ORIGINAL RESEARCH PAPER
Volume - 14 | Issue - 06 | June - 2025 | PRINT ISSN No. 2277 - 8179 | DOI : 10.36106/ijsr
INTERNATIONAL JOURNAL OF SCIENTIFIC RESEARCH

SYMPTOMS OF VULVOVAGINITIS AND KNOWLEDGE ON PREVENTION AND MANAGEMENT OF VULVOVAGINITIS AMONG PREGNANT WOMEN

Obstetrics and Gynaecology

Mrs Prajitha T P* Nursing Tutor, School Of Nursing Kozhikode District Co Operative Hospital. *Corresponding Author

Dr Babitha E K Professor, Govt College Of Nursing, Kozhikode

ABSTRACT

Vulvovaginitis is a broad term encompassing conditions affecting the vulva, vagina, or both, resulting from infection, inflammation, or alterations in the usual vaginal flora.1 The study aimed to assess symptoms of vulvovaginitis and knowledge on prevention and management of vulvovaginitis among pregnant women attending antenatal outpatient department, Institute of Maternal and Child Health, Kozhikode (IMCH). The conceptual framework is based on revised health promotion model by Nola J Pender (2006). A quantitative non experimental descriptive survey design with purposive sampling technique was used for selecting the sample. Data were collected from 200 pregnant women who satisfied inclusion criteria. Semi structured interview schedule to assess the knowledge on prevention and management of vulvovaginitis and check list to assess the symptoms of vulvovaginitis. The study concluded that pregnant women had poor knowledge on prevention and management of vulvovaginitis.

KEYWORDS

Vulvovaginitis; Knowledge; Pregnant women

INTRODUCTION

Pregnancy is a transformative and complex biological process that embodies the essence of creation and life. It marks the beginning of a journey that intertwines the physiological, emotional, and social dimensions of human existence.[2]

During pregnancy, there are changes in the flora of the vulva and vagina, which can lead to an increased risk of infections. Vulvovaginal infections are frequently encountered during pregnancy and can lead to significant inflammation, which may contribute to unfavourable perinatal results. Vulvovaginitis raises the risk of preterm labor, premature rupture of membranes, chorioamnionitis, postpartum endometritis, and low birth weight in infants. Providing proper treatment during pregnancy can help decrease perinatal morbidity.[3]

Objectives

- Assess the symptoms of vulvovaginitis among pregnant women.
- Assess the knowledge on the prevention and management of vulvovaginitis among pregnant women.
- Find out the association between knowledge on prevention and management of vulvovaginitis and selected variables among pregnant women.

Hypothesis

H_1: There is a significant association between knowledge on prevention and management of vulvovaginitis and selected variables among pregnant women.

Conceptual Framework

This study is based on the concepts of Revised Health Promotion Model by Nola J Pender (2006).

Methodology

A quantitative research approach was used for the study and it is considered appropriate for the present study. The research design adopted for the present study was non experimental descriptive survey design. The sample of this study comprised of 200 pregnant women attending the antenatal outpatient department, Institute of Maternal and Child Health, Kozhikode.

Tool And Technique

Tool 1: Semi structured interview schedule to assess the knowledge on prevention and management of vulvovaginitis among pregnant women.

It Consists Of 2 Sections, Section I And II

Section I: Socio-personal variables and Clinical variables.
Section II: Knowledge regarding prevention and management of vulvovaginitis.

Tool 2: Vulvovaginitis symptoms checklist.

It consists of 10 items in order to assess the symptoms of vulvovaginitis. It is a check list in which against each statement for rating yes or no is shown.

Technique

Self-reporting

Data Analysis

The collected data would be organized, tabulated and subjected to statistical analysis with help of SPSS 18. The following methods of descriptive and inferential statistical analysis were planned with the help of experts.

RESULTS

Sample Characteristics

Out of 200 participants, 43% belonged to the age group of 24-29 years. Among the participants 61.5% were multi gravida. Among the participants 56 % were residing in rural area.

Out of 200 participants 22.5% has gestational diabetes mellitus, 35% has no illness, 12.5% has urinary tract infection and 10.5% has vulvovaginitis in present pregnancy. Among the participants 6.5% had history of urinary tract infection, 21.5% has history of genital infection and 61% has no past medical history.

Knowledge On Prevention And Management Of Vulvovaginitis

The study shows that 22.5% of pregnant women have average knowledge regarding prevention and management of vulvovaginitis, 77.5 % have poor knowledge and no one have good knowledge regarding prevention and management of vulvovaginitis.

