

Perception of Vaginal Discharge Among Women in A Rural Setting in Aligarh

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Abstract

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. Safed pani is also widely attributed to heat. It is associated with a variety of psychological disorders. Vaginal discharge is one of the most common symptoms of gynaecological morbidity. Vaginitis is the most common cause followed by cervicitis. The aim of this study was to find out the perception of vaginal discharge among married females of reproductive age group.

Material and Methods A cross-sectional study was conducted during Nov-Dec in 2009, in the rural areas of Jawan, Aligarh. A total of 80 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.

Results Most of the women reported the cause of vaginal discharge to be weakness, poor hygiene of genitals of either themselves or of their husbands, melting of bones and because of visiting of husbands to other women. 86.25% of women said that it was due to some internal gynecological problem. 30% of women believed the cause to be diet also. 75% of women reported the cause to be backache. The effects of vaginal discharge as reported by majority of women were weakness, backache, pain in lower abdomen, bodyache, pallor, etc. 36.25% of women consulted doctors for treatment, 28.75% of women took herbal/ayurvedic treatment, 20% took some home remedies and 15% took no treatment.

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 primary health care centres.

Keywords: vaginal discharge, women, perception, rural areas

I. 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). Dhatu disorders have also been reported among men in India and are most often linked to perceptions of masculinity and sexual performance (2). A study in rural Maharashtra (3) revealed that women believed vaginal discharge to be derived from weakness and melting of bones. Safed pani is also widely attributed to heat (4). It is associated with a variety of psychological disorders. Vaginal discharge is one of the most common symptoms of gynaecological morbidity (5). Vaginitis is the most common cause followed by cervicitis (6). WHO recommends algorithms for the treatment of this symptom in developing countries (7). 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 of vaginal discharge among married females of reproductive age group.

II. Material and Methods

A cross-sectional study was conducted during Nov-Dec in 2009, in the rural areas of Jawan, Aligarh. A total of 80 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=80)

Causes	No.	Percent
Weakness	76	95
Melting Of Bones	73	91.25
Heat	56	70
Visit To Other Women By Husband	74	92.5
Poor Personal Hygiene Of Genitals (Wife/Husband)	74	92.5
Internal Gynaecological Problem	69	86.25
Backache	60	75
Having Too Many Children	45	56.25
Use Of Copper-T	36	45
Diet	24	30

Table -2 Effects Of Vaginal Discharge(N=80)

Effects	No.	Percent
Weakness	78	97.5
Backache	77	96.25
Infertility	17	21.25
Pallor	44	55
Urinary Problems	16	20
Poor Vision	23	28.75
Bodyache	52	65
Pain Lower Problem	58	72.5
Others(Fever,Weight Loss,Headache)	24	30

Table-3 Treatment Taken (N=80)

Treatment	No.	Percent
1.Consult A Doctor	29	36.25
2.Took Herbal /Ayurvedic Treatment	23	28.75
3.Home Remedies	16	20
4.Took No Treatment	12	15

As shown in table-1, 95% of women reported the cause of vaginal discharge to be weakness, 92.5% of women said the cause was due to poor hygiene of genitals of either themselves or of their husbands, 91.25% of women reported the cause to be melting of bones and again 92.5% of them said that the vaginal discharge was because of visiting of husbands to other women.86.25% of women said that it was due to some internal gynecological problem.30% of women believed the cause to be diet also.75% of women reported the cause to be backache. As shown in table-2, the effects of vaginal discharge as reported by majority of women were weakness(97.5%),backache(96.25%),pain in lower abdomen(72.5%),bodyache(65%),pallor(55%),etc. As shown in table-3,about 36.25% of women consulted doctors for treatment,28.75% of women took herbal/ayurvedic treatment ,20% took some home remedies and 15% took no treatment.

IV. Discussion

In our study, 95% of women reported the cause of vaginal discharge to be weakness,92.5% of women said the cause was due to poor hygiene of genitals of either themselves or of their husbands, 91.25% of women reported the cause to be melting of bones and again 92.5% of them said that the vaginal discharge was because of visiting of husbands to other women.86.25% of women said that it was due to some internal gynecological problem.30% of women believed the cause to be diet also.75% of women reported the cause to be backache.

In a study(8,3),similar findings were there.Heat fixation theory has also been reported by other author also(9). Another study(10) also reported the most common cause to be weakness(77%).The other consequences mentioned were lower abdominal pain(67%) and backache(64%). Some women believe that diet is also responsible for vaginal discharge.Some studies quoted it(15).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,21.25% of females said that vaginal discharge could cause infertility.This was reported by other study also(11). In our study,55% of women,reported pallor as effect of vaginal discharge.A study in North India(16) 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 36.25% of women consulted doctors for treatment,28.75% of women took herbal/ayurvedic treatment ,20% took some home remedies and 15% took no treatment. Singh AJ(8) 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(13) 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 Africa(7) STD patients preferred to go to the non-formal health system.

In our study,45% of women reported Cu-T to be a cause of vaginal discharge.It was reported in some studies(9,12)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(14).

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.

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