CONDITION

Thrush

Thrush is a common Candida yeast infection affecting the mouth, genitals, or skin.

WHAT IT IS
Candida yeast overgrowth on moist body surfaces

BODY SYSTEM
Mouth, genitals and skin

MAIN SYMPTOMS
White mouth patches, soreness, itching, thick vaginal discharge

WHAT CAUSES IT
Candida yeast overgrowth

HOW IT IS DIAGNOSED
Examination, with microscopy or culture when uncertain

MAIN TREATMENT
Antifungal medicines and care of contributing factors

CAN IT BE CURED?
Yes - most episodes clear with antifungal treatment

IS IT AN EMERGENCY?
Sometimes - breathing trouble or inability to swallow

LONG-TERM OUTLOOK
Usually clears, though some people have repeated episodes

Overview

Thrush is a common infection caused by an overgrowth of Candida yeast. Small amounts of Candida normally live on the skin and in places such as the mouth, bowel, and vagina without causing problems.

Thrush develops when the usual balance of microorganisms changes or the body becomes less able to control the yeast. It most often affects the mouth, vagina, penis, or moist folds of skin. Babies can develop oral thrush or a Candida nappy rash.

Thrush is usually uncomfortable rather than dangerous. Most episodes clear with antifungal treatment. However, symptoms can resemble other conditions, and repeated or persistent thrush may need further assessment.

Common surface thrush is different from invasive candidiasis. Invasive candidiasis is a serious

infection involving the blood or internal organs, mainly affecting people who are already very unwell in hospital. Ordinary mouth or genital thrush does not usually develop into this in otherwise healthy people.

Symptoms

Symptoms depend on the part of the body affected.

Oral thrush can cause:

Babies with oral thrush may have white patches that do not wipe away easily. Some become unsettled during feeding, although many otherwise seem well.

Vaginal thrush commonly causes itching, irritation, and soreness around the vagina and vulva, which is the external genital area. Discharge may be thick and white, but it is not always present. The discharge usually has little or no smell. Urination or sex may sting because the skin is inflamed.

Thrush affecting the penis can cause redness, burning, or itching around the head of the penis and beneath the foreskin. There may be a white discharge or difficulty pulling back the foreskin because of swelling.

Candida in skin folds can cause a bright red, sore, or itchy rash. Smaller red spots may appear around the edge. Common sites include the groin, armpits, beneath the breasts, and between skin folds.

These symptoms are not specific to thrush. Sexually transmitted infections, bacterial vaginosis, eczema, irritation, and other skin conditions can look or feel similar.

- Creamy white patches on the tongue, inner cheeks, gums, or roof of the mouth
- Red or sore tissue beneath patches that wipe away
- Burning, an unpleasant taste, or reduced taste
- Cracks at the corners of the mouth
- Soreness beneath dentures

Causes and risk factors

Thrush happens when Candida grows more than usual. It is not normally caused by poor hygiene.

Factors that can make an episode more likely include:

Antibiotics like amoxicillin or doxycycline can reduce protective bacteria that normally help keep Candida under control. Corticosteroids and medicines that suppress the immune system can also make overgrowth easier.

Vaginal thrush is not classed as a sexually transmitted infection. Sexual activity can sometimes trigger symptoms or make irritated skin more uncomfortable, but thrush can occur without sexual contact. Routine treatment of a sexual partner is not usually needed unless that person has symptoms.

Repeated thrush does not always have an obvious cause. It may sometimes be linked to a different Candida species, reduced response to a medicine, diabetes, or an incorrect original diagnosis.

- Recent antibiotic treatment
- Pregnancy or other hormonal changes
- Diabetes, especially when blood glucose is high
- A weakened immune system
- Steroid medicines, including corticosteroid like prednisone or hydrocortisone inhalers
- Dry mouth, poorly fitting dentures, or wearing dentures overnight
- Warm, damp skin folds
- Skin irritation or damage

Diagnosis

A healthcare professional can often identify thrush by asking about your symptoms and examining the affected area. Oral thrush may have a typical appearance, while genital and skin symptoms sometimes require testing because several conditions can look similar.

A sample may be examined under a microscope or sent for culture. Culture allows a laboratory to identify the type of yeast. This can be useful when symptoms keep returning, do not improve with treatment, or are not typical.

If you have repeated episodes, further assessment may include checking for contributing factors such as diabetes or medicines that affect immunity. Pain or difficulty when swallowing may require tests for infection in the oesophagus, the tube connecting the mouth to the stomach.

Treatment and management

Thrush is treated with antifungal medicine. The form of treatment depends on where the infection is, how severe it is, whether it has happened before, and your wider health.

Oral treatments may include an antifungal like fluconazole or terbinafine liquid, gel, lozenge, or tablet. Dentures usually need careful cleaning, and removing them at night may help. A healthcare professional may also look for dry mouth, denture irritation, or medicines that have contributed.

Vaginal treatment may use a cream, vaginal tablet, or medicine taken by mouth. Some vaginal creams and suppositories can weaken latex condoms and diaphragms for a time, so check the product information.

Treatment during pregnancy needs particular care. Topical vaginal antifungals are generally used rather than oral fluconazole. If you are pregnant, ask a pharmacist, midwife, or doctor to help you choose an appropriate treatment.

