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Vaginal Discharge (Female Discharge)

Vaginal discharge is a common occurrence in most women. Most of the time it is of no significance but if it is persistent or causes discomfort it needs further investigation and treatment. Common causes of abnormal discharge are given below.

What are the common causes of vaginal discharge?

Physiological

This refers to the changes in your discharge associated with your normal monthly period (menstrual cycle). After you have produced an egg (around day 14), you may notice that you seem to have a lot more mucus in your vagina. This usually continues until your period starts. This is normal and is caused by the hormones in your body. This type of discharge is usually clear and has no nasty smell.

Similarly, when you are pregnant, you have a lot of this same hormone in your body. Many women notice they have a heavy normal discharge during pregnancy. Some contraceptives with hormones in them can make your discharge heavier too.

Some women are aware that they get a discharge for a day or two after sex. If the man 'comes' (ejaculates) inside the vagina, most of his semen will leave the vagina as a vaginal discharge unless he used a condom. There will also be fluid that the glands of the vagina make during sex.

In small baby girls, discharge (and sometimes bleeding) can be caused by the effect of their mothers' hormones. This only occurs in newborn babies, as the hormones affect the baby whilst they are in the womb (uterus).

Foreign body

This is anything in the vagina that isn't normally there. Young children sometimes put small toys there and then can't get them out. In women the most common foreign body is a forgotten tampon.

Non-sexually transmitted infections

These are types of discharge that are caused by infections. Neither is transmitted during sex.

"We are just mammals, so of course we have a scent that will partly come from our genitals. But vaginal odours are not meant to be unpleasant. If your discharge has a fishy or pungent smell, there is nearly always something wrong."

Source: Dr Karen Morton (https://patient.info/health/vaginal-discharge-female-discharge/features/vaginal-odours-to-be-aware-of)

- Bacterial vaginosis (BV): this is a common cause and makes a discharge, often with a noticeable fishy smell that may be worse after sex or after a period. BV is NOT a sexually transmitted infection (STI). It is caused by an overgrowth of normal germs (bacteria) in the vagina. Symptoms are often mild and BV may clear without treatment. Other cases can be treated with antibiotics. See separate leaflet called Bacterial Vaginosis for more details.
- Thrush (candida): this is the second most common cause of a vaginal discharge. (The most common cause of vaginal discharge is BV above.) The discharge from thrush is usually creamy white and quite thick but is sometimes watery. It can cause itch, redness, discomfort or pain around the outside of the vagina. The discharge from thrush does not usually smell. Some women can have some pain or discomfort whilst having sex or whilst passing urine if they have thrush. See separate leaflet called Vaginal Thrush (Yeast Infection) for more details.

Sexually transmitted infections

Symptoms of STIs can vary. The following are possible symptoms to look out for:

- · Vaginal discharge.
- Abnormal vaginal bleeding.
- A sore, ulcer, rash, or lump that appears around the vagina, vulva or anus.
- Pain when you have sex or pain when you pass urine.

The most common infections causing vaginal discharge are chlamydia, gonorrhoea and trichomonas. See separate leaflet called Sexually Transmitted Infections for more details.

Other rare causes of discharge

Sometimes polyps on the neck of the womb (cervix) can cause a discharge. A polyp is a small fleshy lump. They can usually be seen when your doctor or nurse examines you. They are easily removed (this may need to be done in hospital) and are very rarely cancerous. Sometimes the covering of the neck of the womb changes and becomes more fragile and produces more discharge. This is called ectopy (or ectropion). It is not serious and often doesn't need any treatment. See separate leaflet called Common Problems of the Cervix for more details.

Some cancers such as cancer of the womb and cancer of the cervix can also cause a discharge. There are usually other symptoms and it would be very unusual to have discharge as the main symptom of these cancers.

Some skin conditions such as dermatitis and lichen planus can also cause a vaginal discharge. They also have other symptoms with them. The most common is itch. Your doctor may examine you to reassure you about these rarer causes.

What should I do if I have a vaginal discharge?

