

women's intimate health

supporting self-care

TRAINING FOR PHARMACISTS AND PHARMACY SUPPORT STAFF

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Introduction

This training is for pharmacists and pharmacy technicians to improve their knowledge on some of the common conditions that can affect women's intimate health. It is an area that you may regularly be asked to advise on, and in many cases, you can offer effective OTC options for treatment. There are some symptoms that may need to be referred, or certain customers that should see their GP rather than self-treat, and this training will help you to identify them.

You may also use this training with your pharmacy team to make sure that their knowledge and skills in this area are up-to-date. You can support them to have confident, sensitive conversations with customers.



Objectives

After completing this training, you can expect to:

- Have an understanding of the symptoms and OTC treatment options for: vulvovaginal candidiasis (thrush), bacterial vaginosis (BV), cystitis and vaginal dryness
- Know when to refer customers to their GP/sexual health clinic
- Be able to give self-care advice to customers to help manage symptoms or prevent recurrence
- Have an awareness of the holistic approach to women's intimate health and the test/treat/care/prevent approach that can be used
- Feel more comfortable having potentially sensitive conversations.

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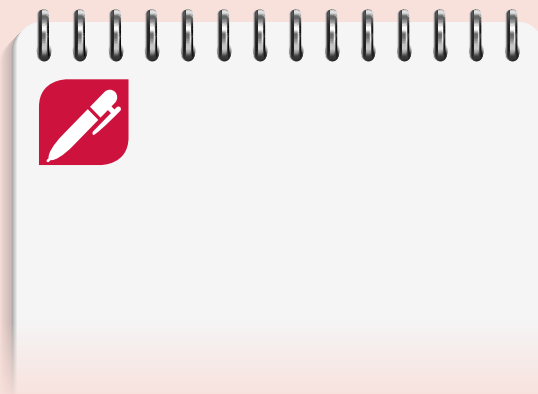


1

Revalidation

PLANNED LEARNING

Make a note of what you want to learn, how it is relevant to your practice and, after reading this, what other activities you will do.



UNPLANNED LEARNING

When reading this you may learn something new. Make a note of what you have learnt.



Once you have completed the training and used the knowledge in practice, reflect on how your learning has been applied and the resulting benefit to your customer(s).

1

Revalidation

Professional guidance

When working through this training guide, remember to keep in mind the RPS Interim statement of the supply of OTC medicines:

- **Customers should be treated with respect and dignity by the pharmacy team**
- **The pharmacy team should respect the privacy and confidentiality needs of customers and be empathetic to their sensitivities.**

The training can be used to develop your skills and knowledge in the areas of the following GPhC standards for pharmacy professionals:

Standard 1: Provide person-centered care

Standard 3: Pharmacy professionals must communicate effectively

Standard 4: Pharmacy professionals must maintain, develop and use their professional knowledge and skills.



SIGNPOSTING:



- What options are available in the area(s) where you work that you could signpost customers to for further advice, if needed?
For example, sexual health clinics.
- What other resources could you signpost customers to?
For example, leaflets or websites.

2

Vulvovaginal candidiasis



Definition

Vulvovaginal candidiasis (genital thrush) is caused by a fungal infection. Most cases (80-92 per cent) are caused by the yeast *Candida albicans*.¹ It is not a sexually transmitted infection, but it can develop after intercourse.

Around 20 per cent of women have the *Candida* yeast present on the skin and in the vagina, but

may not have any symptoms.¹ However, changes in vaginal pH or levels of hormones can result in the multiplication of the *Candida* yeast and subsequent thrush symptoms. Thrush may occur after a customer has taken a course of antibiotics. Customers may use the term thrush, thrush infection, yeast infection or candida.

Vulvovaginal candidiasis may be categorised as uncomplicated or complicated.¹

UNCOMPLICATED	COMPLICATED
Occasional/infrequent	Recurr - four or more episodes per year
Symptoms are mild to moderate	Severe infection
Not associated with risk factors such as poorly-controlled diabetes or pregnancy	Pregnancy, other conditions such as immunosuppression/uncontrolled diabetes

Another consideration is whether the infection is due to *C.albicans*. In a community pharmacy you will not know the likely cause, but you can use the other factors to help determine whether the customer's symptoms are appropriate for OTC treatment.

SYMPTOMS IN WOMEN^{1,2}



- Itching and soreness around the vagina and vulva
- A white discharge. May be described as thick, or having a cottage-cheese/curd-like appearance
- Generally, the discharge is odourless, but it may smell yeasty
- Redness or swelling in the vaginal area
- There may be pain when passing urine (dysuria) or having sex (dyspareunia).

SIGNS OF OTHER INFECTIONS TO BE AWARE OF ARE:

- **Bacterial vaginosis** - see pages 4-5
- **Trichomoniasis** - itching and a frothy, smelly, grey/green discharge.
- **Chlamydia** - discharge and pain on urination, but not usually with itching
- **Gonorrhoea** - rarely causes itching, but does cause pain and purulent discharge
- **Genital herpes** - vulval pain, redness, itching and ulceration, but discharge is uncommon.

