

Interview with Alexandra Möhringer, General Practitioner, Germany

How do you diagnose a vulvovaginal *C. albicans* infection? Which symptoms lead to a conclusion that the patient is infected with pathogenic *C. albicans*?

- I'm diagnosing *C. albicans* infections solely through the symptoms of the patient like itching, burning, potentially discharge. But we're not doing swabs.

How often do you diagnose a vaginal *C. albicans* infection in your daily routine as a gynecologist?

- Since I'm a general practitioner I don't diagnose a *C. albicans* infection very often, meaning approximately once a month.

Which medication do you prescribe for patients that are infected with *C. albicans*?

- Normally I first prescribe Clotrimazol (Canifug cremolum). When the patient is suffering from recurring infections I prescribe Econazol (for example Gyno-Pevaryl)

What do you think about a fast-detection-kit for *Candida albicans*, that shows a quantitative result of a *C. albicans* infection?

- I really like the idea of an easy-to-use test for detecting *C. albicans* since this would lead to a more targeted and therefore better therapy. But I would like the test to be done at a practitioner, so that in case of a *C. albicans* infection the physician could prescribe the right antimycotics.

Do you think that women are well informed about the commensal microorganisms in the vaginal flora (in matters of bacterial vs. fungal infection)? Are women well informed about hygiene of the genital area and with it a possible prevention of overgrowth of bacteria/fungi through too intense hygiene (washing genital area with a lot of shower gel)?

- No, women are mostly very poorly educated about the natural vaginal flora. This leads to wrong hygiene (destroying the normal flora by using too much sanitary products) and furthermore to an infection with fungi or bacteria.