Vaginal Symptoms or Discharge - After Puberty



Office Hours Telehealth Triage Protocols | Pediatric | 2022

DEFINITION

- Vaginal symptoms occurring in an older girl or teenager after the onset of menarche, breast development or pubic hair
- Vaginal discharge is the most common symptom in teens
- Symptoms include pain, itching, discharge, and rashes
- Excluded: genital injury or vaginal bleeding (see those protocols)

TRIAGE ASSESSMENT QUESTIONS

Call EMS 911 Now

Sounds like a life-threatening emergency to the triager

See More Appropriate Protocol

Has an IUD and abnormal vaginal discharge

Go to Protocol: Contraception - IUD (Pediatric)

Pain or burning with urination is the main symptom

Go to Protocol: Urination Pain - Female (Pediatric)

Requests emergency contraception pills and NO vaginal symptoms

Go to Protocol: Contraception - Emergency (Pediatric)

Abdominal pain is the main symptom

Go to Protocol: Abdominal Pain - Female (Pediatric)

Followed an injury to the genital area

Go to Protocol: Genital Injury - Female (Pediatric)

Go to ED/UCC Now (or to Office with PCP Approval)

SEVERE (excruciating) vaginal or pelvic pain

R/O: acute salpingitis, ectopic pregnancy

Could be sexual abuse (Note: semen evidence may persist for 72 hours)

Child sounds very sick or weak to the triager

Reason: severe acute illness or serious complication suspected

Go to Office Now

Yellow or green vaginal discharge with fever

R/O: acute salpingitis, bacteremia

Can't pass urine and bladder feels very full

R/O: UTI

Constant vaginal or pelvic pain lasting > 2 hours

R/O: acute salpingitis, ectopic pregnancy, appendicitis

Widespread red rash on skin and abnormal vaginal discharge

R/O: staph or strep exotoxin rash, retained tampon

Discuss With PCP and Callback by Nurse Within 1 Hour

Monkeypox rash suspected (unexplained rash often starting on the face or genital area, then spreading quickly to the arms and legs) and KNOWN monkeypox exposure in last 21 days (Note: exposure means close contact with person who has a confirmed diagnosis of monkeypox)

Reason: PCP to determine the most appropriate site to be seen.

See in Office Today

Yellow or green vaginal discharge without fever

R/O: GC or Chlamydia cervicitis

Mild vaginal or pelvic pain

R/O: herpes simplex, FB, salpingitis

Fever

R/O: secondary UTI, early PID

Rash is tiny water blisters

R/O: herpes simplex, pustules

Genital area looks infected (e.g., draining sore, red lump, spreading redness)

R/O: Bartholin's cyst, cellulitis, STI

Vaginal foreign body suspected

Caller is worried teen has sexually transmitted infection (STI)

Reason: to relieve fear or prevent spread of STI

Monkeypox rash suspected by TRIAGER (unexplained rash often starting on the face or genital area, then spreading quickly to the arms and legs) and NO known monkeypox exposure in last 21 days (Exception: classic hand-foot-mouth disease, hives, insect bites, etc.)

See in Office Today or Tomorrow

Severe itching (interferes with school or sleep)

R/O: poison ivy, pubic lice, severe contact dermatitis

Discuss With PCP and Callback by Nurse Today

Caller requests prescription for emergency contraceptive pills

Reason: ECP's are available OTC; however, some patients want a prescription to get it covered by insurance

See in Office Within 3 Days

Vaginal yeast infection suspected (itchy white discharge, non-odorous). See care advice pending appointment.

R/O: associated STI

Bad-smelling vaginal discharge

R/O: trichomonas, bacterial vaginosis, STI

Itching persists after 24 hours of steroid cream

R/O: candidal vaginitis, pubic lice, poison ivy, contact dermatitis

Rash (e.g., redness, tiny bumps) of genital area present > 48 hours

R/O: herpes, pubic lice, genital warts

Lump near vaginal opening and on one side

R/O: Bartholin cyst (not painful) or abscess (painful)

Triager thinks teen needs to be seen for non-urgent problem

Caller wants teen seen for non-urgent problem

Home Care

Clear or whitish discharge after puberty

Reason: probably physiological discharge

Mild rash or itching of genital area present < 48 hours

Reason: probably mild contact dermatitis

Caller requests emergency contraceptive pills

Reason: emergency/morning-after contraceptive pills are OTC

HOME CARE ADVICE

Normal Vaginal Discharge in Teens

1. Reassurance and Education - Normal Vaginal Discharge in Teens:

- A physiological discharge usually begins in girls with the onset of puberty (1 or 2 years before menarche).
- It is due to increased estrogen levels.
- The discharge is clear, white or light yellow, liquid consistency and small in amount.
- These secretions are the equivalent of tears in the eyes or saliva in the mouth.
- They have a cleansing/protective purpose and are completely normal.
- Expected Course: Continues until menopause.

2. Note to Triager:

• Although many girls with physiological vaginal discharge can be reassured on the telephone, some will require an office visit for confirmation that this symptom is normal.

