

Oral vs Local Antifungal Treatment of Yeast Infection: Comparison of time to symptomatic relief

Phillips N, Bachmann G

INTRODUCTION:

To measure and compare the time of onset of symptomatic relief (the relief of vulvovaginal itching, burning, or irritation) in women with vaginal yeast infections who had either used a local vaginal antifungal preparation (LVA) or systemic oral antifungal (SOA).

METHODS:

This is a randomized, double parallel-group study. Subjects presenting with symptoms of vulvovaginal itching, burning, or irritation, who were diagnosed with vulvovaginal candidiasis by positive 10% KOH wet preparation, were treated with either LVA (1200 mg miconazole nitrate ovule insert and 2% miconazole nitrate external vulvar cream) or SOA (150mg of fluconazole.) First recorded time of symptom relief was summarized both separately by itching, burning, or irritation, and for all symptoms combined based on change in total symptom scores.

RESULTS:

The median time to initial relief of symptoms of itching, burning, and irritation for the LVA vs. SOA treatment group was 1.0 hour vs. 4.0 hours for individual symptoms and 4.0 hours vs. 16.0 hours for all the symptoms combined, respectively.

For overall symptom relief, statistical significance was achieved between treatment groups for the time points 20 minutes, 40 minutes, 1, 2, and 4 hours with p values of 0.0035, 0.0163, 0.0015, 0.0062 and 0.0315, respectively. Greater than 72 hours post dose were not statistically significant.

CONCLUSION:

The local vaginal antifungal preparation system provided faster median times for initial relief of the VVC symptoms of itching, burning, and irritation individually, and for all symptoms combined than the systemic oral antifungal approach.

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