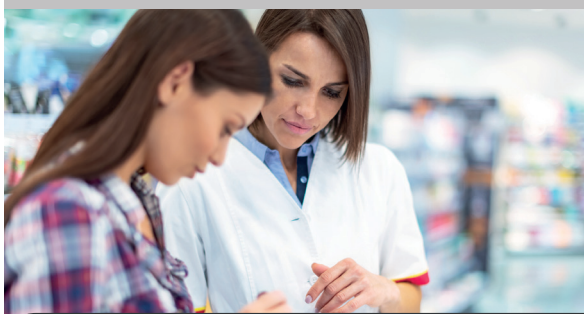
It is less common for men to have thrush (candida balanitis); however, you may be asked for advice to decide whether the male partner should be treated. Symptoms in men can include: irritation, burning or itching under the foreskin or on the tip of the penis; discharge under the foreskin; or difficulty pulling the foreskin back.²





OTC TREATMENT:

- Products containing antifungals such as clotrimazole and fluconazole are available OTC for the treatment of thrush
- Clotrimazole-containing products may include creams for external application two to three times a day, and pessaries/ internal creams for insertion into the vagina at night
- Fluconazole capsules are taken orally in a single capsule at any time of the day. Remember, it should not be taken by pregnant women
- Treating both the internal cause and external symptoms can be a benefit of combination products, such as those in the Canesten Thrush range; for example, Canesten Thrush Duo contains a tube of clotrimazole external 2% cream, as well as a fluconazole (150mg) capsule
- Topical and oral azoles give a cure rate of over 80 per cent in uncomplicated cases.³ The choice of treatment should take into consideration the customer's age (for licensing) and preference.



REMEMBER:

- Check whether the customer is taking any other medication that may interact with fluconazole (e.g. erythromycin)
- Male partners may be treated with clotrimazole cream, or by taking oral fluconazole. Men whose partners do not have thrush should be referred for diagnosis.

When to refer

Asking careful questions to identify whether a customer is affected by thrush or another condition is important to ensure the right product is recommended. Alternative diagnoses include a bacterial infection (if there is foul-smelling discharge), a urinary tract infection (if there is increased urinary frequency and urgency), a sexually-transmitted infection or cancer (if there is abnormal vaginal bleeding). Non-infective conditions such as psoriasis or vulval eczema may cause itching.¹

The following women should be referred to their GP or sexual health clinic:⁴

- Customers experiencing symptoms for the first time
- Symptoms such as blisters/sore spots/bleeding between periods or after sex, yellow/green vaginal discharge or lower abdominal pain
- Customers who have tried OTC treatments that haven't worked
- Customers with recurrent symptoms (more than two infections in six months)
- Women aged over 60, or under 16 years of age
- Customers who are immunocompromised or have diabetes
- Pregnant/breastfeeding women.

Refer men who: don't have a female sexual partner affected by thrush; have sores, ulcers or blisters on their penis; have a strong odour from their penis; or have pain/difficulty urinating.⁵

ADVICE:



You can advise female customers to:¹

- Avoid using strong soaps/shower gels in the area
- Use non-biological washing powder, and avoid fabric conditioner for underwear
- Avoid tight-fitting clothes in the genital area, tights and nylon underwear
- Consider suggesting probiotics orally or topically for uncomplicated infection, as recommended in the NICE Clinical Knowledge Summary (CKS): Candida – female genital*
- Consider treatment for their partner.

*CKS recommends advising women to consider using probiotics because, although there is no evidence that they are effective, there is no evidence of (or concerns about) serious adverse effects

3

Bacterial vaginosis

Bacterial vaginosis (BV) is the most common cause of abnormal vaginal discharge in women of childbearing age.⁶

In the healthy vagina, lactobacilli are the dominant bacteria. The vaginal pH is maintained below 4.5 and there are low levels of other bacteria. The low pH is due to the production of lactic acid.

In BV there is an increase in the pH to above the normal acidic level of 4.5 (and up to 6.0). Although there are still lactobacilli, the flora changes and other anaerobic bacteria are present, such as *Gardnerella vaginalis*, *Prevotella* spp., *Mycoplasma hominis* and *Mobiluncus* spp.⁶



SYMPTOMS:



Around 50 per cent of women who are affected by BV are asymptomatic.⁷ When there are symptoms, these are:

- Thin, grey/white watery discharge
- The discharge may have a fishy-smelling odour
- Usually without any associated itching or soreness.⁷

POTENTIAL CAUSES:

Factors that may increase the risk of developing BV include:⁷

- Being sexually active
- Using douches/deodorants/vaginal washes
- Menstruation/semen in the vagina
- Using a copper IUD
- Smoking.

Complications of BV

There are complications associated with BV. There is an increased risk for women with BV to acquire other sexually transmitted infections (STIs). BV is also associated with obstetric and gynaecological complications including:⁷

- Late miscarriage or spontaneous abortion
- Pre-term labour/delivery
- Low birthweight baby.

As a result, customers may have concerns about whether they have BV.





OTC SUPPORT:

There are options available OTC for customers concerned about BV.

TESTING

- Women may want to use a home-testing kit if they are not sure whether their symptoms indicate BV. A product such as Canestest can be used. The test links vaginal pH and symptoms to a probable condition. It is an easy-to-use swab that is inserted into the vagina and gives a visual indication of whether the condition is likely to be BV. The swab changes from yellow to green/blue when the vaginal pH is increased.
- The test should not be used less than one day before or after a menstrual period, or during a period (due to the changes in vaginal pH during menstruation). It would also not give accurate diagnosis if used within 12 hours of sexual intercourse or using a vaginal douche. It is not suitable for menopausal women.
- The test is designed to be used alongside checking of symptoms, and customers should discuss the test and symptoms with a pharmacist, doctor or other healthcare professional before using any treatment. Therefore, it is important that you are aware of what the test can indicate, and the questions that you should ask to help the customer to identify the best next step for them.

