

GENITAL TRACT INFECTIONS

Trichomoniasis

If possible, referral to an integrated sexual health centre is essential for follow-up and contact tracing before antibiotics are given.

Treat partners simultaneously. Advise sexual abstinence for at least one week and until the person and partner(s) have completed treatment and follow-up.

Full screening for STIs is highly recommended, as up to 30% of patients have a concomitant infection.

The most common symptoms include:

- vaginal discharge – varying in consistency from thin and scanty to profuse and thick
- vulval itching, dysuria, or offensive odour – vulvitis and vaginitis are associated with trichomoniasis
- occasionally, lower abdominal discomfort or vulval ulceration
- approximately 2% of patients will have a strawberry cervix appearance

In pregnancy or breastfeeding, avoid 2g single dose metronidazole.

Medication	Dose	Duration of Treatment
Metronidazole <i>(Seek advice from an Integrated Sexual Health Service specialist if the person has a confirmed metronidazole allergy)</i>	400 mg twice a day Or 2g as a single dose	7 days Single dose

- **Offer written information on trichomoniasis as an STI**, including information on possible complications and measures to reduce the risk of further STIs. Patient information is available from:
 - The Family Planning Association (FPA): [Trichomonas vaginalis. Looking after your sexual health.](#)
 - The NHS website: [Trichomoniasis.](#)
 - The British Association for Sexual Health and HIV (BASHH) '[Trichomonas Vaginalis](#)'.

Version Control- Trichomoniasis			
Version	Author(s)	Date	Changes
V2.0	Shary Walker, Interface and Formulary Pharmacist	28/10/22	1. Added advice on sexual abstinence and patient information leaflet links. 2. Clinical features: British Association for Sexual Health and HIV (BASHH) United Kingdom national guideline on the management of Trichomonas vaginalis 2021 (bashhguidelines.org) 3. The abbreviations are written in full words.