



PERCEPTION AND KNOWLEDGE OF VAGINAL DISCHARGE AMONG WOMEN IN RURAL SETTING IN ALIGARH

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ABSTRACT

The complaint of abnormal vaginal discharge is very common. An excessive degree of vaginal secretion is not necessarily pathologically infected, but could be hormonal. The aim of this study was to find out the perception and knowledge of vaginal discharge among married females of reproductive age group. Though many studies have been done to estimate the prevalence and the various causes of vaginal discharge, not much data is available regarding what women know about vaginal discharge, their attitudes, health care seeking behaviour and the various correlates regarding the same in rural setting. With this background, we conducted this study in our rural field practice areas in Aligarh. A total of 100 married females (15-45 years age group) were taken, who were presenting with complaint of vaginal discharge. The results showed that 100% of women reported the cause of vaginal discharge to be weakness and heat. 87% of women said the cause was due to backache, 93% of women reported the cause to be melting of bones. The effects of vaginal discharge as reported by majority of women were weakness (100%), backache (100%), pain in lower abdomen (37%), bodyache (81%), pallor (75%), etc. Also few women consulted doctors for treatment. 36% of them took no treatment.

Primary health care providers can play a major role in health education for women in reproductive age group and educate them on when to seek medical advice. This can be integrated to reproductive health care programmes such as family planning, maternal and child health services which will lead to early detection of vaginal discharge.

KEYWORDS : vaginal discharge, rural areas, reproductive females

Introduction

Vaginal discharge (safed pani in Hindi) is one of the leading symptoms for which the women seek care. The concept of safed paani is linked to ayurvedic beliefs about balance among the body dhatus (1). The complaint of abnormal vaginal discharge is very common (2). An excessive degree of vaginal secretion is not necessarily pathologically infected, but could be hormonal (3). WHO has defined vaginal discharge syndrome as abnormal vaginal discharge (amount, colour, and odour) with or without lower abdominal pain or specific symptoms or specific risk factors (4). Gynaecological disorders have substantial impact on female reproductive ability, mental health, and ability to work and to perform routine physical activities (5).

Dhatu disorders have also been reported among men in India (6). Safed pani is also widely attributed to heat (7). Vaginal discharge is one of the most common symptoms of gynaecological morbidity (8). Vaginitis is the most common cause followed by cervicitis (9). WHO recommends algorithms for the treatment of this symptom in developing countries (10). In this approach, particular symptoms presented by individuals are assumed to be signs of an underlying pathology for which the individuals are then treated.

The aim of this study was to find out the perception and knowledge of vaginal discharge among married females of reproductive age group. Though many studies have been done to estimate the prevalence and the various causes of vaginal discharge, not much data is available regarding what women know about vaginal discharge, their attitudes, health care seeking behaviour and the various correlates regarding the same in rural setting. With this background, we conducted this study in our rural field practice areas in Aligarh.

II. Material and Methods

A cross-sectional study was conducted during February, 2018, in the rural areas of Jawan, Aligarh. A total of 100 married females (15-45 years age group) were taken, who were presenting with complaint of vaginal discharge. Informed consent was taken from each participant. Questionnaires were prepared for the study. Data was collected and analysed using SPSS software.

III. Results

TABLE-1 Causes of vaginal discharge (n=100)

Causes	No.
Weakness	100
Melting of bones	93
Heat	100
Visit to other women by husband	30
Poor personal hygiene of genitals (wife/husband)	20
Internal gynaecological problem	25
backache	87
Having too many children	24
Use of copper- T	7
Diet	17

Table – 2 Effects of vaginal discharge (n=100)

Effects	no
Weakness	100
Backache	100
Infertility	30
Pallor	75
Urinary problems	45
Poor vision	9
Bodyache	81
Pain in lower abdomen	37
Others (fever, weight loss, headache)	8

TABLE-3 Treatment Taken (n=100)

TREATMENT	NO.
Consult a doctor	26
Took herbal/ayurvedic treatment	15
Home remedies	23
Took no treatment	36

As shown in **table-1**, 100% of women reported the cause of vaginal discharge to be weakness and heat. 87% of women said the cause was due to backache, 93% of women reported the cause to be melting of bones. 30% of women gave the reason of visiting to other women by husband. 20% of women gave the reason of poor personal hygiene of genitals of wife/husband.

As shown in **table-2**, the effects of vaginal discharge as reported by

majority of women were weakness(100%),backache(100%),pain in lower abdomen(37%), bodyache(81%),pallor(75%),etc.

As shown in **table-3**, 26% of women consulted doctors for treatment,15% of women took herbal/ayurvedic treatment ,23% took some home remedies and 36% took no treatment.