OTC TREATMENT

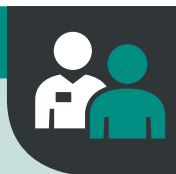
- The options available for OTC treatment are usually a course of vaginal gel treatments. Gels based on lactic acid (e.g. Canesbalance) work to restore the vaginal pH, restrict the growth of anaerobic bacteria and promote *Lactobacillus* growth. Canesbalance Gel comes in pre-filled applicators to be used at night for one week. The difference can be seen in just two to three days.⁸
- These products should not be used by women who are trying to conceive, as it makes the vaginal environment less suitable for sperm.



When to refer to a GP/sexual health clinic:

- Any other symptoms such as blisters/sore spots/bleeding between periods or after sex, yellow/green vaginal discharge or lower abdominal pain
- Customers who have tried OTC treatments that haven't worked
- Pregnant women.

ADVICE:



You can advise customers with BV to:⁹

- Use water and plain soap to wash the vaginal area
- Have showers instead of baths
- Avoid using perfumed soaps/bubble bath
- Avoid vaginal deodorants, washes or douches
- Use non-biological detergents to wash underwear.

4

Cystitis

Cystitis technically means inflammation of the bladder; however, it is used as a term for a lower urinary tract infection (UTI).¹⁰

A UTI is usually caused by bacteria from the gastrointestinal tract, such as *E.coli*. It is one of the most common bacterial infections managed in general practice.¹⁰

SYMPTOMS:



The symptoms of cystitis are:¹¹

- Needing to urinate more often, or with more urgency, and a feeling of needing to urinate even if they have just been to the toilet
- Discomfort on passing urine (dysuria)
- Urine that may be darker than usual, cloudy or smelly
- Lower abdominal pain
- Feeling generally ill, with nausea, tiredness and cold sweats.

OTC options

Mild cases of cystitis can clear up without any antibiotic treatment. You can advise customers to drink plenty of water and take paracetamol or ibuprofen for pain relief. They could also have warm baths or hold a hot water bottle over the stomach for comfort.¹²

If customers want to purchase something for their symptoms, they could consider products based on sodium citrate (e.g. CanesOasis) that make the urine less acidic to alleviate the discomfort.

They are not suitable for customers with diabetes, hypertension, history of renal disease or those on a low-salt diet or taking lithium. Products based on potassium citrate (e.g. Cystopurin) can be used by those on a low-sodium diet.

Some customers who are prone to cystitis may find that drinking cranberry juice or taking tablets containing cranberry extracts helps, but currently there's no clear evidence supporting that theory.¹²

When to refer

The following should be referred to their GP:¹¹

- Customers with severe symptoms such as blood in the urine, a fever or pain in the side
- Customers whose symptoms have not started to improve within three days
- Customers affected by frequent recurrence of cystitis
- Men, pregnant women and children.

In pregnancy, there is a risk that untreated cystitis may lead to a kidney infection, premature labour or a low birthweight baby.

Children can also get cystitis, particularly those aged under two. As well as the symptoms listed, they may have a fever, feel (or be) sick or lose their appetite. Cases in children should be referred to a GP.¹¹

ADDITIONAL ADVICE:¹⁰



- Wipe the bottom from front to back after going to the toilet
- Urinate after intercourse to help clear any bacteria
- Go for a wee whenever the urge is felt, trying to empty the bladder fully
- Stay well hydrated
- Wear cotton underwear and avoid using perfumed products in the area.



5

Vaginal dryness

Vaginal dryness is a common condition that affects many women at some stage in their life.¹³

Vaginal dryness, itching or discomfort (particularly during sex) can be caused by a decrease in oestrogen levels after the menopause. This is known as vaginal atrophy or atrophic vaginitis, and is due to the thinning of the vagina's lining.¹⁴ The term genitourinary syndrome of menopause (GSM) may be used instead of vulvovaginal atrophy or atrophic vaginitis.¹⁵

During the reproductive years, oestrogen causes thickening of the epithelium of the vagina, which produces glycogen. These glycogen-rich cells provide food for *Döderlein's bacilli* (microorganisms in the vagina) which produce the lactic acid that maintains the acidity of the vagina. After the menopause, the fall in oestrogen levels results in changes in the vagina.¹⁵

Other causes not due to the menopause include medication, chemotherapy or use of perfumed products around the vaginal area.¹³

The condition is often under-reported,¹⁶ so your role in supporting and advising women who may be affected is key; for example, having an open discussion with someone who is asking about something for menopausal symptoms.

SYMPTOMS:

The symptoms are:¹³

- Feeling sore or itchy in and around the vagina
- Pain or discomfort during sex
- Needing to urinate more often
- Recurrent UTIs.



OTC options

There is a variety of vaginal products that are effective for mild to moderate dryness. These are moisturisers (e.g. Canesintima) or lubricants. Women who would rather not use hormone-based treatment (oestrogen) may also choose to use lubricants/moisturisers, or they may use them in addition to an oestrogen-based product.

Lubricants can be water- or silicone-based and are used for short-term relief of dryness during intercourse. Moisturisers are designed to attach to the vaginal wall, and should be used regularly, (from every day, to once every two to three days) rather than just before intercourse.

