How to Treat a Vaginal Infection with a Clove of Garlic

by Judy Slome Cohain, CNM

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Photo by Jennifer Rosenberg

Garlic kills yeast. Those who bake bread know not to add garlic while the dough is rising or it will kill the yeast. Instead, garlic is added to the dough after it has risen, just before baking it in the oven.

A fresh garlic clove can easily cure a yeast infection. The trick is to catch the infection early. A woman who suffers from frequent yeast infections knows the feeling well. The first day, she feels just a tickle of itchiness that comes and goes. The next day, or sometimes two or three days later, the vaginal discharge starts to look white and lumpy like tiny bits of cottage cheese. By this time, she has a full-blown yeast infection and the lips of the vagina are often red and sore.

If a woman can pay attention to the first tickling of the yeast infection, she can use the following treatment. Take a clove of fresh garlic and peel off the natural white paper shell that covers it, leaving the clove intact. At bedtime, put the clove into the vagina. In the morning, remove the garlic clove and throw it in the toilet. The garlic often causes the vagina to have a watery discharge. One night's treatment may be enough to kill the infection, or it might have to be repeated the next night. Continue one or two days until all itchiness is gone. The reason that the treatment is done at bedtime is that there is a connection between the mouth and the vagina. The moment the garlic is placed in the vagina, the taste of the garlic travels up to the mouth. Most people will find this strong flavor annoying during the day, so the treatment is recommended for nighttime.

If the infection has advanced to the point that a woman has large quantities of white discharge and red sore labia, it can still be treated by garlic but with a higher dose. Use a dry tissue to remove some of the discharge, then take a clove of garlic and cut it in half. Put it in the vagina at bedtime and repeat this for a few nights. If there is no improvement, she might consider a conventional over-the-counter treatment because it is a shame to suffer for many days. Remember that a woman should never douche during a vaginal infection. Yeast loves water and any water will make it grow faster.

Any cut in the clove makes the activity of the garlic stronger. Thus, the more of the inside of the clove that is exposed, the higher the dose. Each woman should learn the dose that works best for her, from the lowest dose, an uncut clove, to a clove with one or more small fingernail slits, to a clove cut in half.

If a high dose of garlic, a cut-open garlic clove, is inserted in a healthy vagina, it will often "burn" the healthy skin. When the woman is suffering from an advanced yeast infection, the skin is already red and "burned" and the garlic cures the infection by killing the yeast. Then the skin repairs itself. By the way, veterinarians have been using garlic to heal infections in livestock for many years. If drug companies could patent garlic and make money off of it, they would be advertising it everywhere!

Garlic has been shown in vitro (in laboratory petri dishes) to kill bacteria also. In some important research done in China (1), garlic was shown to inhibit the growth of all of the following

microorganisms: *Escherichia coli, Salmonella typhimurium, Vibrio parahaemolyticus, Pseudomonas aeruginosa, Proteus vulgaris, Staphylococcus aureus, Mycobacterium phlei, Streptococcus faecalis, Bacillus cereus and Micrococcus luteus.*

Researchers found that garlic lost its antibacterial activities within 20 minutes of being boiled at 100° C. At the Maxwell Finland Laboratory for Infectious Diseases in the Boston Medical Center, researchers examined the use of garlic for ear infections (2). They found that fresh garlic was bacteriocidal, killing even the dangerous bacterium *Streptococcus agalactiae* (commonly known as Group B Strep) but is heat- and acid-labile and loses activity when cooked or taken by mouth.

Group B Strep (GBS) can kill newborns, most commonly premature babies. Current U.S. protocols call for culturing women toward the end of pregnancy to see if they are GBS carriers, since newborn strep infections occur more often—but not exclusively—in babies of women who culture positive for beta-strep. About 15 to 30 percent of women carry the beta-strep bacterium, the vast majority without any symptoms, although at least two women with GBS vaginitis have been documented (3). The risk of contracting GBS by infants probably increases with the quantity of GBS in the birth canal (4). Between 1–3 in 1,000 babies develop beta-strep infections after birth (5). Many of these infections may be iatrogenic, caused by the hospital protocols. The strep bacillus originates in the anus. When the membranes are ruptured, fluid washes down and out of the vagina—until someone checks the cervix. Every time a cervical check is done, the examiner may carry GBS up on his or her gloved finger and deposit it on the cervix. Inserting an internal electro-fetal monitor electrode or an internal monitoring catheter also opens a pathway for bacteria to enter. Any of these scenarios could also explain why length of time after rupture of membranes correlates with infection rate. No randomized controlled studies have been undertaken comparing women with no vaginal checks or internal monitors to women with frequent vaginal checks. Intrapartum prophylaxis with intravenous antibiotics, preferably targeted on GBS-colonized parturients with risk factors, is, at present, considered the "new standard of care." However, its efficacy and safety at preventing early-onset infection is still in debate. [*Editor's Note:* See "Facing the Challenge of Group B Strep" in *Midwifery Today*, Issue 63, Autumn 2002.] Vaginal chlorhexidine disinfection during labour in GBS-colonized women may, in addition, offer a minor contribution to prevention. Chlorhexidine is a compound with plaque-inhibiting effects and available only by prescription in the U.S.* Its side effects include staining of teeth, restorations and the tongue, bitter taste and other disturbances, such as dryness of the mouth and development of oral ulceration (6).

A fresh garlic clove inserted into the vagina for one or two nights will also, most likely, reduce the colonization of the vagina with GBS, with no known side effects, besides garlic breath. But none of the funding agencies or drug companies are interested in providing support for research—likely because the product could not be patented. Chlorhexidine vaginal gel or wash reduces GBS colonization, so the idea of using local measures is not too radical. But at this time, a clinical trial in the U.S. to demonstrate efficacy of these topical methods will be almost impossible, given the established standard of care (intrapartum

antibiotics) established by the CDC. So garlic experiments to reduce neonatal GBS will have to take place outside of the U.S.

Judy Slome Cohain, CNM, has run All the Way Homebirth practice in Israel since 1983. She would love to hear from women who have tried to change a positive GBS culture to a negative one by using garlic. Please email her at judyslome@hotmail.com with the outcomes, which will be collected for future research.

*A compound of chlorhexidine is the main ingredient in Hibiclens®, an antimicrobial skin cleanser available over the counter.

References

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