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Analysis of leucorrhoea in tertiary care hospital in rural Bangalore

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Abstract

Introduction: Leucorrhoea is an abnormal excessive vaginal discharge often associated with irritation. This is the most common gynaecological problem that brings the women to gynec out patient. The symptom may be associated with cancer phobia. It can be symptom of underlying pelvic pathology.

Aims and objective: The aim of the study is analysis of leucorrhoea. This Study was conducted at Dept. of OBG, MVJ medical college and research hospital, Bangalore during the year of 2017.

Material and methods: The study consisted of 100 women of age group of 15-55 years with complaint of white discharge. The detailed history examination and its association with other symptoms was recorded in ms excel and analyzed statistically.

Results: The present study revealed that the disease is prevalent throughout life i.e. 15-55 years, but higher prevalence was observed in mid reproductive period i.e. 25-34 years. Regarding the age distribution analysis 20[20%] cases were between the age of 15-24 years, 50[50%] cases were between the age of 25-34 years, 16[16%] cases were between the age of 35-44 years and 14 [14%] were between the age of 45-54 years, in present study 60% had non specific vaginitis, 17% had trichomonosius, 13% moniliasis and 10% had bacterial vaginitis.

Conclusion: Leucorrhoea is most common gynecological problem of reproductive age group. It can present with local and systemic features. Systemic features responds to treatment of white discharge.

Keywords: Leucorrhoea, associated symptoms, observation, underlying pelvic pathology

1. Introduction

Leucorrhoea is an abnormal vaginal discharge often associated with irritation and is non-hemorrhagic in nature. The discharge may be white, yellow or greenish in colour. It is a symptom of underlying pelvic pathology. It accounts for more than an estimated of 1/4th gynaec patients visits to gynaecologist [1]. It is one of the common problems that women's has to face in their lifetime. Sometimes this symptom is so severe that, it over shadows actual disease and women seek the treatment of only this symptom [2-4]. Leucorrhoea is physiological when associated with various phases of menstrual cycle. It is considered that changes in the vaginal epithelium; changes in the normal bacterial flora and pH of the vaginal secretion predispose to leucorrhoea. But when it turns into pathological condition it produces associated problems like low backache, itching and burning sensation of vulva, poor appetite, discomfort, general weakness, pain in both legs etc. Chronic illness, fatigue, malnutrition, emotional disturbances, unhygienic condition, improper diet, constipation and chronic retroverted uterus are responsible for leucorrhoea. It is associated with infection like *Trichomonas vaginalis*, *Candida albicans* or mixed bacterial infections, gonococcal, monilial infections, vulvovaginitis, lesions of the vaginal wall and uterine cervix have all been associated with leucorrhoea [5-7]. It is also difficult condition to treat satisfactorily in view of its multiple etiology.

Infection with *Trichomonas* is associated with a significant risk of morbidity in women, including pelvic inflammatory disease, adverse pregnancy outcomes like abortion, preterm labor, cervical dysplasia and infertility, increased risk of postoperative infection and HIV acquisition and transmission [8-10]. Some general and systemic disorders produce excessive vaginal discharge [11-13]. Leucorrhoea is usually associated with Low backache, vulval itching, abdominal pain, pain in legs, general weakness and loss of appetite. It also affects psychology of the female unless treated properly. Health and efficiency of women are also affected. This psychological bearing makes it imperative for the physician to do his utmost for its relief. This paper analyse the causes of leucorrhoea.

2. Objective

To analysis of leucorrhoea.

3. Methodology

The present Study was conducted at Dept. of Obstetrics and Gynecology MVJ medical college, Bangalore during the year of 2017. The study consisted of 100 women of the ages between 15-55 years with complaint of white discharge per vagina. After obtaining the willingness to participate in the study. The detailed history regarding the age, compliant and its associated symptoms was interrogated and recorded. The collected data was analyzed statistically.

3.1 Study design: Observational Study.

3.2 Duration of Study: 6 months

3.3 Sample size: 100

3.4 Method of collection of data: structured questionnaire

3.5 Inclusion criteria: All women complaining of leucorrhoea irrespective of pathology

4. Results and Analysis

4.1 Age

The present study revealed that the disease is prevalent throughout life i.e. 15-55 years, but higher prevalence was observed in mid reproductive period i.e. 25-34 years. [Table 1] Regarding the age distribution analysis out of 100 cases of leucorrhoea 20 [20%] cases were between the age of 15-24 years, 50[50%] cases were between the age of 25-34 years, 16[16%] cases were between the age of 35-44 years and 14 [14%] were between the age of 45-54 years. [Table1]

Table 1: Age wise distribution of patients: n=100

Sl. No.	Age group	No. of patients	Percentage
1	15-24 years	20	20%
2	25-34 years	50	50%
3	35-44 years	16	16%
4.	45-54 years	14	14%

Table 2: Type of Discharge, Diagnosis

Number (N=100)	Itching	Pain abdomen	Type Of Discharge	KOH	Diagnosis
60	Present	Absent	Watery	Negative	Nonspecific Vaginitis
13	Present	Absent	Curdy	Fungal Elements	Monialiasis
17	Present	Absent	Greenish	Negative	Trichomonosis
10	Absent	Absent	Watery	Positive	Bacterial Vaginosis

