Recurrent/Chronic Vulvovaginal Candidiasis

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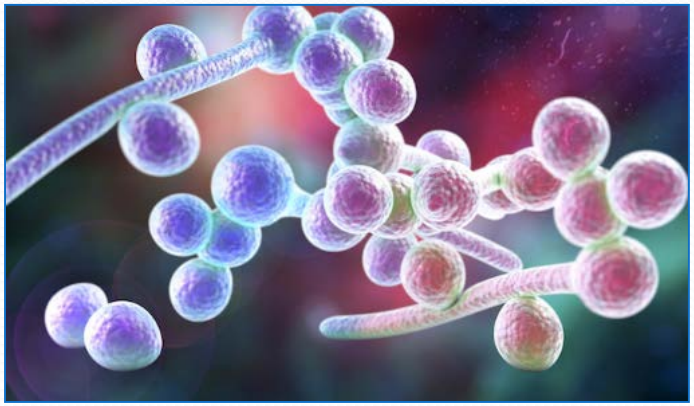
Vulvovaginal Candidiasis

Vulvovaginal candidiasis (VVC) is a vaginal yeast infection with which many women are unfortunately familiar.



- VVC is inflammation of the vulva and vagina due to Candida mycosis.

- Typically, the infecting agent is *C.albicans,* a species that is normally found on the skin and mucous membranes.

Signs and Symptoms of VVC

Familiar signs and symptoms of vulvovaginal candidiasis include:

- ✓ pruritus
- ✓ vaginal soreness
- ✓ dyspareunia
- ✓ external dysuria
- ✓ vulvar edema and erythema
- ✓ abnormal vaginal discharge

❖ An estimated 75% of women have at least one episode of vulvovaginal candidiasis in their lifetime.

Uncomplicated VVC

Most episodes of vulvovaginal candidiasis are uncomplicated.

- The diagnosis is made on the basis of symptoms alone.
- Symptoms are mild to moderate.
- Treatment is quick and successful.
- Treatment usually consists of over-the-counter topical antifungal creams.
- As needed, treatment may also involve a short course of fluconazole, an antifungal drug given orally.

❖ Many cases of uncomplicated VVC are self-diagnosed and self-treated without physician involvement.

Complicated VVC

A smaller but clinically significant subgroup of women develop a more complicated form of vulvovaginal candidiasis.

Complicated vulvovaginal candidiasis can refer to:

- severe disease
- infection in an immune-compromised woman
- infection with a non-*C.albicans* species

❖ Complicated VVC most prominently refers recurrent/chronic vulvovaginal candidiasis (RVVC).

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Recurrent/Chronic VVC

Recurrent vulvovaginal candidiasis (RVVC) is defined as 3-4 or more episodes of symptomatic infection in one year.

- Prevalence of RVVC is estimated at about 5-9% of women.
- The vast majority of women with RVVC develop the infection without having any known risk factors.
- It is felt that a genetic component plays an important role in susceptibility to RVVC.

❖ Women with RVVC form a clinically distant population in terms of treatment, course, and impact.

Treatment for Recurrent/Chronic VVC

Most women with RVVC typically require long-term management with months of treatment for each episode.

- Current treatment for RVVC usually consists of topical anti-fungals or oral fluconazole for 10 to 14 days.
- This is followed by a maintenance regimen of oral fluconazole once a week for at least 6 months
- The regimen controls symptoms for most women, but the relief is often temporary.

❖ RVVC is subject to constant relapse.

Course of Recurrent/Chronic VVC

Many women with RVVC typically endure multiple relapses despite treatment.

- In approximately 50% of women with RVVC, cessation of treatment is followed by another episode.
- Relapse of RVVC usually occurs with three to four months of ending treatment.
- There is evidence that the percentage of women with relapse is even higher over time.

❖ RVVC has a significant impact on the lives of women.

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Impact of Recurrent/Chronic VVC

RVVC is debilitating for women, both physically and in terms of mental health.

- Physical symptoms of RVVC interfere with the normal activities of life, from urinating to sexuality.
- Women with RVVC reported missing an average of about 6 hours of work for each recurrent episode.
- More than two-thirds of women with RVVC report depression and anxiety during recurrent episodes.
- Over half of women with RVVC report anxiety between episodes.

❖ Quality of life is negatively impacted.

Health-Related QOL Issues

Surveyed health-related quality of life is significantly worse for women with RVVC than in the general population.

- Women with RVVC commonly report feeling “dirty” and suspecting sexually transmitted diseases from their partners.
- Overall, women with RVVC ranked it similar to asthma and COPD for its negative impact on their quality of life.
- Overall, women with RVVC ranked it even higher than migraine for its effect on quality of life.

Data Issues

Women with uncomplicated VVC and women with RVVC are different populations.

- The availability of over-the-counter treatment makes it difficult to accurately determine frequency of RVVC.
- Although there are very different health implications for women with RVVC, it is not possible to identify them in the data.
- Without being differentiated in the data, it is difficult to track women with RVVC.

Questions
about
Recurrent/Chronic
Vulvovaginal Candidiasis?