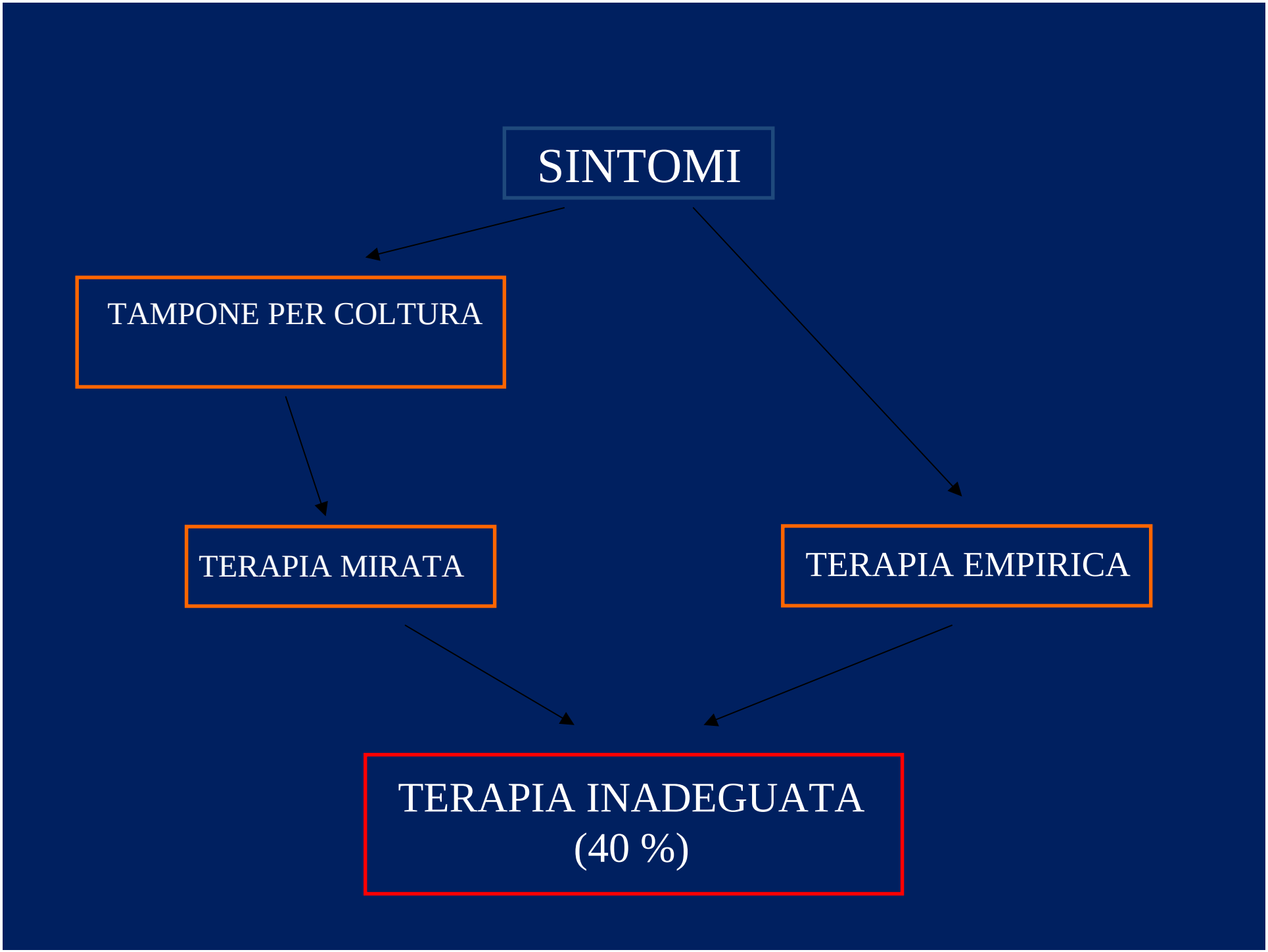
Vulvovaginiti: Diagnosi e trattamento

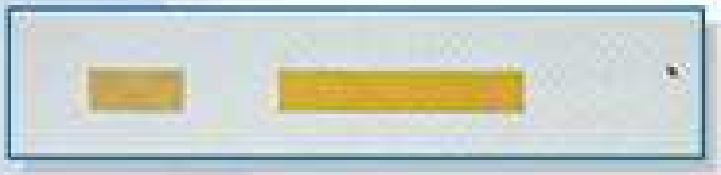
Fiascherino, 5 maggio 2017

Secondo Guaschino

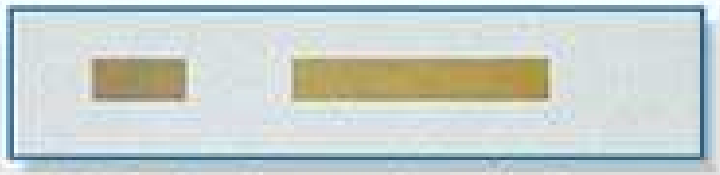

SINTOMI
TAMPONE PER COLTURA
TERAPIA MIRATA
TERAPIA EMPIRICA
TERAPIA INADEGUATA
(40 %)