There are differences between the products available and women may need to try a few to decide which one is right for them.

REFER:

Refer customers to their GP if:¹³

- They have tried self-care methods for a few weeks that aren't helping
- It's affecting their daily life
- They have unusual discharge or bleeding from the vagina, or bleeding after intercourse or between periods.



6

Supporting vaginal health

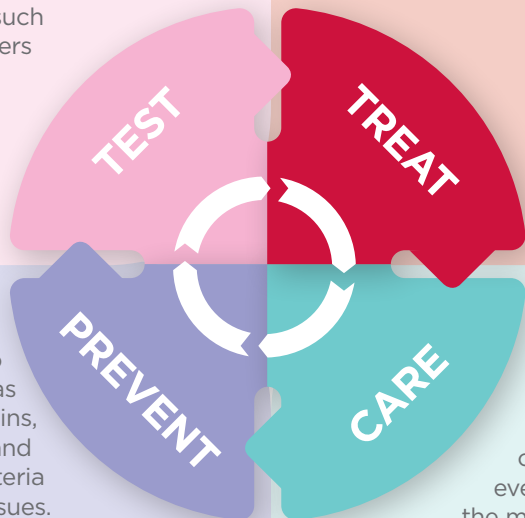
As well as following the advice for each of the conditions as listed, women can also take steps to maintain a healthy vagina and prevent infection.



6

Supporting vaginal health

- Vaginal secretions can vary throughout the menstrual cycle (for example, a stickier discharge around ovulation), and can alter with hormone changes; for example, in pregnancy or during the menopause. However, there shouldn't be a strong odour, change in colour or associated itching. If changes occur, testing for infection may be needed.
- Testing for conditions such as BV can help customers to identify what the symptoms could be a sign of, and then get the right treatment.
- Using either OTC treatment, self-care advice or prescribed treatment to clear any infection.
- Treat any signs of vaginal dryness with lubricants/moisturisers.



- Having a balance of 'good' bacteria helps to protect from infection as they produce bacteriocins, maintain the right pH, and help prevent other bacteria invading the vaginal tissues.
- Use plain, unperfumed soaps or washes designed for the vaginal area.
- Using vaginal probiotics has been shown to prevent the recurrence of BV.¹⁷
- Canesflor Probiotics for Vaginal Use contain *Lactobacillus plantarum* P17630 VI, a unique probiotic strain characterised and selected for its capability to adhere to the vaginal mucosa and protect against vaginal infections, such as thrush and bacterial vaginosis.
- Canesfresh Intimate Care Daily Foaming Wash is a feminine wash specially developed to refresh and care for the intimate area every day. It helps to keep the microflora of the skin of the intimate area in a healthy balance by maintaining the natural pH.
- Canesfresh Intimate Care Soothing Gel Wash is a mild feminine wash that is specially formulated to help soothe the sensitive intimate area during times of discomfort (such as having a thrush infection, or being affected by vaginal dryness) to help avoid further irritation that regular perfumed shower gels may cause. It contains glycine, an amino acid known for its calming properties.

7

Customer scenarios

Read through the scenarios below, writing your answers in the boxes beneath each question.

Mrs Okeke wants to have a private chat. She is concerned that she might have thrush.



What kind of questions would you ask?



What terminology do you feel comfortable using?



On further discussion, you find out that she has symptoms of BV. What are those symptoms?



What products could you recommend?

She thinks she has had this before, and wants to know what she can do to prevent it in the future.



What advice would you give?

Ms North asks to buy some Canesten cream.



What kind of questions would you ask to check that she is choosing the most appropriate product?



What symptoms would you refer?

On further discussion, you find out that she has symptoms of thrush, she has had it before and has no symptoms that you would refer to her GP. The last time she had it was about a year ago. She isn't pregnant/breastfeeding and is over 18 years old. She isn't taking any other medication apart from the contraceptive pill.



What products could you recommend? Think about treatment, prevention and care.



What self-care advice would you give?

8

Handling conversations with sensitivity

Good communication skills are essential for the whole pharmacy team, but it can be even more important when handling potentially sensitive subject areas.

Pharmacy professionals need to show empathy and have relaxed, open body language to help their customers feel at ease. When discussing personal health issues, remember to keep a neutral facial expression and to reflect on the right type of language to use. In some cases, it is not appropriate to use medical terms but in others it may be – it will all depend on the customer you are speaking to.

You can also reassure customers that the symptoms they are describing are common and something that you are used to giving advice on regularly. Remember to actively listen – show you are paying attention by nodding your head, repeating back some of their concerns, maintaining eye contact and smiling in a reassuring way, as appropriate.



There are also practical steps that you can take in the pharmacy to help customers feel at ease when selecting products. What do you think those might be? After writing your list, you can see if there are any other suggestions to add from the box (on the facing page).

As well as thinking about practical considerations, such as making sure the conversation isn't overheard or using a private consultation area, there are other factors to consider. It can be difficult for women to discuss their intimate health. What do you think their barriers are to discussing the conditions mentioned in this booklet in the pharmacy?



PRACTICAL STEPS:



- Consider product placement – are customers able to select or ask for products in areas where they may feel comfortable having a discussion?
- Can you site products better? Consider use of dual-siting (having the product in different locations) – for example, washes in both sanitary protection and by the thrush treatment products to prompt customers' interest, and remind the team to let customers know what they are and the potential benefits
- Use a private area or consultation room
- Some female customers may feel uncomfortable talking to male health professionals, so it may be helpful to have trained female pharmacy team members available to help.

