The aim of this study was to demonstrate that the addition of a bioadhesive polymer to econazole in topical therapy of candidiasis, increasing the time of the presence of the active drug in the site of infection, leads to a complete eradication of the fungal pathogen and consequently reduces the recurrence rate. A multicenter, comparative, randomized, open study was carried out on 180 women with both clinical and microbiological diagnosis of vaginal candidiasis who were treated with 150 mg of econazole plus polycarbophil (group A) or only 150 mg of econazole (group B). After 3 days of treatment (1 vaginal ovule a day) clinical and microbiological evaluation showed that the eradication of the C. albicans reached 98.6% in the A group and 84.8% in the B group, while the overall persistence (C. albicans, C. glabrata, C. krusei, and C. parapsilosis) was 5.6% and 30%, respectively. All clinical parameters investigated were more significantly reduced in the A group (chi square test or Fisher exact test). In the 152 women in which symptoms were resolved and Candida was eradicated, a follow up of 60 days was carried out; during this period all the women were invited to immediately communicate any recurrence of the symptoms and the day of appearance; in the A group only one case out 87 (1.1%) referred recurrence while in the B group this was 6 out 65 (9.2%) (p<0.004). We conclude that, since the women were treated with the same amount of econazole, the better clinical and microbiological results can be attributed to polycarbophil, confirmed by a significant reduction of recurrences.