



“A STUDY TO ASSESS THE EFFECTIVENESS OF HEALTH EDUCATION ON KNOWLEDGE REGARDING VAGINAL CANDIDIASIS & ITS PREVENTION AMONG MARRIED WOMEN IN SELECTED COMMUNITY AREA OF DEHRADUN, UTTARAKHAND”.

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ABSTRACT

The aim of the study was to assess the effectiveness of health education on knowledge regarding vaginal candidiasis & its prevention among married women. A pre-experimental design was adopted for the study. There was 60 subjects that were selected through non-probability purposive sampling technique from Kedarpur community of Dehradun. Data was collected by using self-structured knowledge questionnaire on vaginal candidiasis and its prevention. The result shows that the pre-test overall knowledge mean scores of married women were found to be 7.97, mean percentage 31.88% with standard deviation 1.583. The result shows post-test overall knowledge mean scores of married women were found to be 19.32, mean percentage 77.28 with standard deviation 2.013. The combined 't' test value was significant i.e. 38.75 at $P < 0.05$ level. Which indicates health education was effective in improving knowledge of the married women regarding the vaginal candidiasis and its prevention. The pre-test and post-test knowledge of married women: Majority 41 (68.33%) of the married women had inadequate knowledge, 19 (31.67%) had moderate vaginal knowledge and none had adequate knowledge towards vaginal candidiasis and its prevention in pre-test knowledge. 46 (76.67%) of the married women had adequate knowledge. In post-test, Majority 46 (76.67%) of the married women had adequate knowledge, 14 (23.33%) had moderate knowledge towards vaginal candidiasis and its prevention in post-test knowledge. No significant association between knowledge of married women regarding vaginal candidiasis and its prevention. Hence, the research hypothesis H₂ stated that there is significant association between the pre-test knowledge score with their selected demographic variable is rejected and null hypothesis is accepted. The study was concluded that health education was effective in increasing the knowledge regarding vaginal candidiasis and its prevention among married women. On the basis of finding, it is recommended that such type of health education program should be conducted on time to time for all communities who are higher risk for vaginal candidiasis so that they can practice preventive approach.

KEYWORDS

Health education, vaginal candidiasis, community, prevention.

INTRODUCTION:

“Any piece of successful work reflects the experience, conviction and the accumulated knowledge of many experts, I praise and thank Lord Almighty for his abundant grace and blessings throughout the study”

The health of human resources constitutes the major portion of the wealth of the nation. Because healthy human beings are essential for the existence of a healthy nation. India is a developing country which is trying to give priority for women in every field of development of the country. Major population of India constitutes women and children, so that the health of the women also should be given its importance.

Any problem with the reproductive system will have great impact on the women's health. One of the prevailing health problems in married women is 'reproductive tract infections', and in that vaginal infection has a major role. The anatomy of females i.e. the position of vagina in between urethra and anus, which are the common habitat of microorganism, also promotes the occurrence. Vagina is acting as the portal of entry into the internal reproductive organ in females. It creates its own environment and maintains a balance among the normal bacteria found there and the hormonal changes in women's body. The vagina has acidic pH, which is maintained by the bacteria, lactobacillus. The normal pH of the vagina is 3.8-4.5. This acidity helps to keep the vagina clean and also to prevent infections. The infection results when any changes in this natural condition occur.

Candida is a ubiquitous fungus known as a normal microflora of skin, gastrointestinal and urogenital tracts, which could change from asymptomatic to symptomatic every year. Millions of women visit gynaecologic office, health centres and clinics due to common urinary tract and vaginal problems, which most of their complaint refers to vulvovaginal candidiasis. It has been estimated that approx 75% of women experience at least one episode of vulvovaginal candidiasis in their lifetime and 40%-50% of them will have recurrence. About 80-90% of vulvovaginal candidiasis cases are caused by candida albicans, meantime other species could result in vulva-vaginal symptom, as well, which medical resistance is the most problematic challenge.

