Vaginal Discharge

Vaginitis is a term used to describe an irritation or infection of the vagina. Vaginitis is very common and affects many women at some point in their lives. Although healthy women may normally have vaginal discharge, an unusual discharge with a change in color, consistency or amount; lower abdominal pain, back pain; vaginal bleeding, vaginal or vulvar itching, redness, rash or irritation; or pain or difficulty with urination, should be evaluated by a clinician.

There are many types of vaginitis caused by various organisms. These vaginal infections often have similar symptoms, so it's important to be checked by a clinician and receive the appropriate treatment.

The most common types of vaginitis include a fungal infection called Monilia (mo-ni-1ie-a), a non-specific vaginitis called Bacterial Vaginosis (vag-en-no-sis), and a parasitic infection called Trichomoniasis (Trick-o-mo-ni-a-sis).

The first type of vaginitis, Monilia, is also called Candidiasis or, most commonly, a yeast infection. This fungus is normally present in the mouth, large intestine and vagina; however, at times, the normal amount of yeast will grow out of control for various reasons. Certain conditions, such as changes in the hormonal balance, may make a woman more susceptible to a yeast infection. Some examples of these include pregnancy, birth control pills, or menopause. A woman may also develop an infection by having a low resistance to infection caused by stress, poor nutrition, fatigue, emotional upset, and nervousness. Certain medical conditions, such as diabetes, increase the risk of developing yeast infections. Chemical irritants such as douches and feminine deodorants as well as prescribed antibiotics may cause a woman to be more susceptible to a yeast infection. Some women react to sugary foods by developing yeast infections.

The common symptoms of a yeast infection include a thick, white discharge, itching, and irritation.

To diagnose a yeast infection, a health practitioner will take a sample of the discharge to determine the specific organism causing the infection. Once diagnosed, the practitioner will prescribe a vaginal cream or suppository that is inserted into the vagina with an applicator resembling a tampon. A single dose oral medication may also be prescribed. Some brands of the medication have become available over-the-counter and may not require a prescription. This preparation stops the infection by killing the yeast-like cells (and preventing any further growth). It is essential that all medication be used and the course completed even if it is during the menstrual period.

The second type of vaginitis is Bacterial Vaginosis. For more information on this infection, refer to the Bacterial Vaginosis handout.

A protozoan known as a Trichomonad (Trick-o-moan-ad) causes the third type of vaginal infection, Trichomonas vaginalis or (Trich). Trich is often sexually transmissible through intercourse although this is not always the case. Trichomonads may live for several hours on moist objects at room temperature; therefore, transmission can take place by using a wash cloth or a wet towel of a person carrying the Trich organism.

A symptom associated with Trich is an unusual discharge with an unpleasant odor. After diagnosing Trich by examining a sample of discharge from the genitals, the health practitioner will usually prescribe an oral medication called Flagyl (Fla-jil). People who take Flagyl must avoid drinking alcohol until 48 hours after completing the medication. Since many men and women often have no symptoms, it is important to have all sexual partners treated to prevent infection or further spread of the infection. Having male partners wear a condom during sexual intercourse may also help prevent further infection and transmission.

Although not all vaginal infections are sexually transmissible, it is important to be aware of all sexually transmissible infections called STIs. If a woman notices an unusual discharge, it is important to consider her sexual activity to rule out the possibility of an STI. Being tested for STIs, such as chlamydia or gonorrhea, at an annual gynecological exam is a good way to detect any such infections.
Vomiting and Diarrhea

Most of the time vomiting and diarrhea are caused by "gastroenteritis," an inflammation in the intestines caused by a virus or bacteria. Mild abdominal cramping may also occur.

How should I care for myself when I have vomiting and diarrhea?
The best approach is to put your stomach and intestines at rest.

1. Do not eat or drink fluids for two hours after vomiting.
2. After two hours of resting your stomach, take two ounces of clear liquids each hour for 3 to 4 hours.
3. Then increase to 4 ounces per hour for 3 to 4 hours.
4. If vomiting subsides, continue to gradually increase clear liquids. If still vomiting, return to step 1.
5. Resting as much as possible helps to decrease diarrhea.
6. Avoid smoking.
7. If medication is ordered, take as directed.
8. If vomiting and diarrhea come back, resume your clear liquid diet.

Vomiting and diarrhea may be contagious, so it is important to wash hands well after using the bathroom.

For Diarrhea Only
For diarrhea only, push clear liquids as tolerated at a minimum of 2 to 3 quarts per day. Some examples of clear liquids are as follows:
- Water, ice chips, popsicles (not creamy)
- Flat, carbonated soda
- Weak tea, plain broth
- Kool-Aid, Gatorade
- Jell-O (plain) or Jell-O strained fruit juice (non-citrus only)

When Vomiting Stops
When vomiting stops, and/or diarrhea slows down, begin a bland diet:
- Bananas
- Cooked pasta, rice
- Toast/white bread
- Soft boiled/poached egg
- Plain Ritz crackers
- Applesauce
- Soup with noodles
- Cream of wheat/oatmeal (made with water)

Avoid dairy products and meat for at least 36 hours. Also avoid large meals, coffee, alcohol, fatty, fried, greasy foods (hamburgers, hot dogs, hoagies), highly seasoned or spiced foods (pizza, tomato products), salad dressing, oil, butter, and raw vegetables until you feel better. Follow a bland diet for 1 to 2 days.

Call the student health service if you develop any new prolonged or more severe symptoms of illness:
- Signs of dehydration such as small amounts of dark urine or no urine for 8 hours, no tears, and/or you become very dizzy when you stand up.
- If you are vomiting so much you can't keep anything down for 24 hours.
- Fever lasting 48 to 72 hours or greater than 103 degrees.
- Excessive drowsiness
- Continuing headache or neck stiffness
- Increased stomach pain

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• Diarrhea not getting better in 2 to 3 days
• Bloody vomit or bowel movement (remember that red Kool-Aid or Jell-O can cause red vomit or diarrhea).
• Coffee grounds-appearing vomit or black, tarry stools
• Or when instructed by your clinician

If your need is urgent, and the student health service is closed, go to the nearest hospital emergency department or call 911 for an ambulance.