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IMPACT OF SOCIODEMOGRAPHIC FACTORS ON VAGINAL DISCHARGE

Gynaecology

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ABSTRACT

Introduction:- Vaginal discharge is one of the most common complaint in women attending obstetrics and Gynecology outpatient department. It increases the morbidity in women.
AIM : The study is aimed at identifying the impact of the social and demographic variables associated with the complaint of vaginal discharge.
Method : This is a hospital based prospective observational study conducted in the obstetries and gynecology outpatient department of Jawaharlal Nehru Medical college , Bhagalpur , Bihar. Pretested questionnaire was done on women with Vaginal discharge .
Results : The total number of cases mere 60. The results were vaginal discharge common among 26-35 yr of age . 15.6% among lower socio economic class women , 33.6% among women living with their husband , 27.6% has vaginal discharge who got married before 18 yrs of age. 44% women perceived no specific symptoms.
Conclusion : Awarness regarding personal and menstrual hygiene is mandatory among women to lower the incidence of vaginal discharge.

KEYWORDS

Vaginal discharge , social and demographic ,socioeconomic , hygiene .

INTRODUCTION :

Vaginal discharge affects the physical ,sexual and social activities of women . It is one of the most common complaints in women attending the obstetries and gynecology outpatient department .Every fourth women coming to outdoor presented with excessive vaginal discharge[1].

On investigating , in most of the women causative underlying pathology or infections is detected and managed accordingly but in few cases no cause is evident. It is very difficult to make such patients symptoms free[2]. The vagina is normally kept moist by transudation of fluid through the vaginal wall which mixes with the exfoliated vaginal cells , alipathic acid , micro – organisms and mucous form cervix[6]. The quantity of vaginal and cervical secretions varies through menstrual cycle , peaking at ovulation ,before and after menstruation, during pregnancy and by sexual excitement.[3]

Variation in endogenous hormonal levels due to deviation in HPO axis of hormones especially estrogen can explain the physiological excess of vaginal discharge[5] .

Jeffcoate[7] describes excessive amount of normal vaginal discharge as leucorrhoea . The term leucorrhoea should be restricted to those patients in whom the normal vaginal secretion is increased in amount.

It should be non infective , not purulent , non blood stained ,never causes pruritus and never offensive[3-4]. It is evident by persistent moistness of vulua or straining of under cloths. In the absence of definite diagnosis patients tend to exaggerate her complaint and it causes distressing alarm in family from fear of veneral diseases or cancer .

Chaudhary V[8] concluded that increasing age , illiteracy , low socio economic status , high parity, induced abortion and place of delivery are all contributory for occurrence of vaginal discharge.

Multiple vague somatic symptoms perceived by patients include genital itching, backache , leg cramps , weight loss , abdominal pain weakness. Under standing the socio economic factors about vaginal discharge is essential[7].

MATERIALS AND METHODS :

This is a hospital based prospective observational study conducted in obstetrics and Gynecology outpatient department of Jawaharlal Nehru Medical college , Bhagalpur , Bihar. The study period from January 2020 to june 2020. Women with vaginal discharge complaints were interviewed with a pretested questionnaire. The quationnaire contains socio demographic factors , menstrual and obstetric history and contraception practice and partner comorbidities.Socioeconomic status assessed by modified kuppuswamy scale. Data were documented in Microsoft Excel and analysed using SPSS softmane.

INCLUSION CRITERIA :

- All women aged between 20- 60 yrs.

EXCLUSION CRETERIA :

- Women not given consent
- Pregnant and lactating women
- hysterectomised women

RESULTS :

The total number of women was 60. Sociodemographic factors associated with vaginal discharge is shown in Table -1. **22.8%** of the women belong to the age group 26-35 yrs**. 33.6%** of women living with their husband , **25.2 %** of women studied up to middle school. **31.2%** of women belongs to the rural area.15.6% of women belong to the lower class.By occupation 24% of women were homemakers.

Table – 1 :

Age Group	No. of patients	Percentage
16-25	8	4.8
26-35	38	22.8
36-45	12	7.2
>46	2	1.2

Marital status	No. of patients	Percentage
Married	56	33.6
Widow	4	2.4
Divorce	0	0

Educational	No. of patients	Percentage
Illiterate	12	7.2
Middle School	42	25.2
High School	6	3.6

Table – 2 shows distribution of women based on age of marriage and obstetric history

Age at Marriage	No. of patients	Percentage
<18 Yrs	46	27.6
≥ 18 Yrs	14	8.4

history of abortion	No. of patients	Percentage
Yes	8	4.8

No	40	24
Induced	5	3
Spontaneous	7	4.2

Place of delivery	No. of patients	Percentage
Home	20	12
Institutional	32	19.2
Both	8	4.8

Table- 3 shows distribution of women based on contraception practices

Temporary Method	No. of patients	Percentage
IUCD	**8**	**4.8**
NIL	**52**	**31.2**
Permanent Method	No. of patients	Percentage
tubectomy	46	27.6
Vasecctomy	0	0
NIL	14	8.4

