



**Premarital Packet:
Helpful information
For you**

Abnormal PapTest Results

The Pap test is a way to find cell changes on the cervix. If a Pap test shows these changes, the result will be called abnormal. In some cases, these abnormal cells may lead to cancer. You may need treatment. In most cases, the treatment will be performed in your doctor's office with good results.

The Cervix

The cervix is the lower, narrow end of a woman's uterus. It opens into the vagina (the birth canal). The cervix is covered by a thin layer of tissue. This tissue is like the skin inside your mouth.

The Pap Test

The Pap test, sometimes called a Pap smear or cervical cytology screening, is an important part of women's health care. This test looks at cells taken from the cervix.

Most labs in the United States use the "Bethesda System" to Describe Pap test results. With this system, your results will be placed in one of several groups:

- Normal (negative): There are no signs of cancer or precancer.
- Atypical Squamous Cells (ASC): Some abnormal cells are seen.
- SIL (squamous intraepithelial lesion): Changes are seen in the cells that may show signs of precancer.
 - LSIL: Early, mild changes are seen in the cells.
 - HSIL: Moderate or severe cell changes are seen.
- Atypical glandular cells: Cell Changes show that further testing is needed because of an increased risk of precancer or cancer of the cervix, uterus or other female reproductive organs.
- Cancer: Abnormal cells have spread deeper into the cervix or to other tissues.

Abnormal Results

A Pap test result that is not normal usually is caused by an infection such as human papillomavir (HPV) or types of vaginal irritation.

Squamous Intraepithelial Lesion

SIL is found in women of all ages. It can range from mild, moderate and severe to carcinoma in situ (CIS). CIS is not yet cancer.

Human Papillomavirus Infection

Human papillomavirus infection can cause abnormal Pap test results. However, most women infected with HPV have normal Pap test results. It is a very common infection that can be passed from person to person.

Certain types of HPV are linked to cancer in both women and men.

In some cases, an HPV test can be done to help clarify the Pap test results.

Further Testing

A woman who receives an abnormal Pap test result may need further testing. Sometimes you may only need a repeat Pap test because many cell changes go away on their own.

Further testing methods, such as colposcopy and biopsy, can help identify the reason for the abnormal test result.

Colposcopy

Colposcopy lets your doctor look at the cervix through a special device similar to a microscope. It can detect problems of the cervix that cannot be seen with the eye alone.

Biopsy

If an area of abnormal cells is seen, your doctor may decide that a cervical biopsy is needed.

Treatment

Treatment of cervical changes depends on the severity of the problem.

Electrosurgical Excision

Electrosurgical excision often is used for women with HSIL. This method is sometimes called a loop electrosurgical excision procedure (LEEP). LEEP often is done in the doctor's office.

Cone Biopsy

Another technique used to obtain a tissue sample is a cone biopsy. In this procedure, a cone shaped wedge of the cervix is removed. General or spinal anesthesia may be used for a cone biopsy.

Freezing and Laser Treatment

With cryotherapy, abnormal tissue is frozen and later sheds. Sometimes, laser treatment in which a beam of light destroys abnormal tissue is used.

Risks

Although problems seldom occur after treatment for cervical changes, there are some risks. You may be at increased risk for preterm birth or infertility. There is also a risk of infection after the procedure.

Follow-up

It may take a few weeks for your cervix to heal. While your cervix heals, you may have:

- Vaginal bleeding (less than a normal menstrual flow)
- Mild cramping
- A brownish-black discharge
- A watery discharge (with cryotherapy)

For a few weeks after the procedure, you should not have sex or use tampons or douches.

Finally...

If you are concerned about abnormal Pap test results, talk to your doctor. Keep in mind that most problems that cause abnormal Pap test results, when found early, can be treated.

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Genital HPV Infection

How common is HPV?

Approximately 20 million people are currently infected with HPV. At least 50 Percent of sexually active men and women acquire genital HPV infection at some point in their lives. By age 50, at least 80 percent of women will have acquired genital HPV infection. About 6.2 million Americans get a new genital HPV infection each year.

What is genital HPV infection?

Genital HPV infection is a sexually transmitted disease (STD) that is caused by human papillomavirus (HPV). Human papillomavirus is the name of a group of viruses that includes more than 100 different strains or types. More than 30 of these viruses are sexually transmitted, and they can infect the genital area of men and women including the skin of the penis, vulva (area outside the vagina), or anus, and the linings of the vagina, cervix, or rectum. Most people who become infected with HPV will not have any symptoms and will clear the infection on their own.

