

# BREAST AND NIPPLE THRUSH TREATMENT

## GENERAL ADVICE

- Try to keep your nipples dry. Change breast pads often. Expose your nipples to the air when possible.
- Treat fungal (candida) infections in other locations, and in other family members. For example: treat any co-existing vaginal thrush; athlete's foot; ring worm; baby's mouth; nappy rash.
- Consider adding Laundry Sanitiser (ie Canestan) to your laundry. Wash items exposed to thrush (ie bras, breast pads, underwear) in hot water and air dry in the sun.
- Sterilise baby's dummies once a day if baby is being treated for oral thrush. Consider replacing dummies every week.
- Wash hands after changing nappies. Wash hands or use alcohol-gel before and after applying creams.

## MEDICATION

### Baby

- *Oral thrush*: baby will need to use Daktarin (miconazole) oral gel 4 times a day for 1 week. If symptoms are gone, continue to use once daily for another week. It's important to treat for another full week after resolution of symptoms. It is important to administer with your finger and sweep the mouth/gums. DO NOT USE THE SPOON. If this is not available, Nilstat is another option.
- *Nappy rash*: use a nappy cream that contains an anti-fungal OR use an antifungal cream (ie Lamisil, Daktarin, Canestan) under zinc-based barrier cream with nappy changes 4 times a day. Sudocream is 15% zinc and Desitin is 40% zinc and good for severe nappy rash.

### Mum

- *Nipple thrush*: miconazole oral gel after most breast feeds and at least 4 times a day. If this is not available, use miconazole cream and wipe off prior to feed/pump.
- *Breast thrush (or resistant thrush infection)*: oral fluconazole 50mg tablet, 3 tablets (ie 150mg) every 2-3 days for 3-4 doses. A private script for 28 tablets is much cheaper than several doses of over the counter Diflucan. If persistent: oral fluconazole 200mg stat; then 100mg daily for 7-10 days. (Care should be taken if also on domperidone or some antibiotics – an ECG may be needed to test for QTc prolongation).
- *Persistent nipple thrush*: Gentian Violet (less than 0.5% aqueous solution) made up by a compounding chemist. Apply to the nipples daily with a cotton bud, for a maximum of 7 days. It is messy and can stain clothes. To reduce staining to baby's mouth, apply olive oil or vaseline to baby's cheeks and lips prior to a breastfeed.
- *Vaginal thrush*: vaginal cream or pessaries (ie Canestan). The 6-day courses are usually more effective. If on antibiotics, you may need to add a second course after completion of the antibiotics. Alternatively, ensure at least 3-4 days of a 6-day vaginal treatment is taken after stopping the antibiotics.
- *Tinea/ring worm*: use any anti-fungal cream or ointment (ie Lamisil – terbinafine; Daktarin – miconazole; Canestan – clotrimazole). Apply 3 times a day until it's gone, then continue with daily treatment for one week. Lamisil is only once a day dosing and is better for compliance.