of women with bacterial vaginosis do not have any symptoms. Bacterial vaginosis does not usually cause any soreness or itching. Bacterial vaginosis is a common condition. It is not a sexually transmitted disease even though it is more common in sexually active women. Bacterial vaginosis is a type of vaginal inflammation caused by the overgrowth of bacteria naturally found in the vagina, which upsets the natural balance. It is characterized by an overgrowth of predominantly anaerobic organisms and a loss of lactobacilli. The vagina loses its normal acidity, and its pH increases to greater than 4.5 which can be tested with products available from a pharmacy.

Causes of bacterial vaginosis

- sexually activity (but can be diagnosed in women who are not sexually active)
- a change of partner
- presence of a copper IUD (contraception device)
- use of perfumed products in or around your vagina
- Bacterial vaginosis is not a sexually transmitted infection, even though it can be triggered by sex.

It is less common with consistent condom use and where the sexual partner has been circumcised.

Self help

To help relieve symptoms and prevent bacterial vaginosis returning:

- use water and plain soap to wash your genital area
- have showers instead of baths
- do not use perfumed soaps, bubble bath, shampoo or shower gel in the bath
- do not use vaginal deodorants, washes or douches
- do not put antiseptic liquids in the bath
- do not use strong detergents to wash your underwear

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- do not smoke

Treatment of bacterial vaginosis

Bacterial vaginosis is usually treated with antibiotics from a GP or sexual health clinic.

- Oral metronidazole 400 mg twice a day for 5 to 7 days.
- Intravaginal metronidazole 0.75% once a day for 5 days
- Intravaginal clindamycin 2% once a day for 7 days.

All of these treatments are compatible with normal breastfeeding (LactMed, Hale, Jones).

Over the counter products are available to restore the normal vaginal pH (E.g., Canesbalance Bacterial Vaginosis Gel™, Boots BV Gel™, Balance Activ BV Gel™). These treatments will not affect breastfeeding or supply as they only act locally in the vagina.

Recurring bacterial vaginosis

It's common for Bacterial vaginosis to come back, often within 3 months. Treatment for 6 months may be needed if it occurs more than twice in 6 months. It may be possible to identify triggers e.g., sex or menstruation.

References

- Bacterial vaginosis NHS. <https://www.nhs.uk/conditions/bacterial-vaginosis/>
- Hale TW Medications and Mother's Milk – online access
- Jones W Breastfeeding and Medication Routledge 2018
- LactMed <https://www.ncbi.nlm.nih.gov/books/NBK501208/>
- LactMed <https://www.ncbi.nlm.nih.gov/books/NBK501315/>
- NICE Clinical Knowledge Summary <https://cks.nice.org.uk/topics/bacterial-vaginosis/>
- Patient Info Bacterial Vaginosis. <https://patient.info/sexual-health/vaginal-discharge-female-discharge/bacterial-vaginosis#nav-1>

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