Some of these viruses are called “high-risk” types, and may cause abnormal Pap tests. They may also lead to cancer of the cervix, vulva, vagina, anus, or penis. Others are called “low-risk” types, and they may cause mild Pap test abnormalities or genital warts. Genital warts are single or multiple growths or bumps that appear in the genital area, and sometimes are cauliflower shaped.

What are the signs and symptoms of genital HPV infection?

Most people who have a genital HPV infection do not know they are infected. The virus lives in the skin or mucous membranes and usually causes no symptoms. Some people get visible genital warts, or have pre-cancerous changes in the cervix, vulva, anus, or penis. Very rarely, HPV infection results in anal or genital cancers.

Genital warts usually appear as soft, moist, pink, or flesh-colored swellings, usually in the genital area. They can be raised or flat, single or multiple, small or large, and sometimes cauliflower shaped. They can appear on the vulva, in or around the vagina or anus, on the cervix, and on the penis, scrotum, groin, or thigh. After sexual contact with an infected person, warts may appear within weeks or months, or not at all.

Genital warts are diagnosed by visual inspection. Visible genital warts can be removed by medications the patient applies, or by treatments performed by a health care provider. Some individuals choose to forego treatment to see if the warts will disappear on their own. No treatment regimen for genital warts is better than another, and no one treatment regimen is ideal for all cases.

What is the connection between HPV infection and cervical cancer?

All types of HPV can cause mild Pap test abnormalities which do not have serious consequences. Approximately 10 of the 30 identified genital HPV types can lead, in rare cases, to development of cervical cancer. Research has shown that for most women (90 percent), cervical HPV infection becomes undetectable within two years. Although only a small proportion of women have persistent infection, persistent infection with “high-risk” types of HPV is the main risk factor for cervical cancer.

A Pap test can detect pre-cancerous and cancerous cells on the cervix. Regular Pap testing and careful medical follow-up, with treatment if necessary, can help ensure that precancerous changes in the cervix caused by HPV infection do not develop into life threatening cervical cancer, the Pap test used in U.S. cervical cancer screening programs is responsible for greatly reducing deaths from cervical cancer. For 2004, the American Cancer Society estimates that about 10,520 women will develop invasive cervical cancer and about 3,900 women will die from this disease. Most women who develop invasive cervical cancer have not had regular cervical cancer screening.

How do people get genital HPV infections?

The types of HPV that infect the genital area are spread primarily through genital contact. Most HPV infections have no signs or symptoms; therefore, most infected persons are unaware they are infected, yet they can transmit the virus to a sex partner. Rarely, a pregnant woman can pass HPV to her baby during vaginal delivery. A baby that is exposed to HPV very rarely develops warts in the throat or voice box.

How is genital HPV infection diagnosed?

Most women are diagnosed with HPV on the basis of abnormal Pap tests. A Pap test is the primary cancer screening tool for cervical cancer or pre-cancerous changes in the cervix, many of which are related to HPV. Also, a specific test is available to detect HPV DNA in women. The test may be used in women with mild Pap test abnormalities or in

women >30 years of age at the time of Pap testing. The results of HPV DNA testing can help health care providers decide if further tests or treatment are necessary.

No HPV tests are available for men.

How can people reduce their risk for genital HPV infection?

The surest way to eliminate risk for genital HPV infection is to refrain from any genital contact with another individual.

For those who choose to be sexually active, a long-term, mutually monogamous relationship with an uninfected partner is the strategy most likely to prevent future genital HPV infections. However, it is difficult to determine whether a partner who has been sexually active in the past is currently infected.

For those choosing to be sexually active and who are not in long term mutually monogamous relationships, reducing the number of sexual partners and choosing a partner less likely to be infected may reduce the risk of genital HPV infection. Partners less likely to be infected include those who have had no or few prior sex partners. HPV infection can occur in both male and female genital areas that are covered or protected by a latex condom, as well as in areas that are not covered. While the effect of condoms in preventing HPV infection is unknown, condom use has been associated with a lower rate of cervical cancer, and HPV associated disease.

Is there a cure for HPV?

There is no “cure” for HPV infection, although in most women the infection goes away on its own. The treatments provided are directed to the changes in the skin or mucous membrane caused by HPV infection such as warts and pre-cancerous changes in the cervix.