Think about how you and your team can support each other to make having sensitive conversations easier. Some suggestions include:

- Making sure everyone feels confident in the products they are recommending
- Practising conversations and scenarios
- Giving feedback to each other to improve the way the practice (and real life) conversations are handled
- Discussing the type of language to use; for example, if you don't feel comfortable with words such as vagina or discharge, what words could you use instead?
- Thinking about how you can approach customers; for example, if someone is asking about supplements to support the menopause, you might say, 'Are you aware that vaginal dryness is really common in many women affected by the menopause? We have a range of products I can show you if you are interested?'

Further training resources

Scan the QR code to view the full Women's Intimate Health Programme, for further learning resources and information about thrush, BV, the Canesten range and customer conversations.



Training your team

In many cases, your pharmacy team will be the ones speaking to customers. You can use this material to run training sessions with them.

You could discuss each of the areas covered in this booklet, and look at the range of products available in your pharmacy to help treat each condition. Remind the team of the importance of the symptoms to listen out for and when to refer to you.

You could discuss the following:

1. What would they recommend for someone who has thrush?
2. What symptoms would they refer to you?
3. What is BV?
4. What advice would they give to help someone decide if they have thrush or BV?
5. What can they recommend for vaginal dryness?

Now that you have finished this training, remember to add this CPD to your revalidation records.



References 1. NICE CKS Candida – female genital. Accessed at: <https://cks.nice.org.uk/candida-female-genital> 2. Family Planning Association. <https://sexwise.fpa.org.uk/stis/thrush> 3. British Association for Sexual Health and HIV BASHH Guidelines: Vulvovaginal Candidiasis (2007). <http://www.bashh.org/guidelines> 4. NHS Conditions: Thrush in men and women. <https://www.nhs.uk/conditions/thrush-in-men-and-women/> 5. Patient Leaflet: Canesten Thrush Duo Oral Capsule and external cream 150mg/2% w/w capsule and cream. <https://www.medicines.org.uk/emc/product/9076/pil> 6. British Association for Sexual Health and HIV BASHH Guidelines: Bacterial Vaginosis (2012). <https://www.bashh.org/guidelines> 7. NICE CKS Bacterial vaginosis. <https://cks.nice.org.uk/bacterial-vaginosis> 8. Decena et al. Metronidazole with Lactacyd vaginal gel in bacterial vaginosis. *J Obstet Gynaecol Res* 2006;32(2):243-51 9. NHS Conditions: Bacterial vaginosis. <https://www.nhs.uk/conditions/bacterial-vaginosis/> 10. NICE CKS Urinary tract infection (lower) – women. <https://cks.nice.org.uk/urinary-tract-infection-lower-women> 11. NHS Conditions: Cystitis. <https://www.nhs.uk/conditions/cystitis/> 12. BUPA UK, Health Information Cystitis. Expert reviewer Professor Raj Persad, Consultant Urological Surgeon. <https://www.bupa.co.uk/health-information/urinary-bladder-problems/cystitis> 13. NHS Conditions: Vaginal dryness. <https://www.nhs.uk/conditions/vaginal-dryness/> 14. NHS Conditions: Vaginitis. <https://www.nhs.uk/conditions/vaginitis/> 15. Patient Info Professional article. Atrophic vaginitis. Dr Hayley Willacy. <https://patient.info/doctor/atrophic-vaginitis> 16. D. Edwards and N. Panay. Treating vulvovaginal atrophy/genitourinary syndrome of menopause: how important is vaginal lubricant and moisturizer composition? March 2016. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4819835> 17. N. Recine et al. Restoring vaginal microbiota: biological control of bacterial vaginosis. *Arch Gynecol Obstet*. 2016 Jan;293(1):101-7. <https://www.ncbi.nlm.nih.gov/pubmed/26142892>

All online references last accessed April 2019.

