

Is there an effective treatment to prevent recurrent vulvovaginal candidiasis?

Clinical Question	How effective and safe are pharmacological and non-pharmacological treatments for recurrent vulvovaginal candidiasis (VVC)?
Bottom Line	<p>At six months, the proportion of women with clinical and mycological recurrences of VVC may be lower in those receiving antifungal drug treatment compared with those receiving placebo or no treatment. At 12 months (following six months active treatment/placebo or no treatment followed by six months observation), the proportion of women with clinical recurrence may be lower in the treatment group compared with the placebo/no treatment group; however, no differences were found in mycological recurrences between the two groups.</p> <p>The evidence is very uncertain if there is a difference in clinical recurrence between oral and topical treatments. This concurs with a previous Cochrane Review, which found no difference in efficacy between oral and topical antifungal treatments.</p> <p>Systemic adverse events were reported more frequently with oral antifungal agents (nausea, vomiting, and diarrhoea) than topical treatments. But overall adverse events were poorly reported.</p>
Caveat	The vast majority of women included in the studies were colonised with <i>Candida albicans</i> (when reported usually >80%). The majority of the included studies explicitly excluded pregnant women and therefore, the conclusions of the review cannot be considered generalisable to women who are pregnant. Diabetes mellitus was also an exclusion criterion in ten of the included studies, limiting any ability to draw conclusions about treatment of recurrent VVC in this group.
Context	It is estimated that uncomplicated vulvovaginal thrush affects up to 75% of women at some time during their reproductive years. Recurrent VVC occurs when a woman has four or more fungal infections during a 12-month period. Up to 5% of women suffer from recurrent VVC. Some doctors advise taking antifungals as a prevention, but there are no clear evidence-based guidelines.
Cochrane Systematic Review	Cooke G, Watson C, Deckx L, Pirotta M, Smith J, van Driel ML. Treatment for recurrent vulvovaginal candidiasis (thrush). Cochrane Database of Systematic Reviews 2022, Issue 1. Art. No.: CD009151. DOI: 10.1002/14651858.CD009151.pub2. This review contains 23 trials with a total of 2212 participants.

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Systematic review link:

<https://www.cochranelibrary.com/cdsr/doi/10.1002/14651858.CD009151.pub2/full>