Chronic vaginal candidiasis responsive to biotin therapy in a carrier of biotinidase deficiency.

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Abstract

BACKGROUND:
Many patients experience recurrent or persistent episodes of vaginal candidiasis. Some of these women might be carriers of an inborn error of biotin metabolism (either biotinidase deficiency or holocarboxylase synthetase activity). These women might benefit from administration of pharmacologic amounts of biotin.

CASE:
A 38-year-old gravida 2, para 2 carrier of biotinidase deficiency presented with a 14-month history of persistent vaginal candidiasis, despite appropriate therapy. After 3 months of pharmacologic doses of biotin, her symptoms resolved completely.

CONCLUSION:
Given that 1 in every 123 individuals is predicted to be a carrier of biotinidase deficiency, there might be other women with chronic vaginal candidiasis who will respond to biotin administration.

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