Bacterial Vaginosis – CDC Basic Fact Sheet

**Bacterial vaginosis is a common, treatable, vaginal condition. BV can increase your chance of getting a**[**sexually transmitted disease (STD)**](https://www.cdc.gov/std/general/default.htm)**. This fact sheet answers general questions about BV.**

**What is bacterial vaginosis (BV)?**

[Bacterial vaginosis (BV)](https://www.cdc.gov/std/bv/default.htm) is a condition that happens when there is too much of certain bacteria in the vagina. This changes the normal balance of bacteria in the vagina.

**How common is BV?**

BV is the most common vaginal condition in women ages 15-44.

**How is BV spread?**

Researchers do not know the cause of BV. However, we do know the condition most often occurs in those who are sexually active. BV is a result of an imbalance of “good” and “harmful” bacteria in a vagina. Douching, not using [condoms](https://www.cdc.gov/std/treatment-guidelines/clinical-primary.htm#anchor_1613585510984), and having new or multiple sex partners can upset the normal balance of vaginal bacteria, increasing your risk for getting BV.

We also do not know how sex causes BV. There also is no research to show that treating a sex partner affects whether someone gets BV. Having BV can increase your chances of getting other STDs.

BV rarely affects those who have never had sex.

You cannot get BV from toilet seats, bedding, or swimming pools.

**How can I avoid getting BV?**

Healthcare providers and scientists do not completely understand how BV spreads or know how best to prevent it.

The following basic prevention steps *may* help lower your risk of getting BV:

* Not having sex;
* Limiting your number of sex partners;
* Not douching; and
* Using condoms [the right way](https://www.cdc.gov/condomeffectiveness/index.html) every time you have sex.

**I’m pregnant. How does BV affect my baby?**

Treating BV during pregnancy is very important. If you are pregnant and have BV, your baby is more likely to be born early (premature) or at a low birth weight. Low birth weight means having a baby that weighs less than 5.5 pounds at birth.

**How do I know if I have BV?**

Many people with BV do not have symptoms. If you do have symptoms, you may notice:

* A thin white or gray vaginal discharge;
* Pain, itching, or burning in the vagina;
* A strong fish-like odor, especially after sex;
* Burning when peeing; and
* Itching around the outside of the vagina.

**How will my healthcare provider know if I have BV?**

A healthcare provider will examine your vagina for signs of discharge. They also can test a sample of vaginal fluid to determine if BV is present.

**Is there a cure for BV?**

A healthcare provider can [treat BV](https://www.cdc.gov/std/treatment-guidelines/bv.htm) with antibiotics. If you have symptoms, you should be checked and treated by a healthcare provider. It is important to take all the medicine your provider prescribes, even if your symptoms go away. Treatment also may reduce the risk for getting other STDs. BV can return even after treatment.

Male sex partners of women with BV do not need treatment. However, BV can spread between female sex partners.

**What happens if I don’t receive treatment?**

At times, BV will go away without treatment. However, treatment can help avoid the increased chance of some serious health risks associated with BV, including:

* Getting or transmitting HIV;
* Delivering your baby too early if you have BV while pregnant; and
* Getting other STDs like [chlamydia](https://www.cdc.gov/std/chlamydia/default.htm) and [gonorrhea](https://www.cdc.gov/std/gonorrhea/default.htm). These bacteria can cause [pelvic inflammatory disease (PID)](https://www.cdc.gov/std/pid/stdfact-pid.htm), which can make it difficult for you to have children.

**Sources**

Workowski, KA, Bachmann, LH, Chang, PA, et. al. [Sexually Transmitted Infections Treatment Guidelines, 2021](https://www.cdc.gov/std/treatment-guidelines/default.htm). MMWR Recomm Rep 2021; 70(No. 4): 1-187.

Hillier S and Holmes K. Bacterial vaginosis. In: K. Holmes, P. Sparling, P. Mardh et al (eds). Sexually Transmitted Diseases, 3rd Edition. New York: McGraw-Hill, 1999, 563-586.