Inflammation of the vaginal mucosa. Often accompanied by vestibulitis. The reported incidence varies. No racial predisposition.

**FORMS OF VAGINITIS**

**Juvenile:** 40-52% of the cases\(^1\). Minimal or no clinical signs\(^2,3,4\). Little information on the causes and several hypotheses\(^5,6\).

**Adult:** Clinical signs; vulvar discharge of variable appearance (Fig. 1), vulvar licking\(^3,4\). Etiology (Table 1).

**DIAGNOSIS**

Medical history, clinical and gynecological examination (vulvar inspection, discharge, digital vaginal examination, vaginoscopy, cytological examination (Fig. 2), vaginal bacterial culture, urinanalysis and bacterial culture, biopsy and others)\(^1,2,3,4,5,6\).

**TREATMENT**

**Juvenile:** Vaginitis resolve spontaneously around the first oestrus\(^3\). Controversy: first oestrus before castrating\(^2,5,6\). More studies are needed:
- Estrogen systemic or topical\(^4\).
- Antibiotics: not often succeed.

**Adult:** Detect predisposing factors (Table 1) if it’s possible. In 73% of cases, the disease resolves regardless of therapy\(^2,3\). Different treatments depending on the etiology (Table 2).

**PROGNOSIS**

With proper treatment, the prognosis is favorable\(^5\). Most cases resolve after correcting the predisposing cause. The most difficult cases to treat are those due to anatomical abnormalities\(^2\). Adult idiopathic vaginitis often resolves, but requires more treatment time\(^6\).

**DISCUSSION AND CONCLUSIONS**

1. There are few current studies on vaginitis. Furthermore, the existing literature shows a wide disparity of views among authors.
2. Most authors agree that a lot of cases of vaginitis are idiopathic and determine risk factors can be challenging.
3. Frequently, infectious, predisposing and behavioural factors are involved in this sickness (Fig. 3). These three agents influence each other increasing the difficulty for a suitable diagnose.
4. In many cases, treatment with antibiotics allows momentary resolution. While the primary factor is not resolved, vaginitis will recur. It’s advisable to treat at the same time with probiotics.
5. Further studies are required in order to verify the hypothesis of the advantageous situation of neuter juvenile female dogs with vaginitis.

More research is needed to comprehend the pathophysiology of vaginitis. It is fundamental to improve the identification of triggering substances, microbial agents, vaginal anatomical abnormalities, current systemic diseases as well as potentially atopy. For that reason, professionals will have an accurate view of the issue and, subsequently, perform a better treatment of vaginitis.

**REFERENCES**