

Agents of Female Genital Infections

In women, a urethral infection usually coincides with a bladder infection. We independently monitor infections of the vulva, vagina and cervix, uterus, ovaries and fallopian tubes.

Vulvovaginitis

- Itching, burning, discharge;
- previously the disease was classified according to the findings in the VMI (Vaginal Microbial Image), today more according to aetiology.

Viral Vaginitis

- **Herpes genitalis, HSV-2, HSV-1;**
- blisters on the genitals, later pustules;
- unpleasant benign disease, dangerous in pregnancy;
- **dg:** clinical signs, virus culture, PCR;
- **therapy:** aciclovir.

Bacterial Vaginitis

- Common disease, consequence of **vaginal dysmicrobia**;
- reduction of the amount of lactobacilli in vaginal secretion, overgrowth of other bacteria, especially anaerobes (bacteroids, eptostreptococci, fusobacteria);
- *Gardnerella vaginalis*, *Mobiluncus*;
- **dg: Amsel's criteria** - typical discharge, positive amine test (fish odor), microbiological examination of discharge - finding altered epithelia covered with bacteria, vaginal pH > 4.5;
- **therapy:** metronidazole; untreated vaginitis can result in pelvic inflammation.

Aerobic vaginitis - dysmicrobia, aerobic species predominate, especially *E. coli*, enterobacteria, candidas.

Lactobacillosis - pathogenic strains of lactobacilli.

Vulvovaginal candidiasis - predisposition: decompensated DM, immune disorders, corticosteroids, ATB treatment.

Trichomoniasis

- ***Trichomonas vaginalis*;**
- foaming, yellow-green **discharge**;
- **dg:** vaginal pH, amine test, detection of trichomonas Ag in secretion (ELISA), therapy is necessary even for sexual partners.

Cervicitis

- ***N. gonorrhoeae*, *Chlamydia trachomatis*, HSV, HPV** and others;
- **dg:** gonococcus - culture, chlamydia - direct diagnostics (chlamydial Ag - ELISA, immunofluorescence methods, PCR).

Uterus infection

- Mostly as a result of abortion, childbirth, instrumentation;
- begins as endometritis, further affects the myometrium, parametrium to the small pelvis, sepsis;
- pyogenic bacteria, often nosocomial strains (*S. pyogenes*, *S. agalactiae*, *S. aureus*);
- **therapy:** ATB, pus drainage.

Pelvic inflammatory disease

- *Chlamydia trachomatis*, *E. coli*, bacteroids, peptostreptococci, anaerobic bacteria, *Haemophilus influenzae*, aerobic streptococci, *Mycoplasma hominis*, *Ureaplasma urealyticum*, *N. gonorrhoeae*, *Actinomyces israeli*;
- usually more pathogens, identification of the primary agent is problematic;
- **dg:** USG, fluid puncture (microbiological examination).

Links

References

- BENEŠ, Jiří, et al. *Infectious medicine*. 1. edition. Galen, 2009. 651 pp. ISBN 978-80-7262-644-1.