Product information

Canesten Thrush Duo Oral Capsule and External Cream 150mg / 2% w/w capsule & cream (fluconazole 150mg capsule, plus 10g tube of clotrimazole 2% w/w cream). **Indications:** The capsule is for treatment of candidal vaginitis, acute or recurrent. Also for treatment of partners with associated candidal balanitis. The cream is for the treatment of candidal vulvitis. It can also be used for treatment of the sexual partner's penis to prevent re-infection. **Dosage and administration:** **Adults (16 – 60 years):** Swallow one capsule whole. Apply cream to vulva and surrounding area two or three times daily and rub in gently. Treatment with the cream should be continued until symptoms of the infection disappear. If after concomitant treatment of vaginitis, symptoms do not improve within seven days, the patient should consult a physician. For treatment of sexual partner's penis, cream should be applied two or three times daily for two weeks. **Children (under 16):** Paediatric usage is not recommended. Not recommended in patients over 60. **Contraindications:** Hypersensitivity to fluconazole, clotrimazole, related azole substances or any of the excipients e.g. cetostearyl alcohol; co-administration with terfenadine, cisapride, astemizole, pimozone, quinidine and erythromycin. **Warnings and precautions:** The cream may cause damage to latex contraceptives. Patients should be advised to use alternative precautions for at least five days after using this product. A physician should be consulted if the patient is experiencing symptoms of candidal vaginitis for the first time; is taking any medication other than the pill; is taking terfenadine or cisapride; has had more than two infections of thrush in the last six months; has any disease or illness affecting the liver or kidneys or has had unexplained jaundice; suffers from any other chronic disease or illness; the patient or partner have had exposure to sexually transmitted disease; is uncertain of the cause of symptoms. **Women only –** patient is suffering from irregular vaginal bleeding or a blood-stained discharge; vulval or vaginal sores, ulcers or blisters; lower abdominal pain or dysuria; adverse events such as redness, irritation or swelling associated with the treatment; is experiencing fever or chills; nausea or vomiting; diarrhoea; foul smelling vaginal discharge. **In men –** medical advice should be sought if they have penile sores, ulcers or blisters, there is abnormal penile discharge, the penis has started to smell, they have dysuria, or their sexual partner does not have thrush. Patients should consult their doctor if symptoms have not been relieved within one week of treatment. Administer with caution in renal dysfunction, adrenal insufficiency and liver dysfunction, patients with congenital or acquired QT prolongation, known cardiomyopathy, sinus bradycardia, cardiac arrhythmia, or history of torsades de pointes or other proarrhythmic conditions. Patients have rarely developed exfoliative cutaneous reactions such as Stevens-Johnson syndrome and toxic epidermal necrolysis during treatment, therefore patient should consult doctor if rash develops. If rash or anaphylaxis develops patient should never use the product again. Administer with caution in patients taking products with narrow therapeutic window metabolised through CYP2C9, CYP2C19 and CYP3A4. Patients with rare hereditary problems of galactose intolerance, total lactase deficiency or glucose-galactose malabsorption should not take the capsule. The cream contains cetostearyl alcohol, which may cause local skin reactions (e.g. contact dermatitis). **Side effects:** Oral capsule may cause nausea, diarrhoea, vomiting, abdominal pain, constipation, dyspepsia, dry mouth, flatulence. Anaemia, leukopenia, neutropenia, agranulocytosis and thrombocytopenia. Torsades de pointes/QT prolongation. Increased transaminases, increased blood alkaline phosphatase, hepatitis, jaundice, cholestasis, increased bilirubin, hepatic failure, hepatocellular damage. Anaphylaxis and hypersensitivity. Decreased appetite,

hypercholesterolaemia, hypertriglyceridaemia and hypokalaemia. Somnolence, insomnia. Seizures, paraesthesia, dizziness, headache, dysgeusia, tremor. Vertigo. Rash, pruritus, urticaria, hyperhidrosis, alopecia, exfoliative skin reactions including Stevens-Johnson syndrome, toxic epidermal necrolysis. Myalgia, fatigue, malaise, asthenia, pyrexia. Cream may cause allergic reactions, blisters, discomfort/pain, oedema, erythema, irritation, peeling/exfoliation, pruritus, rash, stinging/burning. **Use in pregnancy:** Do not use during pregnancy, suspected pregnancy unless clearly necessary or as recommended by a doctor. Fluconazole should not be used whilst breast-feeding. **Cost (excl. VAT):** £8.26. **MA number:** PL 00010/0652. **MA holder:** Bayer plc, 400 South Oak Way, Reading, RG2 6AD, UK. **Legal category:** P. **Date of preparation:** February 2019.

Cystopurin® (potassium citrate). **Indications:** For the symptomatic relief of mild urinary tract infections (cystitis). **Dosage and administration: Adult:** One 3g sachet dissolved in water three times daily for 2 days. All six sachets must be taken to complete treatment. **Children:** Not recommended for children under six years of age. For children over six years of age use adult dosage. **Contraindications:** Caution in patients with impaired renal function or cardiac disease. **Warnings and precautions:** Intended for short term treatment. Patients should seek doctor's advice if symptoms persist after 48 hours. Contains aspartame, a source of phenylalanine. May be harmful to people with phenylketonuria. Concurrent administration with the following drugs may lead to hyperkalaemia: potassium sparing diuretics, ACE inhibitors, aliskiren, angiotensin-II receptor antagonists, ciclosporin and tacrolimus. Avoid concomitant use with methenamine. Interaction possible with cardiac glycosides and caution is advised. **Side effects:** Mild diuresis. Gastric irritation, the effects of which may be minimised by diluting sachet contents well with water. Doses may be given with or after meals. **Use in pregnancy:** If drug therapy needed in pregnancy, can be used if no safer alternative. Pregnant women should be advised to seek medical advice on the treatment of cystitis rather than using OTC medicines. **RRP (excl. VAT):** £4.88. **MA number:** PL 00010/0322. **MA holder:** Bayer plc, 400 South Oak Way, Reading RG2 6AD. **Legal category:** GSL. **Date of preparation:** September 2018.

CanesOasis® Cystitis Relief 4g granules for oral solution (sodium citrate dihydrate BP). **Indications:** Symptomatic relief of cystitis in women. **Dosage and administration: Adult women:** One sachet in water three times daily over 2 days. **Men and children:** Not recommended. **Contraindications:** Diabetes, heart disease, hypertension, history of renal disease or those on a low salt diet. During pregnancy and lactation. **Warnings and precautions:** If symptoms persist after completion of the two day course of treatment, medical attention should be sought. **Interactions:** sodium containing preparations should be avoided by patients on lithium. Urinary alkalinisers should not be used with hexamine. The effects of a number of drugs may be reduced or increased by the alkalinisation of the urine and reduction in gastric pH. Keep out of the sight and reach of children. **Side effects:** mild diuresis. **Use in pregnancy:** Do not use during pregnancy, suspected pregnancy and breast-feeding. **RRP (excl. VAT):** £4.82. **MA number:** PL 12063/0045. **MA holder:** Wraffon Laboratories Ltd, Wraffon, Braunton, North Devon, EX33 2DL, UK. Distributor: Bayer plc, 400 South Oak Way, Reading, RG2 6AD. **Legal category:** GSL. **Date of preparation:** February 2019.

