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What is the treatment for thrush?

Thrush is a common infection. It's caused by an infection with a type of yeast - which are also types of fungus - called *Candida*. Thrush can affect the mouth, the vagina and vulva, the penis, and other skin areas. In people with serious immune system problems - such as AIDS - *Candida* can cause serious infections of other parts of the body.

Thrush treatments come as tablets, creams, gels, and pessaries - tablets that go into the vagina. They contain antifungals that treat the yeast infection. The exact type used depends on which body part is affected, whether that's the genital area, mouth, or other skin areas. There are also other things that can be done to help treat thrush or treat symptoms, depending on where the infection is.

In this series of articles centred around thrush you can read about thrush causes, treatment for thrush, and symptoms of thrush – all written by one of our expert GPs.

The rest of this feature will take an in-depth look at the treatment of thrush, as, at Patient, we know our readers sometimes want to have a deep dive into certain topics.

Thrush treatment

Thrush is treated with antifungal medication. The type of medication depends on where in the body the infection is.

Oral thrush treatment

Oral (mouth) thrush can be treated in the following ways:

- Miconazole (Daktarin) gel can be used inside the mouth. It can be used in adults and children however, it's not available over the counter for babies under the age of 4 months. This is because of a risk of choking if too much gel is applied. It can still be used under direction of a healthcare professional in young babies, but it's very important to apply small amounts of the gel carefully with a clean fingertip around the mouth, avoiding the back of the throat.
- Nystatin comes as a liquid that is swirled around the mouth and then swallowed. It can be used in adults and children who are old enough to follow those directions.
- For breastfed babies with oral thrush, it's usually recommended to treat the breastfeeding mum as well, because thrush can live on the nipples and re-infect the baby each time they feed. Miconazole cream is often used for this - a small amount is applied to the nipples after each feed. Miconazole gel should not be applied to nipples, because it poses a risk of choking in the baby.
- An antifungal tablet, usually fluconazole, can be used if the infection is severe or if miconazole or nystatin haven't worked. It's also used as an initial treatment in people with severely weakened immune systems.
- Good oral hygiene is important including brushing teeth twice a day, flossing, and avoiding or stopping smoking.
- If oral thrush occurs due to denture use, the dentures can be cleaned by soaking them overnight in a disinfectant, such as chlorhexidine.
 Taking dentures out for at least 6 hours a day can help the mouth heal. If dentures don't fit properly, they can make thrush worse - see a dentist if this is the case to get them re-fitted.

Vaginal thrush treatment

Thrush can affect the vagina - which causes a white vaginal discharge often like cottage cheese - the vulva, causing redness, itching and irritation or both (vulvovaginitis).

The main treatments for vaginal thrush are:

- Either a single dose of a fluconazole capsule by mouth (such as Canesten Oral Capsule) or a one-off clotrimazole pessary (such as Canesten Thrush Pessary) are effective first treatments. Oral capsule taken by mouth - treatment is probably slightly more effective. Women with severe thrush might be advised to take one capsule of fluconazole once, and then a second capsule three days later.
 - Antifungal capsules or tablets taken by mouth should not be used in pregnancy - see Thrush treatment in pregnancy, which follows.
- For vulval thrush, antifungal creams like clotrimazole cream (such as Canesten Cream) can be useful to treat the skin of the vulva. These can be used alongside fluconazole capsules or clotrimazole pessaries - the oral capsules and pessaries are better at treating thrush inside the vagina.
- Sometimes, a doctor or nurse might recommend a cream that contains an antifungal and a mild steroid (such as Canesten HC) if there is a lot of skin inflammation and irritation. The addition of a mild steroid can help soothe symptoms a little quicker.

All of these treatments can be bought without prescription from a pharmacy.

Antifungal creams for thrush can damage condoms and diaphragms. It's best to avoid having sex during thrush treatment - for many people, it's too uncomfortable anyway - but if you do, you should use alternative contraception whilst using the creams.

There are other antifungal medicines that might be offered instead, depending on what's available, such as miconazole cream, econazole, miconazole, and fenticonazole pessaries, and itraconazole capsules by mouth.

Because thrush can develop due to an imbalance of good bacteria, some people have suggested using probiotics or yoghurt to treat and prevent it. There isn't good evidence to show that this actually works, so it's generally not recommended. Applying sugar-containing yoghurts to the vagina can make thrush symptoms worse.

Some women get repeated (recurrent) thrush episodes. They might be offered long-term antifungal treatment to keep thrush at bay. For example, three doses of oral fluconazole - one every three days - can be used to clear the initial infection, and then one dose, taken once a week, for six months to try and prevent thrush coming back.

Thrush isn't considered a sexually transmitted infection. Sexual partners of people with thrush don't need treatment, unless they have thrush symptoms themselves.