Where can I get more information?

Division of STD Prevention (DSTDP)
Centers for Disease Control and Prevention

[Http://www.cdc.gov/std](http://www.cdc.gov/std)

Order publications Online at www.cdc.gov/std/ubs/

STD information and referrals to STD Clinics

CDC-INFO

1-800-CDC-INFO (800-232-4636)

TTY: 1-888-323-6348

In English, en Español

CDC National Prevention Information Network (NPIN)

P.O. Box 6003

Rockville, ME 20849-6003
1-800-458-5231
1-888-282-7681 Fax
1-800-243-7012 TTY
E-mail: info@cdcnipin.org
www.cdcnipin.org

American Social Health Association (ASHA)
P.O. Box 13827
Research Triangle Park, NC 27709-3827
1-800-783-9877
www.ashastd.org

Medical Library

Birth Control Pills

Birth control pills (also called oral contraceptives or “the pill”) are used by millions of women in the United States to prevent pregnancy. The pill is safe and effective for most women.

About Birth Control Pills

Birth control pills are a type of hormonal birth control. With these methods, a woman takes hormones similar to those her body makes naturally. These hormones prevent ovulation. When there is no egg to be fertilized, pregnancy cannot occur. The hormones also cause changes in the cervical mucus and uterus that help prevent pregnancy.

The pill must be prescribed by a doctor. It is a very effective form of birth control. When women use the pill correctly, fewer than one in 100 will get pregnant over one year. However, about three in 100 typical users (3 percent) will become pregnant.

Combination Pills

Combination birth control pills contain the hormones estrogen and progestin (a synthetic form of the hormone progesterone). There are many different brands with different doses of hormones. This gives a woman a choice in finding a pill that is right for her.

How They Work

Estrogen and progestin, which are produced in the ovaries, affect the menstrual cycle and fertility. By altering the natural levels of these hormones, birth control pills can affect ovulation and other reproductive functions.

How to Take Them

You can start taking the pill on the first day of your period. You will not need a backup method of birth control.

For convenience, many pill users start taking the pill on the Sunday after their periods start. You can start even if you are still bleeding.

Pills only work if you take them correctly. Do not skip pills for any reason—even if you bleed between periods or feel sick.

If You Miss a Pill

You may forget to take a pill once in a while. If you forget to take one pill, take it as soon as you remember.

Take the next pill at the normal time. It is okay if you have to take two pills in the same day.

If you forget to take two or more pills, use a backup method of birth control.

If you miss some pills, you may have some spotting or light bleeding even if you make up the missed pills. These side effects are not harmful.

Benefits

The combination birth control pill has benefits in addition to preventing pregnancy. The pill also helps to keep your periods regular, lighter, and shorter and reduces menstrual cramps.

Side Effects

Some women have side effects when they are on the pill. These may include:

- Headache
- Tender breasts
- Nausea
- Irregular bleeding

- Missed periods
- Depression

Most side effects are minor and often go away after a few months of use.

Risks

Some women should not use birth control pills. The pill may not be a good choice for women who smoke and are older than age 35 years and have certain health problems or have a family history of certain health problems. Talk to your doctor about whether the pill is a good choice for you.

Although rare, the pill can cause severe illness in some women. The most serious problem is cardiovascular disease, such as blood clots in the legs or lungs, heart attack or stroke.

Progestin-Only Pills

Some women may want or need to take another type of birth control pill that contains only progestin. It does not contain estrogen. It is called the progestin-only pill or the minipill. This type of pill is not as effective as pills that contain estrogen.

How They Work

Progestin-only pills contain only a small dose of progestin – about 25 percent to 70 percent of the amount in the combination pill. Minipills prevent ovulation in about one-half of a woman's menstrual cycles. They also change cervical mucus. The mucus thickens, making it hard for sperm to penetrate the cervix.

How To Take Them

The minipill comes in packs of 28 pills. All the pills in the pack contain hormones. It is important not to miss a pill.

Benefits

Progestin-only pills do not offer the same benefits that pills with estrogen offer. Most people who choose the progestin-only pill do so because there are reasons they should not take estrogen.

Side Effects

Women who take the progestin-only pill may have more bleeding or spotting days than women who take birth control pills that contain estrogen.

