

DTB CME/CPD Answers



Drug and Therapeutics Bulletin

Dequalinium for bacterial vaginosis

Question 1

SP, a 25-year-old accountant, consults her GP about fishy-smelling vaginal discharge that has been present for 2 weeks. She is in a stable monogamous relationship and has no previous medical or gynaecological history. Physical examination shows a white discharge in the posterior vaginal fornix, with no vaginal erythema or bleeding. The fluid is tested and has a pH >4.5. The GP diagnoses bacterial vaginosis (BV). What is the prevalence of BV in the UK?

- a. <5%
- b. 5-10%
- c. 11-30%
- d. 31-50%
- e. >50%

Answer: c. BV is very common, with estimates of prevalence in the UK ranging from 12% in a study of pregnant women to 30% in women undergoing termination of pregnancy.

Question 2

Which one of the following is the current recommended first-line management option for SP?

- a. Reassurance, no further treatment required
- b. Oral metronidazole 1,200mg as a single dose
- c. Oral tinidazole 2g daily for 2 days
- d. Oral clindamycin 150mg twice daily for 5 days
- e. Oral metronidazole 400mg twice daily for 5-7 days

Answer: e. The preferred first line treatment is oral metronidazole at a dose of 400mg twice daily for 5-7 days.

Question 3

SP returns to see her GP after 6 weeks, as she has had a recurrence of the symptoms of BV. What percentage of women experience a recurrence within 3 months of successful treatment?

- a. 1%
- b. 7.5%
- c. 25%
- d. 40%
- e. 70%

Answer: e. Recurrence of BV is very common, occurring in up to 70% of women within 3 months of successful treatment.

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Question 4

Which one of the following statements regarding the primary action of dequalinium is correct?

- a. It requires systemic absorption for antibacterial activity
- b. It acts by altering bacterial cell permeability**
- c. It is extensively absorbed after vaginal administration
- d. It acts by disrupting the bacterial nucleus
- e. It is only active against gram-negative bacteria

Answer: b. In contrast to other treatments for BV, dequalinium acts as a surface anti-infective and antiseptic agent rather than as an antibiotic, and alters cell permeability.

Question 5

A non-inferiority trial compared dequalinium vaginal tablets with clindamycin vaginal cream. What was the difference between the two treatments in clinical cure rate at 7 days?

- a. 1%
- b. 3%**
- c. 5%
- d. 7%
- e. 9%

Answer: b. Dequalinium tablets had a clinical cure rate of 81.5% in the per-protocol population, compared with 78.4% for clindamycin cream (treatment difference 3.1%, 95% CI -7% to +13%).