You should see a doctor, especially if a discharge you have had for some time changes. Here are the features that suggest you need medical advice:

- A change in the colour of the discharge for example, yellow, green grey, pink or blood-stained.
- A funny odour like fish or rotten meat.
- Noticing an increase in the amount of discharge.
- Your discharge may change consistency and become thick or lumpy like cottage cheese.
- Noticing other symptoms such as itching or soreness around the opening of the vagina, pain when you empty your bladder, pelvic pain, and spots of blood between periods or after sex.

The doctor may ask how long you have had the discharge and whether you have noticed any of the changes listed above. Because a vaginal discharge may be a symptom of an STI, they may ask about contraception and if you use condoms. Condom use is protective against STIs.

The doctor may have a good idea of what is wrong just by talking to you, particularly if you have never been sexually active. Otherwise they may ask to examine you. You are entitled to ask for a chaperone whilst you are being examined - even if it is a female doctor. They will ask you to remove your clothing from the waist down. If you wear a loose skirt, you may only need to remove your knickers. You will be asked to lie on your back on the examination couch. They may examine you with two fingers inside your vagina. This can tell them whether your womb, ovaries or Fallopain tubes are tender.

Sometimes the doctor may also use an instrument called a speculum. This goes into your vagina. This gently opens the vagina and allows the cervix to be seen (at the top of the vagina). They will be able to see any discharge and take a sample with a swab. This can be sent to the laboratory to tell them if any infection has caused the discharge. They will also be able to see any sore areas or polyps on the neck of the womb.

If you have been sexually active the doctor may offer you a full STI screen which involves blood tests as well as swabs. Your sexual partner(s) may also need to be tested.

When the doctor has all the results, they will discuss with you whether you need any more investigations such as an ultrasound scan, or whether you need to see a specialist - a gynaecologist.

Sometimes, reassurance may be enough.

What is the treatment for vaginal discharge?

The treatment of the vaginal discharge will depend on the cause.

Non-sexually transmitted infections

- Bacterial vaginosis (BV) you may be prescribed antibiotics called metronidazole or clindamycin in the form of pessaries, gel or cream (which are inserted into the vagina) or tablets taken by mouth . See separate leaflet called Bacterial Vaginosis for treatment details.
- Thrush (candida) this is usually treated with pessaries or creams contaning clotrimazole, econazole, miconazole or fenticonazole. See separate leaflet called Vaginal Thrush (Yeast Infection) for treatment details.

Sexually transmitted infections

STIs which cause a discharge include:

- Trichomonas.
- · Genital chlamydia.
- Gonorrhoea.
- Genital herpes.

For more information, including treatment, on these and other STIs, see separate leaflet called Sexually Transmitted Infections.

Foreign body

This can usually be removed by the doctor at the time you are being examined. Small objects (such as a broken piece of condom) may need to be flushed out. If you have a large object which would cause discomfort when it was removed, you may need sedation or a light anaesthetic during removal. This would entail staying in hospital for a few hours. You might need an antibiotic afterwards to prevent infection.

Rarer causes

Cervical polyp - this can be removed by your GP or a specialist.

Cervical ectropion - this can be treated by burning with a cautery under local anaesthetic (cauterisation).

See separate leaflet called Common Problems of the Cervix.

Further reading & references

- Vaginal discharge; NICE CKS, May 2013 (UK access only)
- Management of bacterial vaginosis; British Association for Sexual Health and HIV (May 2012)
- Management of Vaginal Discharge in Non-Genitourinary Medicine Settings; Faculty of Sexual and Reproductive Healthcare (Feb 2012)
- Bacterial vaginosis; NICE CKS, July 2014 (UK access only)
- Management of trichomonas vaginalis; British Asociation of Sexual Health and HIV (Feb 2014)
- Gonorrhoea; NICE CKS, May 2017 (UK access only)

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Author: Dr Laurence Knott	Peer Reviewer: Dr John Cox	
Document ID:	Last Checked:	Next Review:
13914 (v5)	29/09/2017	28/09/2020

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