3. Call Back If Discharge:

- Becomes yellow or green
- Becomes foul-smelling
- Causes pain, itching or a rash

Mild Vaginal Rash or Itching

1. Reassurance and Education - Mild Vaginal Rash or Itching:

- Most rashes or itching in the genital area are due to irritants transferred there by the hand (e.g., animal saliva or plant pollen).
- These symptoms are safe to treat at home.

2. Clean the Area:

- Wash the area once with warm water to remove any irritant or allergic substance.
- Do not use soap.

3. Hydrocortisone Cream for Itching:

- For itchy rashes, apply a tiny amount of 1% hydrocortisone cream OTC 2 times per day for 2 days.
- Avoid continued use.
- Caution: Avoid if suspect genital herpes.

4. Antibiotic Ointment:

• For any cuts, sores or scabs that look mildly infected, apply an OTC antibiotic ointment 3 times per day until the appointment.

5. Expected Course:

• Most mild rashes from contact with irritants are greatly improved or resolved in 2 days.

6. Prevention of Rashes:

- Encourage your teen to wash her hands before touching her genital area.
- Avoid staying in wet clothing (e.g., bathing suits).

7. Call Back If:

- Rash spreads or becomes worse
- Rash lasts over 48 hours on treatment
- Fever occurs
- Your teen becomes worse

Vaginal Yeast Infection Suspected (pending appointment)

1. Reassurance and Education - Vaginal Yeast Infection Suspected:

- Your symptoms are probably caused by a yeast infection of the vagina, but you need to see your doctor to be sure you don't have anything else.
- OTC medications usually can help your symptoms until you are seen.

2. OTC Anti-Yeast Medicines:

- There are a number of OTC creams or suppositories for treatment of vaginal yeast infections.
- Examples include: Femstat, Gyne-Lotrimin, Mycelex in U.S.
- 7 day treatments are best (not the 1 or 3 day vaginal suppositories).
- Read and follow the package instructions closely.
- If you are pregnant, consult with your OB provider before using.
- Caution: Do not use the yeast medication during the 24 hours before your appointment (Reason: interferes with examination).

3. Prevention of Vaginal Symptoms:

- Keep the genital area dry.
- Wear cotton underpants.
- Avoid wet clothing (e.g., bathing suits), bubble baths, douches.

4. Call Back If:

- Discharge becomes yellow or green
- Discharge becomes foul smelling
- Fever or abdominal pain occur

Emergency Contraceptive Pills

- 1. Emergency (morning-after) Contraceptive Pills (ECPs):
 - Emergency (morning-after) contraceptive pills (ECPs) work well to prevent pregnancy. They work best if taken right away after unprotected sex, but can be taken up to 5 days after.
 - US: ECPs are available without a prescription for anyone without age restrictions (2013). Plan B One-Step is on the shelf in the family planning section. Other generic products may also be available on the shelf.
 - Canada: ECPs are OTC for all young women.
 - Contact your local drug store to determine if they have Plan B One Step or a generic alternative in stock. If you have trouble finding or buying this product, give us a call back. (Reason: Prescriptions are available as well for ECP's. Also, check with your insurance to see if they cover ECP's).
 - Follow the directions on the package.
 - ECP's do not prevent STI's.
 - Do not use if you are already pregnant.

2. ECP - Side Effects:

Nausea: 30-60% of womenVomiting: 5-20% of women

• Stomach pain: 10-20% of women

• Fatigue and headache: 10-20% of women

• Change in periods: 50% of women

Call Back if:

- Pregnancy suspected
- You or your teen have more questions
- Your teen develops symptoms

FIRST AID

N/A

BACKGROUND INFORMATION

Vaginal Discharge in Teens: Normal versus Abnormal

- A clear or whitish discharge is usually normal
- Yellow or green vaginal discharge usually means an infection.
- A foul-smelling discharge is also abnormal.
- An abnormal discharge can also cause a secondary **genital rash**, **itching or pain**.

Causes of Abnormal Vaginal Discharge in Teens

- Sexually Transmitted Infections (STIs). Infections that can be passed from either the female or male partner to the other. Gonorrhea (GC) and Chlamydia are the most well known. Symptoms include yellow or green vaginal discharge, pain with passing urine, pelvic pain, and bleeding. Another STI is Trichomoniasis. It causes a foamy, yellow-green foul-smelling discharge. Both partners need to be treated with antibiotics to prevent a recurrence.
- Yeast Vulvovaginitis. Vaginal discharge with vulval itching in teens is usually a Yeast infection.

Symptoms are a thick, white, cottage cheese-like, non-odorous discharge. Bacterial vaginosis gives a white-gray discharge, fishy odor discharge. Both only occur in females and are not STI.

- **Pelvic inflammatory disease (PID)** is an infection of the tubes connecting the ovaries to the uterus. PID is a serious infection which requires hospital admission and antibiotics by vein. The symptoms of PID include lower abdominal or pelvic pain, fever, and vaginal discharge.
- Vaginal Foreign Objects (such as a forgotten tampon) can cause a vaginal infection and discharge.