Risks

The progestin-only pill must be prescribed by a doctor. A total of three to six women per 100 will get pregnant while on the progestin-only pill. Pregnancy rates are increased in women who weigh more than 130 pounds.

Finally...

The pill is a good choice for women who may want to get pregnant later. It is a safe and effective way to prevent pregnancy. It is easy to use, convenient and reversible. The pill may protect against some cancers.

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Hormonal Contraception: Injections, Rings and Patches

In addition to oral contraceptives (birth control pills), there are several other forms of hormonal birth control – injections, rings and patches. These methods are safe and effective for most women.

Types of Hormonal Methods

With most types of hormonal birth control, a woman takes hormones similar to those her body makes naturally. In most cases, these hormones prevent ovulation.

Injections

One type of injection of hormonal birth control, called depot-medroxy progesterone acetate (DMPA), provides protection against pregnancy for three months. Another type of injection is given every month and contains estrogen as well as a progestin.

Injections may be good for people who find daily birth control methods inconvenient. Many women like the fact that this method doesn't need to be taken daily or put in place before having sex.

When given correctly and on time, injections are very effective. However, if a woman becomes pregnant while using them, injections will not affect the pregnancy or the health of the baby.

Benefits. There are many benefits of hormonal injections.

Side Effects and Risks. For every 1,000 women who use injections, only three will become pregnant during the first year. DMPA injections tend to cause irregular bleeding. During the first months of use, irregular bleeding and spotting lasting seven days or more are common.

Vaginal Ring

The vaginal ring is a flexible, plastic ring that is placed in the upper vagina. The ring releases both estrogen and progestin continuously to prevent pregnancy. The ring is worn for 21 days, removed for seven days, and then a new ring is inserted.

The vaginal ring increases the amount of estrogen and progestin in the body. These changes affect ovulation and other reproductive functions, such as the thickness of cervical mucus and the endometrium, and make it hard for the sperm to penetrate the cervix.

Although rare, the vaginal ring can slip out of the vagina while removing a tampon or when moving the bowels if it has not been inserted correctly.

Benefits. In addition to preventing pregnancy, the vaginal ring may offer other health benefits.

Side Effects and Risks. The vaginal ring is a very effective form of birth control. When used correctly, fewer than two in 100 women will become pregnant over one year.

Skin Patch. The contraceptive skin patch is a small (1.75 square inch) adhesive patch that is worn on the skin to prevent pregnancy. The skin patch is a weekly method of hormonal birth control. Once a woman obtains a prescription for the patch, she does not need to visit her doctor to apply or remove the patch.

Although the patch is effective nearly right away, a backup method of birth control, such as a condom, should be used for the first week of your first cycle.

Benefits. The contraceptive skin patch may have the same health benefits as the vaginal ring.

Side effects and Risks. The skin patch is a very effective method of birth control. When used correctly, fewer than two in 100 women will become pregnant over one year.

Finally ... Hormonal methods of birth control, such as injections, rings and patches are effective ways to prevent pregnancy. They are convenient, easy to use and reversible.

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GENITAL CANDIDIASIS

What is genital candidiasis/VVC?

Candidiasis, also known as a “yeast infection” or VVC, is a common fungal infection that occurs when there is overgrowth of the fungus *Candida*. *Candida* is always present in the body in small amounts. However, when an imbalance occurs, such as when the hormonal acidity of the vagina changes or when hormonal balance changes, *Candida* can multiply. When that happens, symptoms of candidiasis appear.

What are the symptoms of genital candidiasis/VVC?

Women with VVC usually experience genital itching or burning, with or without a “cottage-cheese-like” vaginal discharge. Males with genital candidiasis may experience an itchy rash on the penis.

How common is genital candidiasis/VVC, and who can get it?

Nearly 75% of all adult women have had at least one genital “yeast infection” in their lifetime. On rare occasions, men may also experience genital candidiasis. VVC occurs more frequently and more severely in people with weakened immune systems. There are some other conditions that may put a woman at risk for genital candidiasis:

- Pregnancy
- Diabetes mellitus
- Use of broad-spectrum antibiotics
- Use of corticosteroid medications

How is genital candidiasis/VVC transmitted?

Most cases of *Candida* infection are caused by the person’s own *Candida* organisms. *Candida* yeasts usually live in the mouth, gastrointestinal tract, and vagina without causing symptoms. Symptoms develop only when *Candida* becomes overgrown in these sites. Rarely, *Candida* can be passed from person to person, such as through sexual intercourse.