Canesten® Thrush Internal Cream 10% w/w vaginal cream (clotrimazole).

Indications: Treatment of candidal vaginitis. **Dosage and administration:**

Adults: contents of the filled applicator (5g) should be inserted as deeply as possible into the vagina, preferably at night. A second treatment may be carried out if necessary. Treatment should not be performed during the menstrual period and should be finished before the onset of menstruation. Do not use tampons, intravaginal douches, spermicides or other vaginal products while using this product. Vaginal intercourse should be avoided in case of vaginal infection and during treatment. **Children:** Not recommend for use in children under 16.

Contraindications: Hypersensitivity to clotrimazole or to any other ingredient in the product. **Warnings and precautions:** Medical advice must be sought if this is the first time the patient has experienced symptoms of candidal vaginitis or if any of the following are applicable: more than two infections of candidal vaginitis in the last six months; previous history of, or exposure to partner with, a sexually transmitted disease; pregnancy or suspected pregnancy; aged under 16 or over 60 years; known hypersensitivity to imidazoles or other vaginal antifungal products. Medical advice should be sought if the patient has any of the following symptoms: irregular vaginal bleeding; abnormal vaginal bleeding or a blood-stained discharge; vulval or vaginal ulcers, blisters or sores; lower abdominal pain or dysuria; any adverse events such as redness, irritation or swelling associated with the treatment; fever or chills; nausea or vomiting; diarrhoea; foul smelling vaginal discharge. If no improvement in symptoms is seen after seven days, the patient should consult their doctor. Can be used again if the candidal infection returns after 7 days. However, if the infection recurs more than twice within six months, patients should be advised to consult their physician. This product contains cetostearyl alcohol, which may cause local skin reactions (e.g. contact dermatitis). **Interactions:** Oral tacrolimus/sirolimus. This product may damage latex contraceptives therefore patients should use alternative precautions for at least five days after using the product.

Side effects: Allergic reaction, genital peeling, pruritis, rash, oedema, erythema, discomfort, burning, irritation, pelvic pain, vaginal haemorrhage and abdominal pain.

Use in pregnancy: Clotrimazole can be used during pregnancy, but only under the supervision of a physician or midwife. During pregnancy the treatment should be carried out with clotrimazole pessary, since these can be inserted without using an applicator. **Cost (excluding VAT):** £8.74. **MA number:** PL 00010/0654. **MA holder:** Bayer plc, 400 South Oak Way, Reading, RG2 6AD, UK. **Legal category:** P. **Date of preparation:** February 2019.

Canesten® Thrush Pessary 500mg pessary (clotrimazole). **Indications:**

Treatment of candidal vaginitis. **Dosage and administration: Adults (16 – 60 years):** One pessary should be inserted intravaginally at bedtime. The treatment must be finished before the onset of menstruation. Do not use tampons, intravaginal douches, spermicides or other vaginal products while using this product. Vaginal intercourse should be avoided in case of vaginal infection and while using this product because the partner could become infected. **Children:** Not recommended in children under 16. **Contraindications:** Hypersensitivity to clotrimazole or to any other ingredient in the medicine. **Warnings and precautions:** Medical advice must be sought if this is the first time the patient has experienced symptoms of candidal vaginitis or if any of the following are applicable: more than two infections of candidal vaginitis in the last six months; previous history of, or exposure to partner with, a sexually transmitted disease; pregnancy or suspected pregnancy; aged under 16 or over 60 years; known hypersensitivity to imidazoles or other vaginal antifungal products. Should not be used where the patient has any of the following symptoms, where upon medical advice should also be sought: irregular vaginal bleeding; abnormal vaginal bleeding or a blood-stained discharge; vulval or vaginal ulcers, blisters or sores; lower abdominal pain or dysuria; any adverse events such as redness, irritation or swelling associated with the treatment; fever or chills; nausea or vomiting; diarrhoea; foul smelling vaginal discharge. If no improvement in symptoms is seen after seven days, the patient should consult their doctor. This product may damage latex contraceptives therefore patients should use alternative precautions for at least five days after using the product.

Side effects: Allergic reaction, genital peeling, pruritis, rash, oedema, erythema, discomfort, burning, irritation, pelvic pain, abdominal pain, vaginal haemorrhage.

Use in pregnancy: Only when considered necessary and under the supervision of a physician or midwife. During pregnancy the pessary should be inserted without using an applicator. **Cost (Excl. VAT):** £8.20. **MA number:** PL 00010/0083. **MA holder:** Bayer plc, 400 South Oak Way, Reading, RG2 6AD, UK. **Legal category:** P. **Date of preparation:** February 2019.

