

# Treatment of trichomoniasis in the female with a 5-day course of metronidazole (Flagyl)

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Over a period of 10 years very satisfactory results have been obtained in the treatment of trichomoniasis in women with a 7-day course of 'Flagyl' at a dosage of 200 mg. three times a day, without any concomitant local therapy (Rodin, King, Nicol, and Barrow 1960). In view of the known unreliability of patients in following any dosage schedule, it was felt that a simpler and shorter regimen would be advantageous, if it proved equally effective.

## Method

A trial was carried out with a dosage of two tablets (400 mg.) twice daily for 5 days. This gives a total dosage of 4 g. compared with 4.2 g. by the former schedule. The initial diagnosis was made by a wet smear or culture and a 3 month follow-up with tests by the same procedures was aimed at in each case.

## Material

200 female patients with first infestations with *Trichomonas vaginalis* were treated at the clinic at St. Thomas' Hospital. Their ages ranged from 13 to 55 years (mean 26). There were 120 single women, 59 married, fifteen separated, five divorced, and one widowed.

## Results

Of the 200 patients, 198 completed the course of 400 mg. Flagyl twice daily for 5 days. Of the remaining two patients, one developed an urticarial rash (the only recorded toxic effect in this series)

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and treatment was stopped after 2 days, and the other admitted to intermittent dosage when the infection was found to have persisted. After a second course taken correctly a cure was effected. No patients defaulted immediately after a first course of treatment, although many did not complete the full 3 months' follow-up; a high proportion attended for one set of post-treatment tests only (Table I).

TABLE I *Completion of course of treatment*

<i>No. of patients</i>	<i>Completed first treatment</i>	<i>Immediate defaulters</i>	<i>Full course not completed</i>
200	198	Nil	2

In 181 of these 198 cases there was apparent cure, but a full 3 months' follow-up was completed in only 26 cases (Table II). In seventeen cases the parasite was still detected after completion of treatment; these are analysed to show the interval between treatment and the reappearance of *T. vaginalis* and whether or not the patient admitted to further sexual intercourse (Table III).

These cases are also divided into those in which the failure was immediate, with the parasite showing on the first post-treatment test, and those in which there were one or more intervening negative results before *T. vaginalis* reappeared (Table IV). Eight of the seventeen cases of failure or re-infection continued to attend for follow-up and responded to re-treatment with the same dosage of metronida-

TABLE II *Apparent cures with length of follow-up*

<i>Duration of follow-up (mths)</i>	<i>Less than 1</i>	<i>1-2</i>	<i>2-3</i>	<i>More than 3</i>	<i>Total</i>
<i>No. of patients</i>	77	49	29	26	181

TABLE III *Investigation of seventeen treatment failures*

<i>Duration of follow-up (mths)</i>				<i>Further sexual intercourse</i>		
<i>Less than 1</i>	<i>1-2</i>	<i>2-3</i>	<i>More than 3</i>	<i>Admitted</i>	<i>Denied</i>	<i>?</i>
2	8	4	3	11	4	2

TABLE IV *Analysis of seventeen treatment failures*

<i>Time of assessment</i>	<i>Failures</i>		<i>Successes</i>		<i>Total</i>	
	<i>No.</i>	<i>Per cent.</i>	<i>No.</i>	<i>Per cent.</i>	<i>No.</i>	<i>Per cent.</i>
Immediately after treatment	2	1.0				
Later	15	7.6	181	91.4	198	100
Total	17	8.6				

zole. The remaining nine patients defaulted immediately after re-treatment.

Thus, of 198 cases treated, there was apparent cure in 91.4 per cent., and among the seventeen cases in which the parasite was detected after treatment there was a probability of re-infection in at least eleven cases.

#### Summary

Two hundred women with vaginal trichomoniasis were treated with metronidazole 400 mg. twice daily for 5 days to discover whether this shorter and simpler dosage was as effective as the customary regimen of 200 mg. three times a day for 7 days. 198 women completed their treatment and underwent at least one examination for cure. Failure or re-infection

was detected in seventeen cases (8.6 per cent.) but in at least eleven of these there was reason to presume further exposure to risk. This trial indicates that metronidazole is effective in this easier dosage regimen.

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*Note:* A 400-mg. tablet of metronidazole will become available from May and Baker.

#### Reference

RODIN, P., KING, A. J., NICOL, C. S., and BARROW, J. (1960) *Brit. J. vener. Dis.*, **36**, 147