Other measures can help to control symptoms of thrush, such as:

- Using a vulva-friendly gentle moisturiser to wash with, which helps to moisturise the vulva and prevent further irritation or damage.
- Avoiding harsh soaps, shampoos, bubble-baths, and shower gels.
- Avoiding vaginal douching.
- Avoid wearing tight-fitting clothing, which might irritate the vulval area more.

Thrush treatment for men

Thrush is one of the causes of balanitis (inflammation/infection of the head of the penis) and balanoposthitis (inflammation/infection of the head of the penis and the foreskin). Treatments for balanitis or balanoposthitis that's due to thrush include:

- An antifungal cream, such as clotrimazole or miconazole. Sometimes this is given alongside a mild steroid cream (hydrocortisone) or in combination with a mild steroid (such as Canesten HC). Adding a steroid can help soothe inflammation on the skin.
- A one-off dose of an antifungal capsule (such as fluconazole) in adults.
- Hygiene is important. Cleaning under the foreskin gently with warm water, and drying the area carefully, is helpful. Using a moisturiser instead of soap can help to soothe the skin. If the foreskin doesn't fully retract - common in young boys - don't try to force it back to clean it, as this can cause injury.

As thrush isn't considered to be a sexually-transmitted infection, treatment of sexual partners isn't needed unless they have symptoms of thrush. However, for men who have lots of episodes of penile thrush, and a regular female sexual partner, it's sometimes recommended to test and treat their partner for thrush. It's thought that, if their partner carries thrush in the vagina, this could be re-infecting them after treatment. This only applies to the small number of men who get recurrent penile thrush, though.

Thrush treatment in pregnancy

Vaginal and vulval thrush is quite common in pregnancy. Treatment for thrush in pregnancy involves:

- A clotrimazole pessary. This can be a one- off treatment but often a longer course is needed in pregnant women. It can be used for up to seven nights in a row. Using the pessaries for longer is more likely to cure the infection in pregnant women. Other similar drugs include econazole pessaries and miconazole vaginal capsules.
- An antifungal cream to treat symptoms of vulval thrush, such as clotrimazole or miconazole cream.
- Other hygiene measures as discussed above.

Using antifungal creams and pessaries is considered safe in pregnancy.

Oral treatments - tablets taken by mouth - are **avoided** in pregnancy. There is some evidence that oral fluconazole might be linked with an increase risk of miscarriage, and might lead to a slightly higher risk of a rare heart defect in unborn babies if used during pregnancy. As a precaution, oral antifungal medications are usually avoided unless thrush symptoms haven't responded to other, safer treatments. If these are needed, they would usually be given by a specialist.

Thrush skin infection treatment

Skin infections caused by thrush (Candida) can be treated with:

 Antifungal creams (miconazole, clotrimazole, econazole, terbinafine), sometimes in combination with a mild steroid like hydrocortisone (such as Canesten HC, Daktacort).

- Oral antifungal medication (such as fluconazole or itraconazole) if the infection is widespread, other treatments haven't worked, or the person with the infection has a severely weakened immune system.
- Doing things to help to prevent the infection coming back, such as:
 - Avoiding wearing tight clothing and non-breathable fabrics, which can trap moisture on the skin - making ideal conditions for Candida to grow in.
 - Washing the skin regularly with a moisturiser soap can dry out or irritate the skin too much - and ensuring that the skin is dried properly, including in the skin folds. Unscented talcs can help dry areas such as under breasts or in the groin creases.
 - If overweight or obese, weight loss can help.

Can thrush go away without treatment?

Thrush usually does go away eventually, even without treatment. A mild yeast infection might disappear within a week without treatment. Some people might experience symptoms for longer, particularly if they have a weakened immune system.

It's a good idea to get treatment if the symptoms are bothering you, as treatment is effective at shortening the infection.

Complications of thrush

It's unlikely for thrush to cause serious health problems. The main problem with thrush is that the symptoms can be irritating, distressing, and sometimes embarrassing.

It's also possible that thrush symptoms are due to something else, like a sexually transmitted infection. It's important to speak to a doctor - your GP, or a sexual health clinic - to get the thrush diagnosed if you're unsure, or if your symptoms haven't got better with thrush treatment. They might recommend tests like a swab (a larger cotton bud) to look for other infections.

Some people get repeated episodes of thrush (recurrent thrush). This can be treated.

Candida can spread around the body and cause a serious, and sometimes life-threatening infection. It's very unlikely for this to happen because of a thrush infection, though. This usually only happens in people with severely weakened immune systems, such as people with HIV/AIDS or on chemotherapy, or who are already seriously unwell for another reason, such as people in intensive care.

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