IV. Discussion

The similar study was conducted in 2009 in same rural areas of Aligarh (24).

In our study as shown in **table-1**, 100% of women reported the cause of vaginal discharge to be weakness and heat. 87% of women said the cause was due to backache, 93% of women reported the cause to be melting of bones .30% of women gave the reason of visiting to other women by husband.20% of women gave the reason of poor personal hygiene of genitals of wife/husband.

In a study(11), similar findings were there.Heat fixation theory has also been reported by other author also(12). Another study(13) also reported the most common cause to be weakness(77%). Some women believe that diet is also responsible for vaginal discharge.Some studies quoted it(18).The statements like –earlier women used to take milk/lassi, i.e. the diet with cooling effect.Now they take tea and other heat producing diet leading to vaginal discharge-were noted down. In our study,30% of females said that vaginal discharge could cause infertility. This was reported by other study also(14). In our study,75% of women, reported pallor as effect of vaginal discharge.A study in North India(19) reported that traditional birth attendants often boasted of spot diagnosis of vaginal discharge just by looking at the pale face of women.

In our study,about 26% of women consulted doctors for treatment,15% of women took herbal/ayurvedic treatment ,23% took some home remedies and 36% took no treatment. Singh AJ(11) reported in his study that majority of the respondents had faith in govt. doctors. However,almost one-fourth of them consulted Ayurvedic doctors also. One-fourth of them resorted to various home made remedies.A study of Nepal (16) reported that women believed that traditional healers or pharmacist are preferred for vaginal discharge and STDs ,as these providers are more approachable and observe confidentiality.

In our study,among the home remedies various statements were recorded.Some of them were, "*garam cheezo ka aur meethi cheezo ka perhez zaroori hai*".

Isabgol ki bhoosi ko pees kar nahaar muh khaaya-fayeda hua.

Samay se jaayega.

Chaach se araam mila

Ye dhaat rog hai.samay se jaayega.

Neem ke pattae aur haldi pees kar raat ko rakhna tha magar kuch khaas fayeda nahi hua.

Shahad mai purhyaia milaa kar subah khaati thi,mujko vaedh nae bataaya tha.

Kataare bhoon kar nahaar muh khaaya

Home remedies reported by different authors are as follows. Binh et al., 2002(21) reported use of Guava liquid and 'hygienic washes' at home .Nielsen et al.(22) reported cleaning with saltwater, or/and cleaning with betel leaves or/and cleaning with rose powder. Rizvi &Luby(23) reported use of mustard, or coconut oil alone or in turmeric powder, burn ointments and eczema and antiseptic powders, crèmes, and a special food made up of flour, butter and dry fruits.Chapple, 2001(20) reported use of natural yogurt, hot bath with Dettol, avoidance of hot foods,tea and coffee decrease vaginal discharge.

In addition, many of the women, who did not consult anyone for vaginal discharge, told that they did so because they considered it normal.

In our study,7% of women reported Cu-T to be a cause of vaginal discharge. It was reported in some studies(12,15)that women ascribed vaginal discharge to use of family planning methods. In South-East Asia, the incidence of STDs is increasing because women without multiple partners get STDs from their husbands but do not report and remain neglected(17).

For most women in our study, vaginal discharge was perceived to be

even more serious illness than menstrual problems.In a study (11),it was reported that some of the women said that if a man had sex with his wife after taking alcohol, the 'heat' of the husband is transmitted to the wife leading to vaginal discharge.

V. Conclusion

Vaginal discharge is one of the most common symptoms of gynecological morbidity.The health workers should be trained to identify the reproductive tract infections at the health centres.Low cost investigations should be made available in the centres.STD clinics should be opened in the centres.Culture specific health education messages and strategies need to be designed to meet the local information needs.Confidentiality should be maintained. The problem of vaginal discharge in Indian settings need to be interpreted in context of Ayurveda, which percolates deeply in the daily routine of Indian people. In particular, such knowledge needs to be imparted to doctors trained in allopathy in order to improve the quality of doctor-patient communication. Due to different home remedies and cultural practices there is a delay in seeking proper treatment for pathological vaginal discharge leading to serious consequences. Most of them have the feelings of shame, guilt and they are embarrassed to express that they have a vaginal discharge even to their intimate partners. It is important to educate women regarding the importance of early detection of pathological vaginal discharge in order to prevent serious complications and to promote women health. Primary health care providers can play a major role in health education for women in reproductive age group and educate them on when to seek medical advice. This can be integrated to reproductive health care programmes such as family planning, maternal and child health services which will lead to early detection of vaginal discharge.

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