Vulvovaginal symptoms
first-line approach

- pH measurement
- Whiff amine test
- Microscopy
- Culture



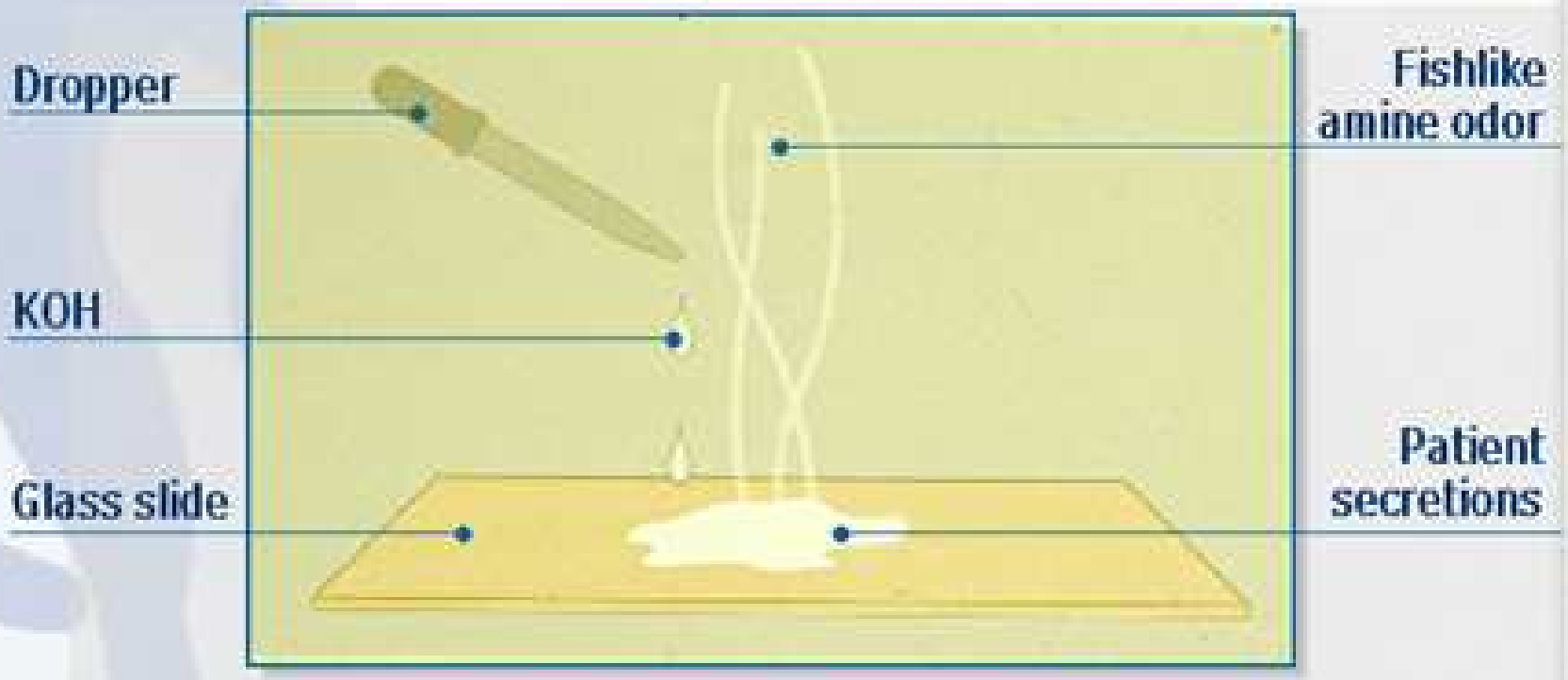
pH test of normal vaginal secretions



