

Abstract

This study was a descriptive cross-sectional study on vulvovaginal candidiasis (VVC) among women attending the Central STD Clinic in Sri Lanka for the first time.

The objectives were

- (a) To determine the proportion of VVC among female STD patients attending the Central STD Clinic for the first time.
- To compare the signs and symptoms among patients with VVC and other attendees.
- To determine the different species of candida that causes VVC.
- To determine the antifungal susceptibility pattern.

Methodology

Data collection

This study involved 96 participants who visited the Central STD Clinic Colombo from January to March 2007, for the first time. Data was collected by using an interviewer-administered questionnaire and by taking two swabs from the lateral vaginal wall from each attendee during the speculum examination.

Laboratory procedure

From one swab, wet mount was prepared using 10% KOH and other swab was used for culture. Isolates from women who were symptomatic with heavy growth or moderate growth in the culture were processed further. Speciation

test. Antifungal susceptibility was done using the standard agar diffusion method developed by using Neo-sensitab antifungals and modified Shadomy agar.

Data analysis

Data analysis was done manually.

Results

The proportion of VVC among women attending the central STD clinic for the first time was 8.33%, (8/96). None of these patients had concurrent STIs.

Symptoms of VVC can be similar to the presenting complaints of an array of STIs & some non venereal diseases.

Signs of VVC can be seen in other STIs and also in normal women without any STI.

Seventy five percent of the isolates were *Candida albicans* while 25% were *Candida tropicalis*. All *Candida albicans* isolates and the two *Candida tropicalis* isolates were sensitive to Fluconazole, Itraconazole, Clotrimazole & Nystatin. One *Candida albicans* isolate was intermediately sensitive to Miconazole and was resistant to Econazole. Of the *Candida tropicalis* isolates one was intermediately sensitive to Miconazole & resistant to Econazole, while the other was resistant only to Econazole.