Case Study**INTRODUCTION:**

Any problem with the reproductive system will have great impact on the women's health. The anatomy of females i.e. the position of vagina in between urethra and anus, which are the common habitat of microorganism, also promotes the occurrence. Vagina is acting as the portal of entry into the internal reproductive organ in females. It creates

its own environment and maintains a balance among the normal bacteria found there and the hormonal changes in women's body. Candida is a ubiquitous fungus known as a normal microflora of skin, gastrointestinal and urogenital tracts, which could change from asymptomatic to symptomatic. Vaginal yeast infection is due to excessive growth of candida, resulting in inflammation, vulva itching, redness of vulva and vagina.

Definition-

Vaginal candidiasis is a fungal or yeast infection of the vagina caused by Candida yeast species & characterized by curd-like vaginal discharge, itching and erythema.

Incidence-

- Around 75% of women have one infection in their lifetime.
- 5% of women have more than three infections in a single year. Annually in approx 13 million cases of vulvovaginal candidiasis, resulting in 10 million gynaecology office visits per year in India.
- Worldwide, recurrent vulvovaginal candidiasis affects about 138 million women annually (range 103-172 million).
- 25-35 year age group has the highest prevalence.

Etiology-

- C. albicans is by far the most common, it accounts for 80-90%.
- C. glabrata is the second most common, it accounts for 5-15%.
- C. tropicalis, it accounts for 5%.
- Other species eg- C. Krusei, C. guilliermondii are rarely isolated.

Clinical Features:-

- Vulval itching (cardinal symptom)- increase with warmth at night.
- Discharge- ranging from scanty, thick, whitish, adherent to vaginal to a thin watery liquid, pH: 4-5.
- Burning sensation- vulval & vaginal is not dominant, but gets worse with micturition or coitus.
- Foul smell
- Dyspareunia
- Dysuria

Diagnostic Evaluation-

- pH of discharge: 4-5
- Urinalysis- examine the deposit microscopically for budding yeast cells.
- Wet mount- saline, KOH 10%
- Gram stain
- Pap smear- 50% it is not performed for this condition.
- Vaginal swab Culture- Nickerson, Sabourad, only when

microscopy is not diagnostic.

Medical Management-

Recommended regimens over-the counter intravaginal(topical) agents:

- Clotrimazole 1% cream 5g, intravaginally daily for 7-14 days
- Miconazole 2% cream 5 g, intravaginally daily for 3 days
- Terconazole 0.4% cream 5 g, intravaginally daily for 7 days

Oral agent:

- Fluconazole 150mg orally in a single dose(first line maintenance regimen)
- Itraconazole 100mg

Prevention-

- Wear cotton underwear
- Practice good personal hygiene
- Avoid tight-fitting clothing
- Keep ourselves dry and clean

Avoid perfumed deodorant sprays, scented tampons and vaginal douches

- Relax and reduce stress
- Take natural yoghurt with live cultures.
- Always wipe genital area from front to back
- Manage diabetes by assessing blood sugar levels
- Avoid unnecessary antibiotics use
- Avoid prolong use of oral contraceptive.
- Avoid hot tubs and extra hot baths

Home Remedies-

- Apple cider vinegar- inhibit the growth of *C. albicans*
- Boric acid- vaginal suppository remedy(antiseptic properties)
- Coconut oil(antifungal properties)
- Garlic and garlic oil-antifungal properties, directly apply in the vagina
- Tea tree oil- it works by killing the cell walls and membrane of the yeast, antifungal properties
- Yoghurt- high probiotic concentration with lactobacillus.
- Vitamine c rich food

CONCLUSION

Vaginal candidiasis is most common infection among reproductive age group that is associated with considerable morbidity and health care cost. So there is need to improve the knowledge regarding vaginal candidiasis and its prevention. So that women's take care themselves and they can educate other women regarding vaginal candidiasis

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