pH test of normal vaginal secretions from a patient with bacterial vaginosis

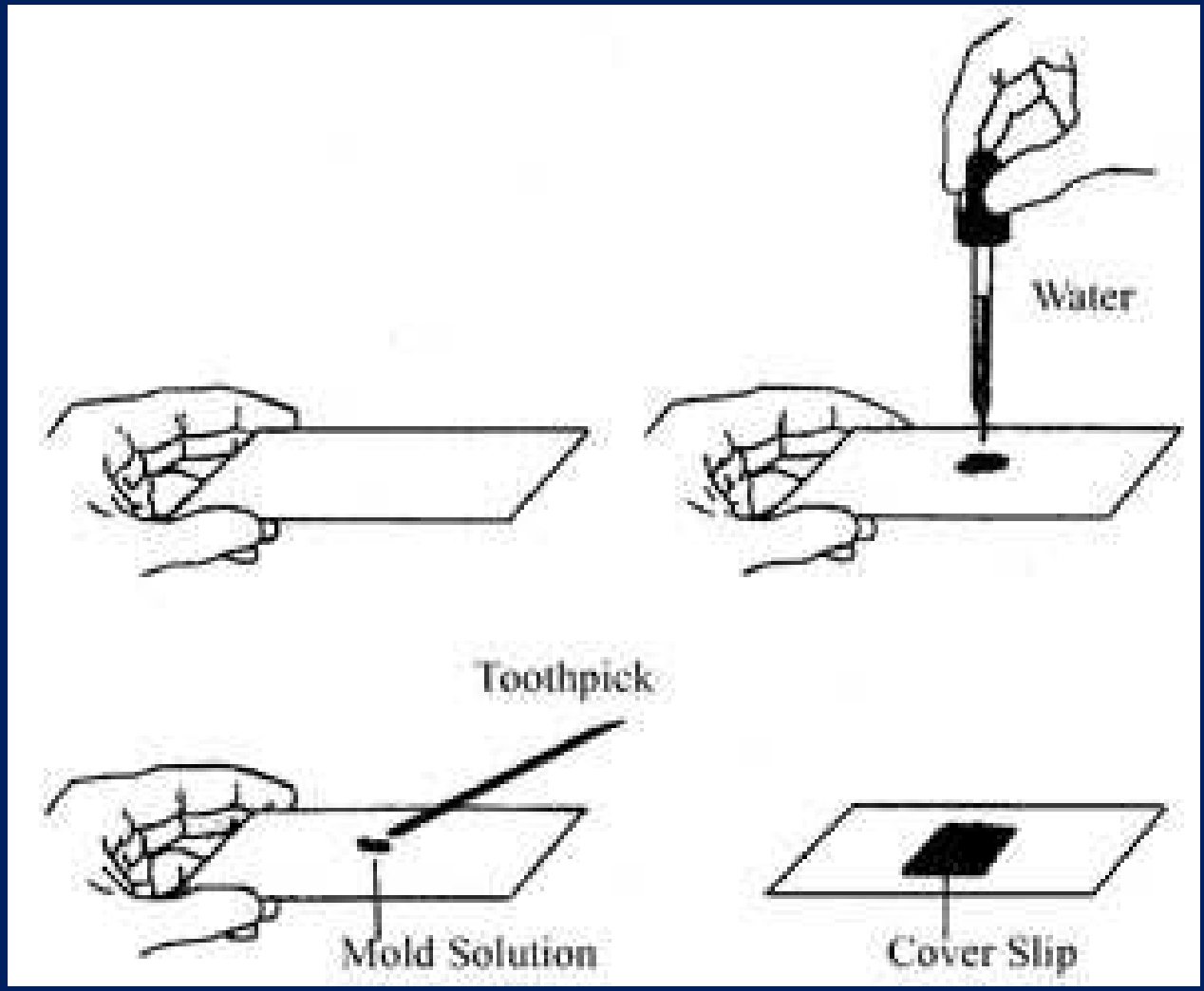
pH scale

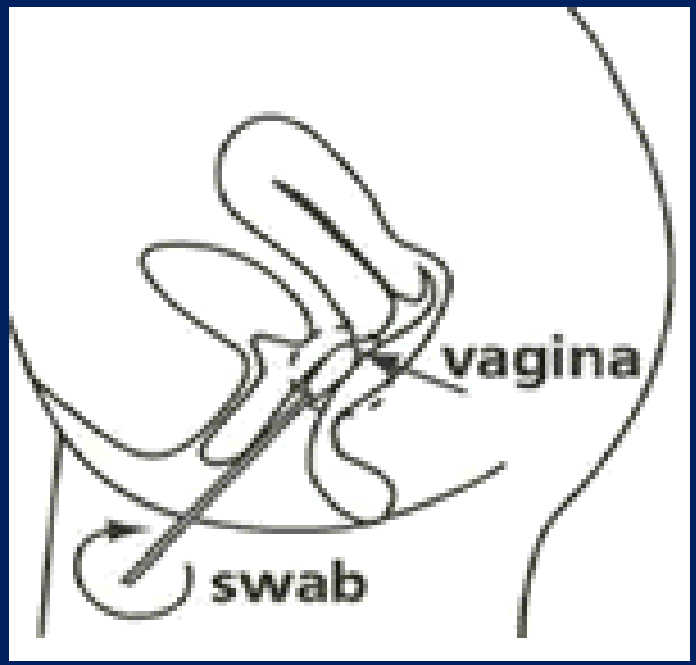