Expedited Partner Therapy (EPT) for Teens

- Definition: for patients diagnosed with a STD, the treatment of sexual partners without medical evaluation.
- Method: give the patient the extra antibiotic to pass on or write the extra prescription.
- Purpose: prevent re-infections and transmission to others.
- Main indication: the patient believes the sexual partner will not come in for evaluation and treatment. Mainly used for Chlamydia and GC infections.
- Endorsed by: AAP, ACOG, AMA and Society for Adolescent Health and Medicine.
- Laws: allowed in 45 States in 2020. First law was passed in California in 2001.
- Resource: www.cdc.gov/std/ept

Emergency Contraceptive Pills (ECPs)

- Following unprotected sex, some young women call for help with preventing an unwanted pregnancy.
- Indications for ECPs: Sexual assault, unprotected sexual intercourse, condom breakage or missed dosages of birth control pills.
- They must be taken within 5 days (120 hours) of intercourse, but the earlier the better. ECPs should be taken as soon as possible after sex to be most effective at preventing pregnancy.
- ECPs prevent 75-85% of pregnancies. The only contraindication is if the patient is already pregnant.
- In the US, Plan B One-Step is available without a prescription (OTC) to anyone. It is found on the shelves where condoms are sold in drug stores. It costs around \$40-50. Other generics (My Way and Next Choice One Dose) are also available on shelves. These products cost a little less (\$35-45). Two-pill generics (Levonorgestrel Tablets) are still available. They are stocked behind the pharmacy counter and available after showing the pharmacist an ID (e.g., driver's license) that proves your age (17 and older). They are available by prescription for those under 17.
- A second type of ECP is also available by prescription only. It contains ulipristal acetate. It is sold under the brand name ella (US) and ellaOne (Europe). It may be more effective than the OTC products, especially when used between 72 to 120 hours after sex.
- ECP Side Effects: nausea, vomiting, stomach pain, fatigue, headache, changes in periods
- ECP's may soon be covered by health insurance. Check with your insurance company.
- History (U.S.): In 2006, the FDA approved selling ECPs without a prescription (OTC) to those over age 18. In 2009, the FDA approved sales to anyone over age 17. In 2013, the FDA approved OTC sale of Plan B One Step without any age restriction.
- Availability in Canada: On April 19, 2005 the Canadian Ministry of Health approved the sale of Plan B without a prescription in pharmacies in Canada for all young women.
- ECPs can be recommended by phone to healthy adult women who request them. Follow-up is necessary only if 3 weeks pass without a normal menstrual period (missed period). However, doing the same for teenagers (especially young teenagers who are not emancipated minors) is a more complex issue. Therefore, these sexually-active young teens should be encouraged to have routine check-ups to receive screenings for STI's, advice regarding birth control options and guidance regarding sexual activities.

Monkeypox Disease: Basics

- Monkeypox is a rare disease caused by the monkeypox virus.
- Monkeypox remains an extremely rare disease in pediatrics (less than 1% of total cases). Usually

these children have household exposure to someone that has it.

- **Diagnosis:** Suspected by appearance of rash and monkeypox contact. Diagnosis confirmed by lab test on fluid from monkeypox sore.
- **Incubation period:** Symptoms usually start between 1 to 2 weeks after exposure. Range is from 4 to 21 days.
- **Contagious period:** A person can spread monkeypox from the time symptoms start until all the monkeypox sores have crusted over and fallen off (usually 7 to 14 days).
- Spread: Monkeypox spreads from person-to-person by direct skin contact. For example, spread can occur during intimate contact and sex. Most current cases occur in adult men who have sex with other men.
- **Isolation is Needed:** To protect others, stay at home (isolate) until all of the scabs have fallen off the monkeypox spots and the skin is healing. Avoid close contact with others in your home.
- **Treatment:** Symptoms are treated with home remedies and OTC meds. Prescription medicines are not needed for most healthy people.
- Outcome: Most healthy people do not develop any complications. Death rate is less than 1 percent.
- Vaccine: There is a vaccine available to help prevent monkeypox in people who are exposed as well as those that are at high-risk.

Monkeypox Rash Appearance

- Initial symptoms are fever, headache, muscle ache and swollen lymph nodes. These symptoms last 1 to 5 days. Small sores may appear in the mouth.
- A rash appears about 1 to 3 days after the start of the fever. Sometimes people get the rash first and afterwards other symptoms.
- The rash usually starts on the face, sometimes on the genital area. It spreads quickly within 24 hours to the arms and legs, even the palms and soles.
- Each monkeypox sore is about 0.5 cm to 1 cm wide. Each sore progresses through the following stages: small red spot (macule), small red bump (papule), small water blister (vesicle), small cloudy blister (pustule). Then, the sore crusts over and the scab falls off. The entire process takes about 2 weeks.
- The rash is usually the same size and at the same stage on different areas of the body, unlike chickenpox.

Expert Reviewer

- Molly Richards, MD, Adolescent Medicine, Family Planning Clinic, Children's Hospital Colorado, Aurora, Colorado
- The author is extremely grateful for this critical review.

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Content Set: Office Hours Telehealth Triage Protocols | Pediatric

Version Year: 2022

Last Revised: 8/29/2022 **Last Reviewed:** 8/29/2022