Table-4 shows distribution of women based on personal , menstrual and sexual hygiene

Defaecation	No. of patients	Percentage
Toilet	52	31.2
Open	8	4.8
Usage of Pads	No. of patients	Percentage
Cloth	16	9.6
Sanitary Pad	36	21.6
Both	8	4.8
Use of Panties	No. of patients	Percentage
Yes	16	9.6
No	44	26.4

Changing Panties frequency	No. of patients	Percentage
Daily Once	48	28.8
> Once	12	7.2
Bathing during menstruction	No. of patients	Percentage
Once	53	31.8
twice	7	4.2

Hygiene after sexual activity	No. of patients	Percentage
Yes	48	28.8
No	12	7.2

Table- 5 : Distribution of women according to Symptoms

Symptoms	No. of patients	Percentage
Asymptomatic	20	12
Bachache	16	9.6
Genital itching	6	3.6
Leg cramps	4	2.4
Weight loss	4	2.4
Abdominal pain	6	3.6
Weakness	4	2.4

Table - 6 shows distribution of women based on perceived causes

Cause	No. of patients	Percentage
Excessive body heat	8	4.8
Work stress	6	3.6
Weakness	4	2.4
Nil	42	25.2

DISCUSSION :

In the following study , 15.6 of cases belong to low socioeconomic states. Kulkarni[9] , Guntoony[4] and Chaudhary V[8] also revealed higher prevalence in low socioeconomic group. Maximum cases belong to the age group between 26-35 yrs which is 22.8%. Chaudhary V[8] analysis showed higher prevalence in age group above 40yrs.

In the above study, perceived cause of vaginal discharge was weakness, work stress and body heat . Singh A J[10] had similar perceived cause of vaginal discharge .

Most of women are using panties only during menstruation. 7.2% of women were unaware of sexual hygiene. 9.6% of women were aware of menstruation hygiene , 31.2% of women belong to rural area and these women were hesitant to discuss others about menstrual and sexual hygiene. Study of Ananda et al[11] showed that unhygienic menstrual practice was significantly associated to abnormal vaginal discharge . 27.6% of women got married before 18 yrs . Early exposure to sexual activity increases the chance of ascending infection. It is similar to Sharma A K et al[12] Study . Chaudhary V et al[8] study found that increasing parity is associated with vaginal discharge .

CONCLUSION :

The health education programme should be encouraged in creating awareness among women . Reproductive health is of utmost importance, health is multidimensional, vaginal discharge affects women's routine physical and sexual activity. Adoption of small family norms is important. Menstrual and personal hygiene awareness among women is mandatory. Social and demographic factors play key role in changing trends of vaginal discharge .

REFERENCES

1. Selvarani G. An Intervention programme for Reproductive tract infections among women in a selected area in rural Tamil Nadu, India. South East Asian Studies Manual 2000, P121-3.
2. Fonseca TMV, Cesar JA, Mendoza-Sassi RA, Schmidt EB. Pathological Vaginal Discharge among Pregnant Women: Pattern of occurrence and association in a Population-Based Survey. Obstetrics and Gynaecology International 2013, P1- 7. http://dx.doi.org/10.1155/2013/590416
3. Spence D, Melville C. Vaginal discharge; Clinical review. BMJ 2007;335 (7630): 11471151. http://dx.doi.org/10.1136/bmj.393 78.633287.80
4. Guntoory I, Narasinga R, lakshmana R, Alina S. Prevelence and sociodemographic correlates of vaginal discharge among married women of reproductive age group at a teaching hospital. Int J Reprod Contracept Obstet Gynecol 2017;6(11):4840-6
5. Llewellyn-Jones. Funadamentals of obstetrics and gynaecology. Mosby Elsevier limited 2011.
6. Dutta Dc. Text Book of Gynaecology 6th ed. Jaypee Brothers Medical publishers (P) Ltd, New Delhi, India 2013.
7. Kumar Jeffcoate's Principles of Gynaecology 8thed. New Delhi: Jaypee brothers Medical Publishers 2014.
8. Chaudhary V, Kumar R, Agrawal VK, Singh A, Narula RM, Sharma M. Prevelence and determinants of vaginal discharge among women of reproductive age group in Tertiary Care Hospital of Northern India. Natl J Community Med 2012;3(4):661-5.
9. Kulkarni RN, Durge PM. A study of leucorrhea in reproductive age group women of Nagpur city. Indian J Public Health 2005;49(4):238-9
10. Singh AJ. Vaginal discharge: Its causes and associated symptomsas perceived by rural north Indian women. Indian J Comm Med 2007
11. Ananda E, Singhb J, Unisaa S. Menstrual hygiene practices and its association with reproductive tract infections and abnormal vaginal discharge among women in India, Sexual & Reproductive Healthcare 2015;6(4):249-254.
12. Sharma AK, Ranjan R, Mehta G. Prevalence and determinants of reproductive tract infection among women. J Commun Dis 2004;36(2):93-9.