Trichomonas Vaginalis

[Author Name(s), First M. Last, Omit Titles and Degrees]

[Institutional Affiliation(s)]

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# Response to Question 1

Trichomonas Vaginalis is a very common sexually transmitted infection and it is not caused by any virus. It is an anaerobic parasitic protozoan flagellated organism that goes to the epithelial cells of the urogenital area and this disease is common in the developed countries. In most of the cases, the infection is only restricted to the urogenital system and the infected condition is referred to as Trichomoniasis (Van Schalkwyk et al., 2015). This infection can be noticed by antigen testing by extracting a sample of vaginal discharge and appraised by nucleic acid amplification test (Van Schalkwyk et al., 2015).

# Response to Question 2

The cure for trichomonas vaginalis comprises of oral metronidazole either 500 mg twice a day or 2g per day, consecutive for a week. This treatment by oral metronidazole has a cure rate for up to 88% and the cure rate is higher when sexual partners are treated at once. However, about 5% of trichomonas vaginalis strains are resilient to this antibiotic. Such a situation requires a high dose of metronidazole or an alternative treatment i.e. Tinidazole 2 g orally one time. This drug is only available through special access to health and drugs program (Van Schalkwyk et al., 2015). Test of cure is not recommended following the treatment with the antibiotic, metronidazole. In addition, in pregnancy, preterm birth can be prevented by treating this disease with oral metronidazole (Van Schalkwyk et al., 2015).

# Response to Question 3

Several key risk factors associated with trichomonas vaginalis include unprotected intercourse with multiple sexual partners, and a history of STD diagnosis, alongside social and behavioral factors such as poor socioeconomic status, smoking, and drug abuse. Trichomonas vaginalis also contributes to many other health risks such as the high risk of HIV infection, high dangers of preterm labor. Therefore, it is recommended that the patients must be screened for additional sexually transmitted diseases (Paladine & Desai, 2018).

# Response to Question 4

What is the first thing you would suggest to a patient just diagnosed with the trichomonas vaginalis?

# References

Paladine, H. L., & Desai, U. A. (2018). Vaginitis: Diagnosis and treatment. *American Family Physician*, *97*(5).

Van Schalkwyk, J., Yudin, M. H., Allen, V., Bouchard, C., Boucher, M., Boucoiran, I., … Money, D. M. (2015). Vulvovaginitis: Screening for and management of trichomoniasis, vulvovaginal candidiasis, and bacterial vaginosis. *Journal of Obstetrics and Gynaecology Canada*, *37*(3), 266–274.