Canesten® Thrush Oral Capsule 150mg capsule (fluconazole). **Indications:**

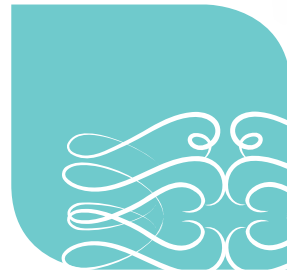
For the treatment of candidal vaginitis, acute or recurrent. For the treatment of partners with associated candidal balanitis. **Dosage and administration: Adults (16 – 60 years):** Swallow one capsule whole. Not recommended in children (under 16) or elderly (over 60). **Contraindications:** Hypersensitivity to fluconazole, relatedazole substances or any of the excipients; co-administration with terfenadine, cisapride, astemizole, pimozone, quinidine and erythromycin. **Warnings and precautions:** A physician should be consulted if the patient is taking any medication other than the pill; is taking terfenadine or cisapride; has had more than two infections of thrush in the last six months; has any disease or illness affecting the liver or kidneys or has had unexplained jaundice; suffers from any other chronic disease or illness; the patient or partner have had exposure to sexually transmitted disease; is uncertain of the cause of symptoms. **Women only** – patient is suffering from abnormal or irregular vaginal bleeding or a blood-stained discharge; vulval or vaginal sores, ulcers or blisters; lower abdominal pain or dysuria. **In men** – medical advice should be sought if they have penile sores, ulcers or blisters, there is abnormal penile discharge, the penis has started to smell, they have dysuria, or their sexual partner does not have thrush. Patients should consult their doctor if symptoms have not been relieved within one week of treatment. Administer with caution in renal dysfunction, adrenal insufficiency and liver dysfunction, patients with congenital or acquired QT prolongation, known cardiomyopathy, sinus bradycardia, cardiac arrhythmia, or history of torsades de pointes or other proarrhythmic conditions. Patients have rarely developed exfoliative cutaneous reactions such as Stevens-Johnson syndrome and toxic epidermal necrolysis during treatment, therefore patient should consult doctor if rash develops. If rash or anaphylaxis develops patient should never use the product again. Administer with caution in patients taking products with narrow therapeutic window metabolised through CYP2C9, CYP2C19 and CYP3A4. Patients with rare hereditary problems of galactose intolerance, total lactase deficiency or glucose-galactose malabsorption should not take the capsule. **Side effects:** May cause nausea, diarrhoea, vomiting, abdominal pain, constipation, dyspepsia, dry mouth, flatulence. Anaemia, leukopenia, neutropenia, agranulocytosis and thrombocytopenia. Torsades de pointes/QT prolongation. Increased transaminases, increased blood alkaline phosphatase, hepatitis, jaundice, cholestasis, increased bilirubin, hepatic failure, hepatocellular damage and necrosis. Anaphylaxis and hypersensitivity. Decreased appetite, hypercholesterolaemia, hypertriglyceridaemia and hypokalaemia. Somnolence, insomnia. Seizures, paraesthesia, dizziness, headache, dysgeusia, tremor. Vertigo. Rash, pruritis, urticaria, hyperhidrosis, alopecia, exfoliative skin reactions including Stevens-Johnson syndrome, toxic epidermal necrolysis. Myalgia, fatigue, malaise, asthenia, pyrexia. **Use in pregnancy:** Do not use during pregnancy, suspected pregnancy unless clearly necessary or as recommended by a doctor. Fluconazole should not be used whilst breast-feeding. **Cost (Excl. VAT):** £9.04 **MA number:** PL 00010/0282. **MA holder:** Bayer plc, 400 South Oak Way, Reading, RG2 6AD, UK. **Legal category:** P. **Date of preparation:** February 2019.

Canesten® Thrush External Cream 2% w/w cream (clotrimazole). **Indications:**

Treatment of candidal vulvitis. To be used as an adjunct to treatment of candidal vaginitis. Can also be used for the treatment of the sexual partner's penis to prevent re-infection. **Dosage and administration: Adults:** should be applied thinly two or three times daily to the vulva and surrounding area (or the sexual partner's penis for up to two weeks to prevent re-infection) and rubbed in gently. **Children:** There is no clinical experience in the use of Canesten Thrush External Cream in children.

Contraindications: Hypersensitivity to clotrimazole or to any other ingredient in the product. **Warnings and precautions:** Medical advice must be sought if this is the first time the patient has experienced symptoms of candidal vaginitis or if any of the following are applicable: more than two infections of candidal vaginitis in the last six months; previous history of, or exposure to partner with, a sexually transmitted disease; pregnancy or suspected pregnancy; aged under 16 or over 60 years; known hypersensitivity to imidazoles or other vaginal antifungal products. Medical advice should be sought if the patient has any of the following symptoms: irregular vaginal bleeding; abnormal vaginal bleeding or a blood-stained discharge; vulval or vaginal ulcers, blisters or sores; lower abdominal pain or dysuria; any adverse events such as redness, irritation or swelling associated with the treatment; fever or chills; nausea or vomiting; diarrhoea; foul smelling vaginal discharge. This product contains cetostearyl alcohol, which may cause local skin reactions (e.g. contact dermatitis). **Interactions:** This product may damage latex contraceptives therefore patients should use alternative precautions for at least five days after using the product. **Side effects:** Allergic reaction, blisters, discomfort/pain, oedema, erythema, irritation, peeling/exfoliation, pruritis, rash, stinging/burning.

Use in pregnancy: Only when considered necessary and under the supervision of a physician or midwife. **Cost (excluding VAT):** £7.11. **MA number:** PL 00010/0077. **MA holder:** Bayer plc, 400 South Oak Way, Reading, RG2 6AD, UK. **Legal category:** P. **Date of preparation:** February 2019.



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