How is genital candidiasis/VVC diagnosed?

The symptoms of genital candidiasis are similar to those of many other genital infections. Making a diagnosis usually requires laboratory testing of a genital swab taken from the affected area by a physician.

How is genital candidiasis/VVC treated?

Antifungal drugs which are taken orally, applied directly to the affected area, or used vaginally are the drugs of choice for vaginal yeast infections. Although these drugs usually work to cure the infection (80%-90%), infections that do not respond to treatment are becoming more common, especially in HIV-infected women receiving long-term antifungal therapy. Prolonged and frequent use of these treatments can lessen the effectiveness.

What is the difference between the 3-day treatments and the 7-day treatments for genital candidiasis/VVC?

The only difference between these is the length of the treatment. Three-day and 7-day treatments may both be effective.

Are over-the-counter (OTC) treatments for genital candidiasis/VVC safe to use?

Over-the-counter treatments for VVC are becoming more available. As a result more women are diagnosing themselves with VVC and using one of a family of drugs called “azoles” for therapy. However, misdiagnosis is common, and studies have shown that as many as two-thirds of all OTC drugs sold to treat VVC were used by women without the disease. Using these drugs when they are not needed may lead to a resistant infection. Resistant infections are very difficult to treat with the currently available medications for VVC.

Can *Candida* infections become resistant to treat?

Overuse of these antifungal medications can increase the chance that they will eventually not work (the fungus develops resistance to medications). Therefore, it is important to be sure of the diagnosis before treating with over-the-counter or other antifungal medications.

What will happen if a person does not seek treatment for genital candidiasis/VVC?

Symptoms, which may be very uncomfortable, may persist. There is a chance that the infection may be passed between sex partners.

How can someone tell the difference between genital candidiasis/VVC and a urinary tract infection?

Because VVC and urinary tract infections share similar symptoms, such as a burning sensation when urinating, it is important to see a doctor and obtain laboratory testing to determine the cause of the symptoms and to treat effectively.

Bacterial Vaginosis

What is bacterial vaginosis?

Bacterial vaginosis (BV) is the name of a condition in women where the normal balance of bacteria in the vagina is disrupted and replaced with an overgrowth of certain bacteria. It is sometimes accompanied by a discharge, odor, pain, itching, or burning.

How common is bacterial vaginosis?

Bacterial vaginosis is the most common vaginal infection in women of childbearing age. In the United States, as many as 16 percent of pregnant women have BV.

What are the symptoms of BV?

Women with BV may have abnormal vaginal discharge with an unpleasant odor. Some women report a strong fish-like odor, especially after intercourse. Discharge, if present, is usually white or gray; it can be thin. Women with BV may also have burning during urination or itching around the outside of the vagina, or both. Some women with BV report no signs or symptoms at all.

How do people get BV?

The cause of BV is not fully understood. BV is associated with an imbalance in the bacteria that are normally found in a woman's vagina. The vagina normally contains mostly "good" bacteria and fewer "harmful" bacteria. BV develops when there is an increase in harmful bacteria.

Not much is known about how women get BV. There are many unanswered questions about the role that harmful bacteria play in causing BV. Any woman can get BV. However, some activities or behaviors can upset the normal balance of bacteria in the vagina and put women at increased risk including:

- Having a new sex partner or multiple sex partners
- Douching, and
- Using an intrauterine (IUD) or diaphragm for contraception

It is not clear what role sexual activity plays in the development of BV. Women do not get BV from toilet seats, bedding, or swimming pools, or from touching objects around them. Women that have never had sexual intercourse are rarely affected.

How can BV be prevented?

BV is not completely understood by scientists and the best ways to prevent it are unknown. However, it is known that BV is associated with having a new sex partner or having multiple sex partners. It is seldom found in women who have never had intercourse.

The following basic prevention steps can help reduce the risk of upsetting the natural balance of bacteria in the vagina and developing BV:

- Limit the number of sex partners.
- Use all of the medicine prescribed for the treatment of BV, even if all the signs and symptoms go away.

What are the complications of BV?