Table 3: Age wise distribution of patients with discharge: n=100

Sl. No.	Age group	Non specific vaginitis	Monial vaginitis	Trichomono vaginitis	Bacterial vaginitis
1	15-24 years	40	1	0	0
2	25-34 years	7	10	15	9
3	35-44 years	10	1	2	1
4.	45-54 years	3	1	0	0

Table 4: Associated symptoms of leucorrhoea: n=100

Sl. No.	Symptoms	No. of patients
1	Low Backache	45
2	Vulval Itching	90
3	Pain in legs	20
4.	General weakness	50
5.	Loss of appetite	20
6.	Other symptoms Headache, Giddiness, Hair fall etc.	30

4. Associated symptoms of Leucorrhoea

According to the symptoms associated with leucorrhoea out of 100 patients 45 patients complaint of low backache, 90 had vulval itching, 20 had pain in both legs, 50 had general weakness, 20had loss of appetite and 30 patients had other symptoms like headache, giddiness, hair fall etc.

5. Discussion

The most common causes of leucorrhoea include vaginal infection. How ever upper genital pathologies like pid, ovarian malignancy, endometrial malignancy, fallopian tube carcinoma can present with white discharge. The present study revealed that the disease is prevalent throughout life i.e. 15-55 years, but higher prevalence was observed in mid reproductive period i.e. 25-34 years. [Table 1] Regarding the age distribution analysis out of 100 cases of leucorrhoea 20 [20%] cases were between the age of 15-24 years, 50[50%] cases were between the age of 25-34 years, 16[16%] cases were between the age of 35-44 years and 14 [14%] were between the age of 45-54 years, in present

study 60% had non specific vaginitis, 17%had trichomonosius, 13% monialiasis and 10% had bacterial vaginitis.in present study leucorrhea was main compliant in 26% of patients this is similar to study of Kulkarni RN ^[14] reported leucorrhoea in 27.47% women. 50% of the patients are in the 25 to 34 yrs and minimal number are in 45 to 54 yrs. In contrast to this Patel V *et al.* ^[15, 16] find higher percentage of vaginal discharge in younger age group, unmarried females and among those who are working.

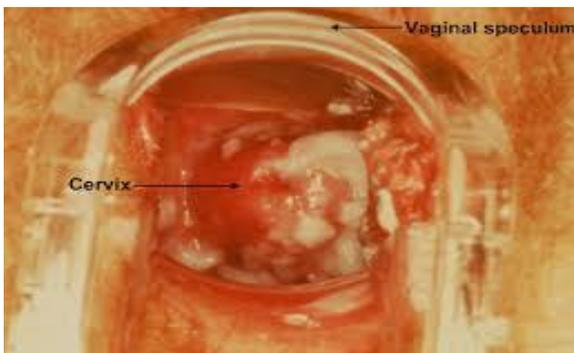
Itching is common symptom in candiadsis, non specific vaginitis and trichomonosis. it was absent in bacterial vaginosis. Overall prevalence of vulval itching (90%) and pain in lower abdomen (0%) in our study were similar to the study conducted in Goa by Tanksale *et al.* ^[17] 70% of patient had watery discharge, 17% had greenish discharge, 13% had curdy discharge. in middle age trichomonosis followed by bacterial vaginosisuis, followed by Candiadsis and lastly non specificvaginosis.

These pathologies which are manifested as leucorrhoea have their specific clinical spectrum. In almost every disease local manifestations dominate the picture. For example vaginal diseases that are the cause of leucorrhoea often manifested as pain in vulva, general weakness etc., similarly cervical diseases are manifested as low backache, uterine and other pelvic diseases are mainly manifested as low backache and lower abdominal pain. In present study analysis of leucorrhic manifestations revealed that leucorrhoea itself causes some manifestations which are difficult to explain on the basis of underlying pathology the logical link and biological plausibility difficult to establish. Biologically unplausible and pathologically irrelevant symptoms present in leucorrhic patients like headache,

general weakness, leg pain showed improvement as white discharge were treated. Few studies has reported these symptoms with pelvic pathology of particular etiology. Except few clinical trials in no study this aspect has been addressed. The present study revealed that patients frequently visit the consultant for leucorrhoea and associated symptoms not due to underlying disease. Every patient is more concern about the discharge and so many complaints are attributed to this discharge. Psychological upset of certain degree is always associated with this. Because of so many attributes, leucorrhea has obtained the status of syndrome and syndromic approach of treatment should be adapted to alleviate the psychological stress.



Trichomonas vaginalis strawberry cervix



Vaginal moniliasis



Trichomonas vaginalis greenish vaginal discharge

6. Summary

Leucorrhoea is the most common and certainly the most annoying problem confronting the gynecologist in practice. 1/4th gynaec patients suffered with this problem. 60% of patients had non specific vaginitis, 50% patient belong to middle age group leucorrhoea are due to some underlying pelvic pathology or not. It was revealed that the disease is more prevalent in mid reproductive life and maximum patients were with complaint of low backache (73.33%) followed by general weakness (38%), vulval itching (36%), loss of appetite (18%), pain in both legs (12.66%) and other complaints (19.33%). Presence of these complaints cannot be linked to underlying pelvic pathology. Hence it can be inferred that these manifestations are functional rather than organic.

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