

Trichomoniasis

What is trichomoniasis?

Trichomoniasis — “trich” for short — is an infection that is most common in sexually active women age 16 to 35. (Men can have trich, too, but usually have fewer symptoms and often don’t need treatment to clear up the infection.)

If you have trich, you need medication to stop your symptoms and prevent spreading the infection to sex partners. This handout gives you basic information on trichomoniasis, how it’s treated, and what you can do to prevent it.

What causes it?

Trichomoniasis is caused by a parasite, a tiny organism called *Trichomonas vaginalis*. Trich is passed from one person to another through sexual contact. Trich is one of the most common sexually transmitted infections or diseases (STIs or STDs) among young, sexually active women. Recent studies suggest that more than 2 million women in the U.S. currently have trichomoniasis.

Why is it a concern?

Trich is completely curable, but you shouldn’t ignore it. Trich can cause annoying and painful symptoms (see the list at right) and may make it easier to catch another STI such as HIV, the virus that causes AIDS.

If you’re pregnant, trich brings these additional risks:

- Your baby may be born too soon
- Your baby may be small at birth (low birth weight)
- Your baby may catch the trich infection from you during delivery

Also, as long as you have trich, you can pass it to sex partners. This is true even if you don’t have symptoms. An infection can last for months or even years.



Most common in young women, trichomoniasis is a curable infection.

What are the symptoms?

A woman with trichomoniasis may have one or more of these common symptoms, which may come and go:

- **Vaginal discharge.** The discharge may be gray, yellow, or green. It may be thin or foamy and may smell bad.
- **Itching, redness, soreness.** Your genitals or inner thighs may itch, look red (inflamed), or feel sore. Some women describe it as a burning feeling.
- **Pain.** You may feel pain when you urinate. Some women also have pain during sex or an ache in their lower abdomen.

Keep in mind that some women have very mild symptoms, or no symptoms at all. Symptoms can show up 5 to 28 days after you are first infected.

How is it diagnosed?

To diagnose trichomoniasis, your healthcare provider will ask questions about your symptoms and do a pelvic exam. During the pelvic exam, your provider may see small red sores on your vagina or cervix caused by trich infection. Your provider may swab the inside of your vagina to get a sample of the fluid there and then look at the sample under a microscope or send it to a lab. Lab testing can confirm the diagnosis.

How is trichomoniasis treated?

Trich is usually treated with one of the following antibiotic medications:

- Metronidazole (brand name: Flagyl)
- Tinidazole (brand name: Tindamax)

Both of these antibiotics come in a pill that you take by mouth — usually only one dose is needed.

If you're allergic to these medications, your provider may prescribe a different antibiotic that comes in a cream or gel. Since the cream and gel medications tend to not work as well as the pills, you may need to be tested and treated again.

After taking an antibiotic, it takes about 10 days to clear the infection. During this time, you should not have unprotected sex with anyone because you can still spread the infection. Your partner may also need to be treated.

How can it be prevented?

Abstinence — not having sex — is the only guaranteed way to prevent trichomoniasis and other sexually transmitted infections. However, you can lower your chance of getting and spreading trich and other STIs by doing the following:

- Always use a condom (practice “protected sex”). Used correctly and consistently, condoms help prevent both pregnancy and STIs.
- Limit your sex partners to one person who you know does not have trich or any other STI.

Remember that you can get trich more than once. If you notice symptoms after treatment, see your provider again to get your symptoms checked out.

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