PROGETTO SAPERE DONNA



PROGETTO SAPERE DONNA

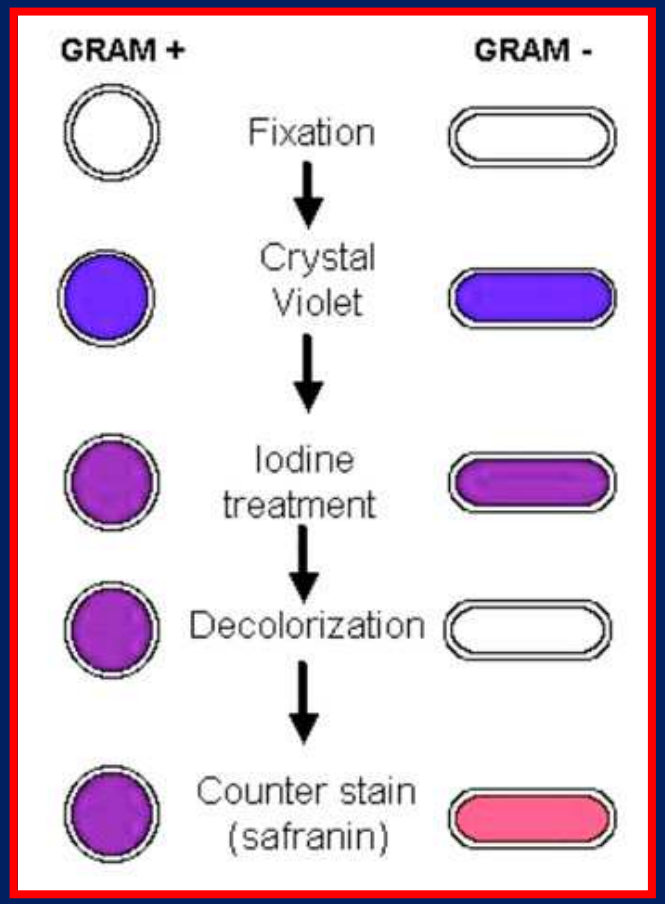
Vetrino a fresco




vagina
swab

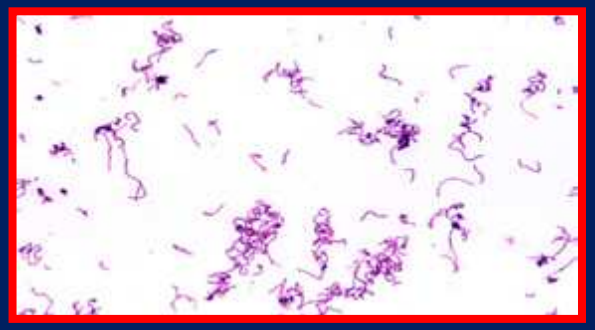
Colorazione di Gram