In most cases, BV causes no complications. But there are some serious risks from BV, including:

- Having BV can increase a woman's susceptibility to HIV infection if she is exposed to the virus.
- Having BV increases the chances that an HIV infected woman can pass HIV to her sex partner.
- Having BV has been associated with an increase in the development of pelvic inflammatory disease (PID) following surgical procedures such as a hysterectomy or an abortion.
- Having BV while pregnant may put a woman at increased risk for some complications of pregnancy, such as premature labor.
- BV can increase a woman's susceptibility to other STD's such as Chlamydia or Gonorrhea.

How is BV treated?

Although BV will sometimes clear up without treatment, all women with symptoms of BV should be treated to avoid such complications as PID. Male partners generally don't need to be treated. However, BV may be spread between female sex partners.

Treatment is especially important for pregnant women. All pregnant women who have ever had a premature delivery or low birth weight baby should be considered for a BV

examinations, regardless of symptoms and should be treated if they have BV. All pregnant women who have symptoms of BV should be check and treated.

Some providers recommend that all women undergoing a hysterectomy or abortion be treated for BV prior to the procedure, regardless of symptoms, to reduce their risk of developing PID.

BV is treatable with antibiotics prescribed by a health care provider. There are several different medications that can be used to treat BV and can be safely used in pregnancy. Examples of common medications used are Flagyll, Clindesse, and Metrogel.

BV can recur after treatment. More information can be found at:[Http://www.cdc.gov/std](http://www.cdc.gov/std)

Urinary Tract Infections

What is a urinary tract infection?

The urinary tract makes and stores urine. Bacteria, a type of germ that gets into your urinary tract, causes a UTI. This infection can happen in parts of your urinary tract, like your kidneys, bladder, or urethra.

What causes urinary tract infections?

Many things can help cause a UTI:

- Wiping from back to front after a bowel movement. Germs can get into your urethra, which has it opening in the front of the vagina.
- Using scented lotions and lubricants in the vaginal area.
- Having sexual intercourse. Germs in the vagina can be pushed into the urethra.
- Waiting too long to pass urine. When urine stays in the bladder for a long time more germs are made and the worse the UTI can become.
- Using a diaphragm for birth control, or spermicides with a diaphragm or a condom.
- Anything that makes it hard to completely empty your bladder, like a kidney stone.
- Having diabetes, which makes it harder for your body to fight off other health problems.
- Loss of estrogen and changes in the vagina after menopause. Menopause is when you stop getting your period for greater than one year.

What are the signs of a urinary tract infection?

The signs if you have an infection are:

- Pain and stinging when you pass urine.
- An urge to pass urine a lot.
- Pressure in your lower belly.
- Urine that smells bad or looks milky, cloudy, or reddish in color.
- Feeling tired or shaky or have a fever.

How do I find out if I have a urinary tract infection?

To find out if you have a UTI your doctor or practitioner will ask you to pass urine into a plastic cup. When you open the cup, or handle the cup, don't touch the inside or the lid of the cup. Before you pass urine, wipe the area between the outer lips of the vagina with a special tissue given to you by your doctor. Then pass a little bit of urine into the toilet and then into the cup. This is called a "clean catch specimen".

How is a urinary tract infection treated?

UTI's are treated with antibiotics, a medicine that kills the infection. Your provider will tell you how long you need to take the medicine. Make sure you finish all of it regardless if you are feeling better.

If you don't take medicine for a UTI, the UTI can hurt other parts of your body. Also, if you're pregnant and have signs of a UTI, see your doctor right away. A UTI could cause problems in your pregnancy, such as having premature contractions or getting high blood pressure.

What steps can I take to prevent a urinary tract infection?

- Urinate when you need to. Don't hold it. Pass urine before and after sex. After you pass urine or have a bowel movement, wipe from front to back.
- Drink water every day and after sex.
- Clean the outer lips of your vagina and anus each day.
- Don't use douches or feminine hygiene sprays. These get rid of the good bacteria in your body that help fight infection.
- If you get a lot of UTI's and use spermicides or creams that kill sperm, talk to your provider about using other forms of birth control.
- Wear underwear with a cotton crotch and try to avoid tight underwear as these can promote UTI's.
- Don't use scented soaps or lotions on the vagina.

For more information about urinary tract infections you can visit:
National Women's Health Information Center: www.4woman.gov

National Kidney and Urologic Disease Information Clearinghouse: [http://
www.kidney.niddk.nih.gov/](http://www.kidney.niddk.nih.gov/)

American College of Obstetrics and Gynecologists (ACOG) resource center: [http://
www.acog.org/](http://www.acog.org/)