Thrush on the penis or skin is usually treated with a topical antifungal. Keeping the area dry and reducing friction can support healing. Avoid perfumed washes, deodorants, and harsh soaps on inflamed genital skin.

Take or apply treatment for the full recommended course, even if symptoms improve sooner. The correct course differs between products and affected body sites, so follow the label or professional advice rather than extending treatment yourself.

If symptoms do not improve, do not assume that you need repeated antifungal treatment. Another condition may be causing the symptoms, or laboratory testing may be needed to guide the next step.

Complications

Most thrush clears without lasting effects. Possible problems include cracked skin, ongoing soreness, and repeated episodes that affect comfort, sleep, feeding, or sex.

Severe oral thrush can make eating or drinking painful. In people with a significantly weakened immune system, Candida can sometimes extend into the oesophagus and cause painful or difficult swallowing.

Repeated self-treatment may delay diagnosis of another problem. Vaginal discharge with a strong smell, sores, bleeding, pelvic pain, or fever is not typical of uncomplicated thrush and should be assessed.

Prevention

Thrush cannot always be prevented because Candida normally lives on the body. Prevention focuses on reducing factors that allow it to overgrow.

For oral thrush, clean your teeth, gums, tongue, and dentures regularly. Remove dentures at night if you have been advised that it is safe to do so. If you use a corticosteroid inhaler, rinsing your mouth and spitting out the water after each dose may reduce oral thrush. Correct inhaler technique and a spacer, when suitable for the inhaler, may also help.

Keep skin folds clean and dry, and change out of damp clothing promptly. For genital symptoms, avoid douching, scented intimate products, and harsh soaps that may irritate the skin.

Use antibiotics only as prescribed. If you have diabetes, keeping your blood glucose within the range agreed with your care team may reduce repeated infections.

There is not strong evidence that probiotics treat vaginal thrush. Home remedies can irritate sensitive tissue and should not replace an accurate diagnosis or proven antifungal treatment.

Living with it and what to expect

A single episode often begins to improve within several days of starting suitable treatment. Full recovery can take longer, particularly when the skin or mouth is very inflamed.

Thrush does not usually cause permanent damage or affect long-term fertility. You can generally continue normal daily activities. You may prefer to avoid sex while genital skin is painful, and you should check whether a treatment affects barrier contraception.

Some people have repeated episodes over months or years. Recurrent vulvovaginal thrush is commonly defined as three or more symptomatic episodes within a year. Longer treatment plans may be considered after the diagnosis has been confirmed, but recurrence can still happen after treatment ends.

Keeping a record of symptoms, recent antibiotics, menstrual timing, medicines, and treatment responses may help identify patterns. Persistent or recurrent symptoms deserve reassessment rather than repeated self-treatment.

When to get medical help

Arrange a routine appointment or ask a pharmacist for advice if this is your first suspected

episode, you are unsure whether it is thrush, or over-the-counter treatment is unsuitable for you.

Seek routine medical assessment if:

Contact a healthcare service promptly if you have fever, feel generally unwell, cannot keep down fluids, or develop painful or difficult swallowing. A baby who is feeding poorly or producing fewer wet nappies should also be assessed promptly.

Call emergency services if you have difficulty breathing, severe swelling of the mouth or throat, collapse, or another sign of a severe allergic reaction. These are not usual symptoms of uncomplicated thrush.

- Symptoms keep returning or do not improve after treatment
- You are pregnant or breastfeeding
- You have diabetes or a weakened immune system
- Oral thrush continues without an obvious cause
- You have unusual discharge, sores, bleeding, or significant pain
- A baby has mouth patches or feeding difficulties

Common questions

Is thrush a sexually transmitted infection?

No. Genital thrush is caused by an overgrowth of Candida that may already be present on the body. Sex can sometimes trigger irritation or symptoms, but thrush can occur without sexual contact. Partners are not routinely treated unless they also have symptoms.

Can thrush go away without treatment?

Mild symptoms may sometimes settle, but it is difficult to know whether symptoms are truly caused by thrush without an assessment. Antifungal treatment usually shortens the episode. Persistent symptoms should be checked rather than repeatedly treated at home.

Why do I keep getting thrush?

Repeated episodes may be associated with antibiotics, hormonal changes, diabetes, immune-suppressing medicines, or a less common type of Candida. Sometimes no clear trigger is found. Recurrent symptoms may also turn out to have another cause, so testing can be helpful.

Can I have sex when I have thrush?

Thrush is not usually dangerous to a partner, but sex may worsen soreness or cause small cracks in irritated skin. Waiting until you feel comfortable can help. Be aware that some antifungal creams and vaginal products can weaken latex condoms or diaphragms temporarily.

Is thrush harmful during pregnancy?

Vaginal thrush is common during pregnancy and is not usually harmful to the pregnancy. Treatment choices are different, however. Speak with a pharmacist, midwife, or doctor before using treatment, particularly medicine taken by mouth.

Do yoghurt or probiotics cure thrush?

There is not enough reliable evidence that probiotics or yoghurt cure vaginal thrush. Applying food products to the vagina or irritated skin may cause further irritation. Antifungal medicines have better evidence for treating confirmed thrush.

Sources

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