- Fasi della colorazione

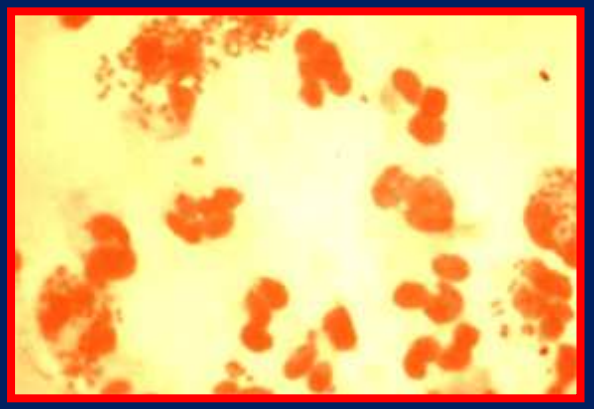


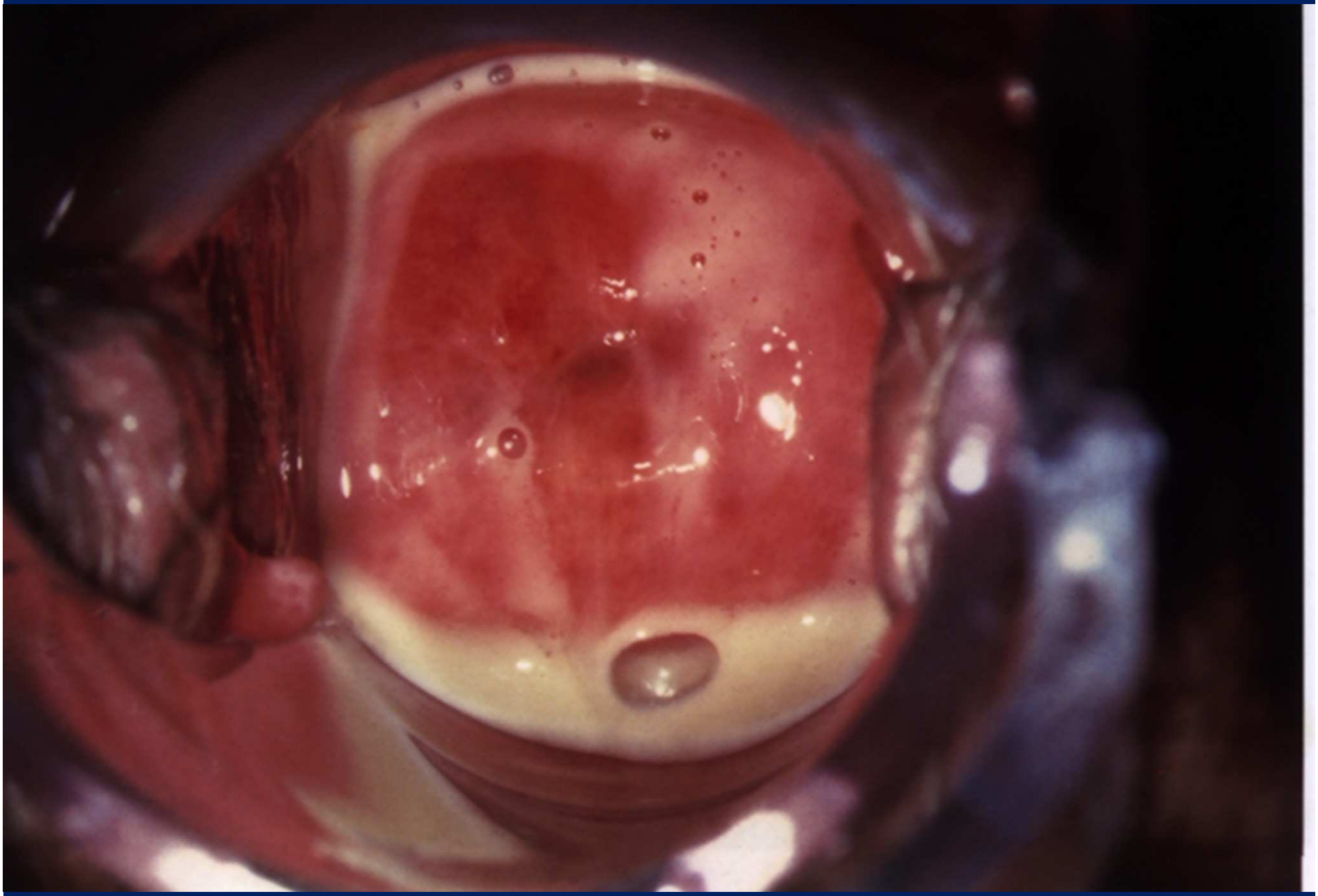
Struttura della parete

Gram-positivi



Gram-negativi