Among the participants the mean knowledge score of participants was 24.32 with standard deviation of 5.15.

Association Between Knowledge On Prevention And Management Of Vulvovaginitis Among Pregnant Women And Selected Variables

H_{01}- There is no significant association between knowledge on prevention and management of vulvovaginitis with selected variables among pregnant women.

In order to test the hypothesis, the data was subjected to chi-square test at 0.05 level of significance.

(N=200)

Selected variables	$\chi 2$	df	p value
Education	18.35	4	0.001**
Gravidity	4.17	1	0.04*
Place of living	5.21	1	0.02 *
Past medical history	12.44	5	0.02 *
Type of treatment	9.81	4	0.04 *
Information on vulvovaginitis	163.52	2	0.000 ***
Sources of information	143.02	4	0.000***

* Significant at < 0.05 level of significance

A significant association between knowledge of pregnant women on prevention and management of vulvovaginitis with selected variables such as education, gravidity, place of living, past medical history, type of treatment, information on vulvovaginitis and sources of information.

DISCUSSION

The present study reveals that 22.5% of pregnant women have average knowledge regarding prevention and management of vulvovaginitis, 77.5 % have poor knowledge and no one have good knowledge regarding prevention and management of vulvovaginitis. The study findings are matching with a previous study findings conducted at the Institute of Maternal and Child Health, Kozhikode, to assess the effect of planned nursing interventions on self-care management in antenatal women with vaginal candidiasis, revealing that 100% of participants had poor knowledge before the intervention.[4]

Acknowledgements

The authors would like to express their sincere gratitude to all the participants for their contributions in the study

CONCLUSION

The study revealed that 77.5% of the pregnant women had poor knowledge. This necessitates the importance of health education regarding prevention and management of vulvovaginitis. The study underscores the importance of educational material aims to empower pregnant women with the necessary knowledge to take proactive steps in maintaining their reproductive health and seeking timely medical attention when needed, ultimately leading to enhanced reproductive health outcomes and better overall well-being.

REFERENCES

1. Yadav L, Yadav R. Prevalence of vaginal yeast infections in pregnant and non-pregnant women attending at Gynecology and Obstetrics Department of the tertiary care center in Central region of Nepal. Microbes and Infectious Diseases [Internet]. 2022;0(0):0–0. Available from: http://dx.doi.org/ 10.21608/mid. 2022.123756.1250
2. Pregnancy: Introduction. Hesperian Health Guides. 2024.
3. Mullick S, Watson-Jones D, Beksinska M, Mabey D. Sexually transmitted infections in pregnancy: prevalence, impact on pregnancy outcomes, and approach to treatment in developing countries. Sex Transm Infect. 2005 Aug;81(4):294-302. doi: 10.1136/sti.2002.004077. PMID: 16061534; PMCID: PMC1745010.
4. Thomas R. Effect of planned nursing intervention on self-care management among antenatal women with vaginal candidiasis. Kozhikode: Government College of Nursing; 2015
5. Introduction to Pregnancy. MentalHealth.com LLC. 2024.
6. Chan MY, Smith MA. Infections in pregnancy. In: Comprehensive Toxicology. Elsevier; 2018. p. 232–49.
7. Cauci S, Culhane JF. Modulation of vaginal immune response among pregnant women with bacterial vaginosis by Trichomonas vaginalis, Chlamydia trachomatis, Neisseria gonorrhoeae, and yeast. Am J Obstet Gynecol. 2007 Feb;196(2):133.e1-7. doi: 10.1016/j.ajog.2006.08.033. PMID: 17306653.
8. Paladine HL D. Vaginitis: Diagnosis and Treatment. 2018;
9. Abdul-Aziz M, Mahdy MAK, Abdul-Ghani R, Alhilali NA, Al-Mujahed LKA, Alabsi SA, Al-Shawish FAM, Alsarari NJM, Bamashmos W, Abdulwali SJH, Al Karawani M, Almikhlafy AA. Bacterial vaginosis, vulvovaginal candidiasis and trichomonal vaginitis among reproductive-aged women seeking primary healthcare in Sana'a city, Yemen. BMC Infect Dis. 2019 Oct 22;19(1):879. doi: 10.1186/s12879-019-4549-3. PMID: 31640583; PMCID: PMC6805389.
10. Koumantakis EE, Hassan EA, Deligeoroglou EK, Creatsas GK. Vulvovaginitis during childhood and adolescence. J Pediatr Adolesc Gynecol. 1997 Feb;10(1):39-43. doi: 10.1016/s1083-3188(97)70043-3. PMID: 9061634.