SUMMARY AND CONCLUSION

A comparative study was done between three lines of treatment of trichomonas vaginalis (T.V.) namely; Metronidazole, Tinidazole and SolcoTrichovac.

Four hundred and seventy female outpatients, complaining of vaginal discharge and/or pruritis were examined clinically and microscopically by wet smear preparation. T.V. was diagnosed in 135 cases (28.7%).

Our study showed that:

- 1- The infection was more in multiparous women and the incidence of T.V. increased with progress of age till the age of 40 years, then it declined.
- 2- Laboratory diagnosis was mandatory, as none of the symptoms and signs can be used as a clinical parameter in diagnosis of T.V.
- One month after treatment with a single oral dose of Tinidazole, the cure rate was 96.7%, compared to 90% for a single oral dose of Metronidazole and 73.3% for SolcoTrichovac (P>0.5).
- 4- Three months after treatment with a single oral dose of Tinidazole, the cure rate was 79.3% compared to 77.8% for Metronidazole and 83.3% for SolcoTrichovac (P>0.05).

- 5- SolcoTrichovac was the drug of choice for long term treatment of T.V. as the cure rate after one year 93.3%, while the cure rate for Tinidazole was 65.5% and for Metronidazole was 62.9% (P<0.05).
- Reinfection rate with Metronidazole and Tinidazole was relatively high as it was 37.03% for Metronidazole and 44.8% for Tinidazole after one year (P>0.05). On the other hand, no reinfection was detected with SolcoTrichovac after the same period.
- 7- Our study showed that SolcoTrichovac vaccination was of definite value in the treatment of T.V. and in decreasing the incidence of reinfection.
- No major side effect was reported for the three methods of treatment, except in one patient who was treated by single dose Metronidazole as she had severe attack of vomiting 15 minutes after swallowing the tablets.
- 9- Combined therapy can be used for the treatment of T.V. Tinidazole or Metronidazole for treatment and relieve of acute symptoms and SolcoTrichovac for resistant cases and in decreasing the incidence of reinfection.