BACTERIAL VAGINOSIS: clinical diagnosis

1) AMSEL'S CRITERIA (1983): 3 of 4 following signs

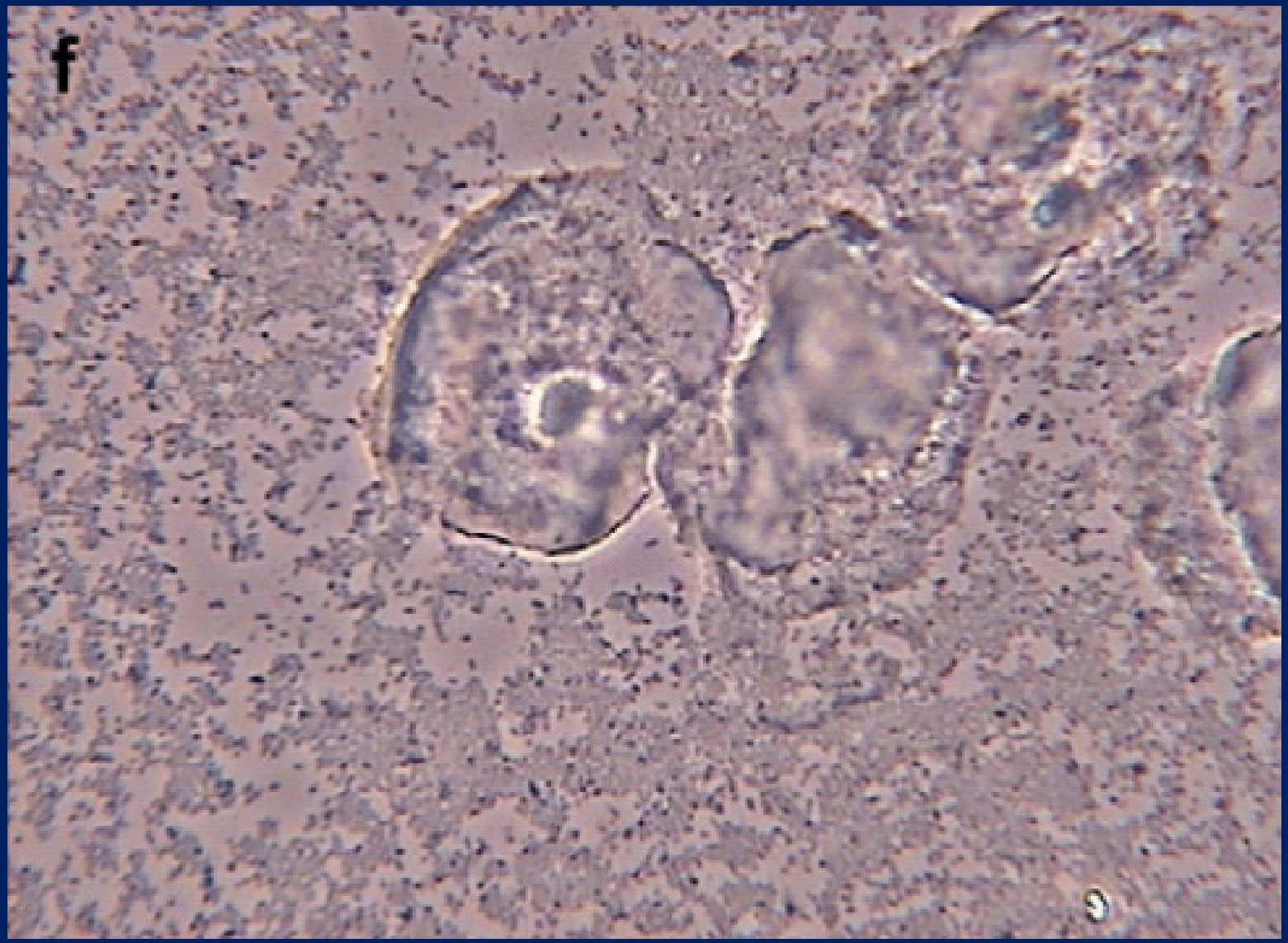
1) Adherent and homogenous grayish-white vaginal discharge

