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Vaginal discharge and associated views among women attending gynaecological OPD

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Abstract

Background: Vaginal discharge is one of the most common complaints of women, and inability to understand and talk about it can be all attributed to the social stigma related to reproductive health. Here we tried to understand the perception of women related to vaginal discharge.

Objective: To explore the views of patients regarding vaginal discharge and its associated implications.

Material and Methods: A cross sectional study was done among women attending the gynaecological OPD at SMS, Hospital, Jaipur, over a period of 12 months. Women in the age group 20-45 yrs were interviewed regarding vaginal discharge and a pretested questionnaire was used to explore their views and further clinical work up was done. The results were compiled.

Results: The mean age of the participants was 31.8 yrs+₁₀. Many women who had physiological vaginal discharge consulted the doctors, attributed their other unrelated symptoms like weakness, bloating and headache to the vaginal discharge. On the other hand, women who had infective vaginal discharge were unaware of it.

Conclusion: Women still have a lot of myths regarding vaginal discharge. All this leads to the over diagnosis and overtreatment of such patients. Regarding other symptoms as an eventual result of vaginal discharge also delays the early diagnosis of various other ailments.

Keywords: Vaginal, discharge, symptoms

1. Introduction

Each society has its own set of beliefs towards any illness and its various aspects. Reproductive health of females is something that women avoid to talk about due to the stigma associated with it. Hence, to eliminate the social stigma attached to the various conditions that affect the reproductive health, the first step is to determine the degree of awareness and attitude of people towards the illness.

Vaginal discharge is one of the most common complaints that patients present with to the gynaecologist. In reality, where it is physiological in a significant number of patients, like during pregnancy or mid-cycle; almost all regard it as pathology. The lack of knowledge and awareness about the basic changes that occur with age adds to an undue load on our already overloaded health facilities.

The purpose of this study was to explore the views of patients regarding vaginal discharge and its associated implications and to understand their treatment seeking behaviour.

2. Material and Method

The study was conducted in the department of Obstetrics and Gynaecology, SMS Medical College, Jaipur, Rajasthan. It is a cross sectional study conducted on 100 women attending the Gynecological OPD. Women attending OPD were included on first come first serve basis and were interviewed regarding vaginal discharge. This study was conducted over a period of 12 months from February 2017 to February 2018. Willing participants were chosen between the age of 20-45 years and who gave written informed consent for the study. Pregnant women and women in their purporeum were excluded from the study. A pretested questionnaire was used to explore their views and further clinical work up was done. The results were compiled.

3. Results

Overall, 100 women were evaluated in this study. Literacy rate was 56 %, with upto 5% of them having studied upto post graduate level. Hindus and Muslims made the most of the population, at 51% and 45% each. Most of them were married (70%) and were housewives by occupation. On being enquired about the type of vaginal discharge, 49 % women had thick vaginal discharge, 35 % had thin, while the rest of them could only describe it as mixed.

83 % of women had white vaginal discharge, rest could describe it as yellowish or mixed. On questioning whether there was any foul smell associated with vaginal discharge, almost more than half reported it.

Maximum women had wetting of undergarments (80%), with the daily routine being affected in upto 46 percent. Vaginal discharge was a major cause of discomfort in about 75% of the women evaluated.

Around 74% of the women believed that the husband need not be treated in such a scenario. And the consultation for the women themselves was sought only in about 55% of the cases. Among the women who went for consultation, majority went to an allopathic doctor (46%).

Amongst the associated symptoms, 74 % had weakness and 63 % had backache. Majority of the associated symptoms were attributed to or thought to result from vaginal discharge.

Upon further probing the participants about the various reasons that could be the causative factors leading to vaginal discharge, maximum thought it was due to poor diet (26 %). Exposure to heat (20%) and osteoporosis (20%) were also implicated as other causes. Some others believed it to be the result of sexual promiscuity (16%).

4. Discussion

Vaginal discharge or “सफ़ेद पानी” is still the most leading complaint that women present to the Gynecological OPD with. Even in the 21st century, reproductive health is a part of social stigma and hence consultation is not sought. The women interviewed reflected the common beliefs and practices that had been passed down through generations.

The most common cause of pathological vaginal discharge was vaginitis, followed by cervicitis. Mid cycle increase and during pregnancy were the physiological counterparts of increase in vaginal discharge. A lot of women believed that they knew the difference between normal and abnormal vaginal discharge. Abnormality was only considered if the discharge was excess in amount (threshold different for each woman) or if it was associated with blood or pus. They avoided seeking consultation until it started to affect their lives severely. For consultation, Allopathy was preferred over other alternate systems of medicine. Few regarded all forms of vaginal discharge as physiological and did not feel the need for consultation for this complaint at all.

Since Sexually Transmitted Infections could also lead to vaginal discharge, these women avoided reporting to a doctor due to the risk of being shamed for it. The social taboo associated with STIs played a major role in women avoiding treatment as a whole and resorting to home remedies. Home remedies included consumption of fenugreek seeds, asparagus and Betel nuts after every meal.

The social taboo associated with vaginal discharge proves to be a major hurdle in prompt identification of the communicable but treatable forms of vaginal discharge, and the risk of spreading the communicable diseases further. As

for their male partner, most women believed that the husband need not be evaluated or treated if the woman suffers from vaginal discharge. Cumulatively, this adds to the ever increasing incidence of STIs.

Other reasons for non-consultation were cited too like no permanent cure for vaginal discharge, the high cost of treatment, no accompanying person and lack of time.

Weakness and backache were also attributed to vaginal discharge. And all of these were thought to be normal in accordance with the increasing age of the patient, making visit to a doctor unnecessary. Such beliefs, attitude and lack of interest towards their own health, further compounded by the stigma attached to reproductive health, leads to women ignoring their own body and the signs that it might be giving that may point towards a more severe illness. Hence, along with the education and empowerment of women, De-stigmatization becomes an absolute necessity in overcoming these hurdles.

5. Conclusion

The main reason of all the myths and misconceptions related to vaginal discharge was found to be the age old beliefs, with the root cause being illiteracy. Hence, the problem should be interpreted in the context of the belief systems in place and the treatment to be given accordingly. There is a need to educate these women about their natural physiology and the need to recognize the alarming signs. Education, motivation and counselling may help to eliminate the social stigma attached to the reproductive health.

6. Conflict of interest

None.

7. Funding statement

Not applicable.

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