

ACTINOMYCES-LIKE ORGANISMS IN SMEARS

Actinomyces-like organisms require no specific intervention in the vast majority of patients and are usually seen in patients using an IUCD (including the Mirena coil).

If asymptomatic then:

- The coil does not need to be removed and antibiotics are not required
- The patient should have an abdominal and pelvic examination
- The patient should be warned of the small possibility of developing pelvic actinomycosis and advised to return should she develop symptoms
- Family planning follow-up should be arranged every six months and should include enquiry regarding new symptoms and a pelvic examination
- Repeat cytology is not required unless the smear was graded inadequate/abnormal
- If the asymptomatic patient wishes the device to be removed or it is due for removal then it need not be sent for culture.

If the patient complains of specific symptoms the device may need to be removed, after first ensuring that the patient has not had sexual intercourse in the preceding five days.

These symptoms include:

- Pelvic pain
- Deep dyspareunia
- Intermenstrual bleeding (after six months of a device being in situ)
- Vaginal discharge, dysuria or significant pelvic tenderness.

If the device is removed because the woman has any of the above symptoms:

- the device should be sent for culture and alternative contraception advised
- a course of antibiotics (such as amoxicillin 250mg three times daily for two weeks in penicillin sensitive patients or erythromycin 500mg three times daily for two weeks in penicillin resistant patients) should be given and a gynaecological opinion arranged to ensure that the symptoms or signs have been resolved.

Evidence: Good practice.

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