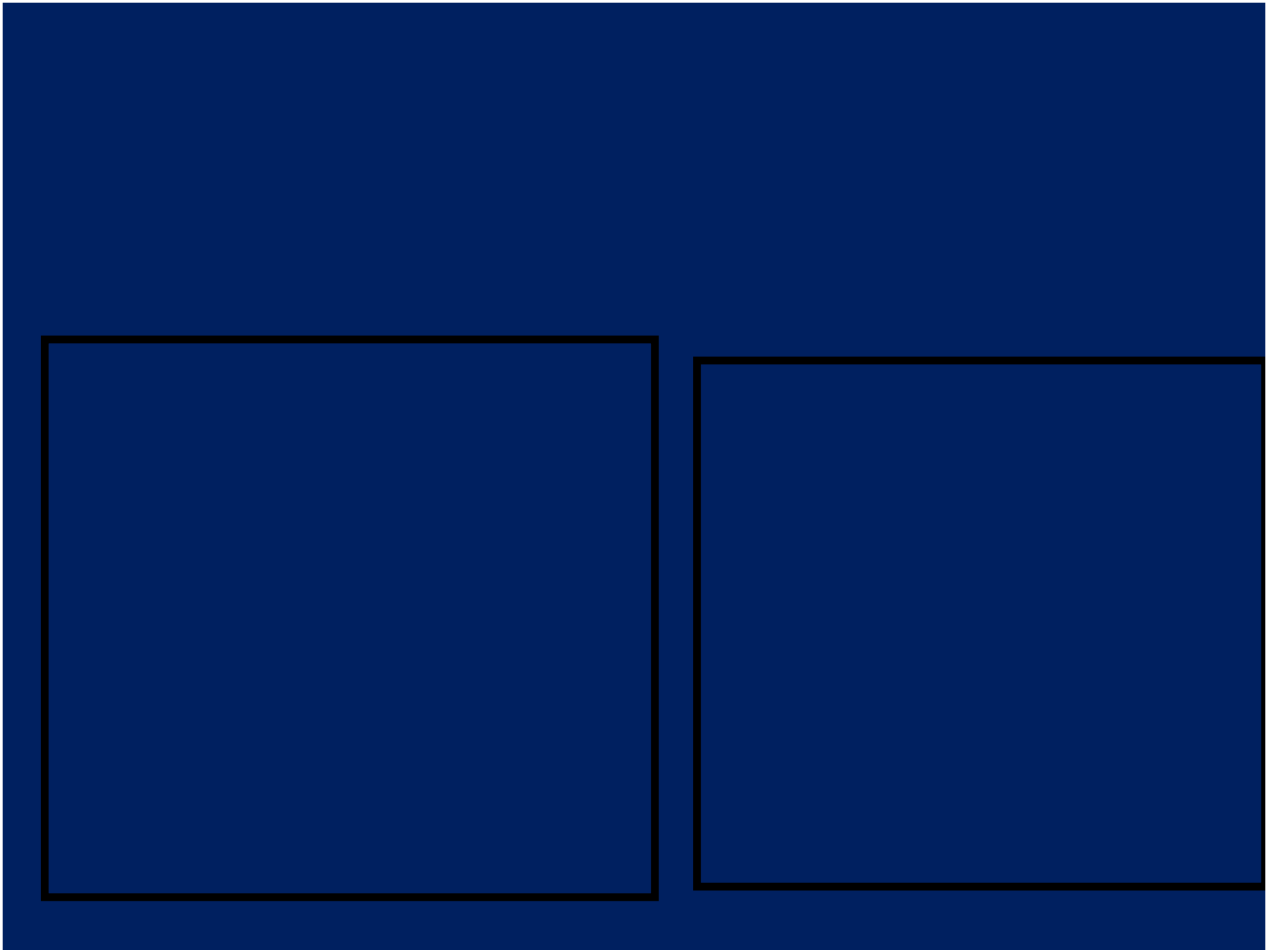
2) Vaginal pH exceeding a value of 4.5; it is most sensitive (97%)

3) Presence of vaginal epithelial cells with a coating of bacteria obscured on saline wet mount; it is most specific predictor of BV (86%)

4) fishy or amine odor after the addition of a 10% potassium hydroxide solution (positive whiff or sniff test).

LIMITS: criteria 1 and 4 are subjective -> possible misdiagnosis


f



VVC: classificazione

	Non complicate	*Complicate*
Sintomatologia	**Moderata**	**Severa**
Frequenza	**Sporadica**	**Ricorrente**
Organismo	**C. albicans**	**Non-albicans**
Ospite	**Normale**	**Anormale**

Sobel, 1998

VVC

TERAPIA

- 2. Forme complicate
  - **2a Candida non albicans**
  - **2b Ricorrente o recidivante**

tropicalis