



Chronic Yeast Infections

What are “chronic yeast” infections?

Chronic vaginal yeast infections are defined as yeast infections occurring four or more times a year. The diagnosis can be confirmed by seeing yeast on a wet prep (microscope) of the vagina, or by growing yeast on a culture.

What are risk factors for chronic recurrent yeast infections?

Uncontrolled diabetes and abnormal glucose tolerance or insulin resistance are risk factors for recurrent yeast infections. Chronic antibiotic therapy can also be a risk factor for recurrent yeast infections. Non-albicans species of yeast are typically resistant to fluconazole and over-the-counter yeast preparations. In addition, the misdiagnosis of other vulvovaginal disorders as “yeast” based upon symptoms is a common cause for the presentation of “chronic yeast”.

Irritant vaginitis may mimic the symptoms of vaginal yeast infections (i.e., vaginal burning and discharge). Often the preservatives in many vaginal preparations (i.e., Monistat) can be irritating.

What does the term “resistant” mean?

Resistance refers to yeast’s response to fluconazole (Diflucan), an often-prescribed oral yeast medication. If the identified yeast is unaffected by fluconazole it is termed “resistant”.

Are resistant yeast strains a common cause of recurrent yeast Infections?

Yes. The most common non-albicans yeast responsible for recurrent yeast infections is called candida glabrata. This yeast strain is commonly missed on wet preps as it is small and does not branch like candida albicans and can be difficult to culture.

Are there recommended treatments for recurrent yeast?

Yes. Treatment recommendations are made based upon confirmatory identification of the species of yeast. Successful treatment is achieved once the proper diagnosis is made and the appropriate medicines have been prescribed.