

Type of cervicovaginitis in women from 15 to 49 years at the General Hospital de Escárcega

Tipo de cervicovaginitis en mujeres de 15 a 49 años en el Hospital General de Escárcega

SARABIA-ALCOCER, Betty†'', LÓPEZ-GUTIÉRREZ, Tomás Joel*, AKÉ-CANCHÉ, Baldemar´ and PÉREZ-BALAN, Román Alberto´

´ Facultad de Ciencias Químico-Biológicas, Universidad Autónoma de Campeche, México

'' Facultad de Medicina, Universidad Autónoma de Campeche, México.

ID 1st Author: Betty, Sarabia-Alcocer / ORC ID: 0000-0002-7912-4377

ID 1st Co-author: Tomás, López-Gutiérrez / ORC ID: 0000-0002-3554-1347

ID 2nd Co-author: Baldemar, Aké-Canché / ORC ID: 0000-0003-2636-5334

ID 3rd Co-author: Roman Alberto, Pérez-Balán / ORC ID: 0000-0003-2366-6617

DOI: 10.35429/JOHS.2023.28.10.10.13

Received January 15, 2023; Accepted June 30, 2023

Abstract

Abstract. Objective: To determine the most frequent type of cervicovaginitis in women between 15 and 49 years of age. Material and methods: Observational, cross-sectional, descriptive, and retrospective study, reviewing a total of 466 number of patients who attended the performance of Papanicolaou, looking for the age of presentation, their marital status, the level of education, their beginning of sexual life, number of sexual partners, the use of contraceptive methods, their socioeconomic level and the type in which the pathology predominates. Contribution: Of a total of 460 women who attended the Pap smear, 39 presented CIN II – CIN III data, 80 gave results of cervicovaginitis, the most frequent being *Candida* (41.25%). Conclusions: The social group that experiences the greatest risk of suffering from sexually transmitted diseases are adolescent women.

Cervicovaginitis, Pap smear, Escárcega

Resumen

Objetivo: Determinar el tipo de cervicovaginitis más frecuente en mujeres de 15 a 49 años. Material y métodos: Estudio Observacional, transversal descriptivo, y retrospectivo, revisando un total de 466 pacientes que acudieron a la realización de Papanicolaou, buscando la edad de presentación, su estado civil, el nivel de escolaridad, su inicio de vida sexual, número de parejas sexuales, el uso de métodos anticonceptivo, su nivel socioeconómico y el tipo en el que predomina la patología. Contribución: De un total de 460 mujeres que acudieron a la toma de papanicolao 39 presentaron datos de NIC II – NIC III, 80 dieron resultados de cervicovaginitis la cual la más frecuente fue *Cándida* (41.25%). Conclusiones: El grupo social que experimenta mayor riesgo de padecer enfermedades de transmisión sexual son las mujeres adolescentes.

Cervicovaginitis, Papanicolao, Escárcega

Citation: SARABIA-ALCOCER, Betty, LÓPEZ-GUTIÉRREZ, Tomás Joel, AKÉ-CANCHÉ, Baldemar and PÉREZ-BALAN, Román Alberto. Type of cervicovaginitis in women from 15 to 49 years at the General Hospital de Escárcega. Journal of Health Sciences. 2023. 10-28:10-13.

* Author's Correspondence (E-mail: tojlopez@uacam.mx)

† Researcher contributing as First Author

Introduction

Cervicovaginitis is a condition that is among the top twelve reasons for care in family medicine outpatient clinics and the main reason for care in the speciality of gynaecology and obstetrics.

Cervicovaginitis is a cause for concern and demand for health services by the female population of childbearing age, with the most affected group being between 18 and 35 years of age; a stage in which women are considered to be most reproductively active, as well as sexually active.

The recurrence and reason for subsequent visits to outpatient clinics by the female population with persistent clinical pictures and without remission with the treatment installed in the primary form to combat cervicovaginitis is alarming. It is considered that a point in favour of this condition is that there is no follow-up in the management of the sexual partner, their sexual behaviour habits, as well as the socio-demographic factors or circumstances (schooling, socio-economic level, marital status and locality where they live).

Methodology

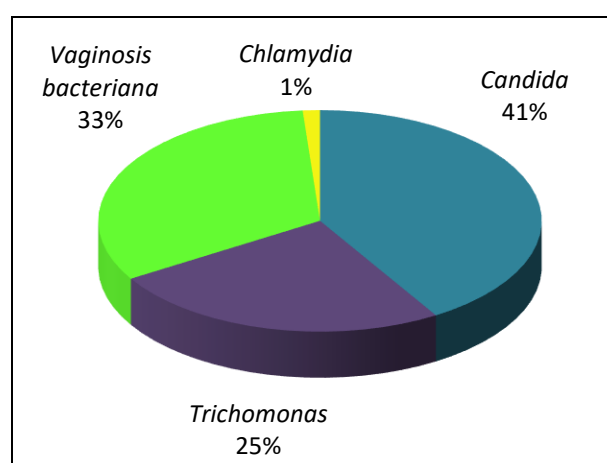
The present study is a descriptive, cross-sectional, retrospective observational study carried out in the General Hospital of Escárcega. The working universe was made up of all patients with a diagnosis of cervicovaginitis, who attended for a Pap smear and with an updated clinical record; all patients who were not of the age under study, those who did not undergo the study in the unit and those who did not have the diagnosis were excluded.

The variables to be investigated were the following: age of the patient, age at the beginning of sexual life, number of sexual partners, economic level, sexual behaviour, planning method used, school level, marital status.

The information was collected by means of a questionnaire that specifically included the data to be studied. Patient's age, age at sexual debut, number of sexual partners, economic level, sexual behaviour, planning method used, school level, marital status.

Results

During the period from January 2021 to December 2022, the results obtained from a total of 460 patients who came for Pap smears, 60 of these were poorly taken and a repeat Pap smear was needed, 281 were negative with inflammatory process and no infection, 39 presented data of CIN II - CIN III, 80 gave results of cervicovaginitis of these 33 reported *Candida* (41.25%), 20 *Trichomonas* (25%), 26 *Bacterial vaginosis* (32.5%), 1 *Chlamydia* (1.25%), the rest were reported negative with inflammatory process (Figure 1).

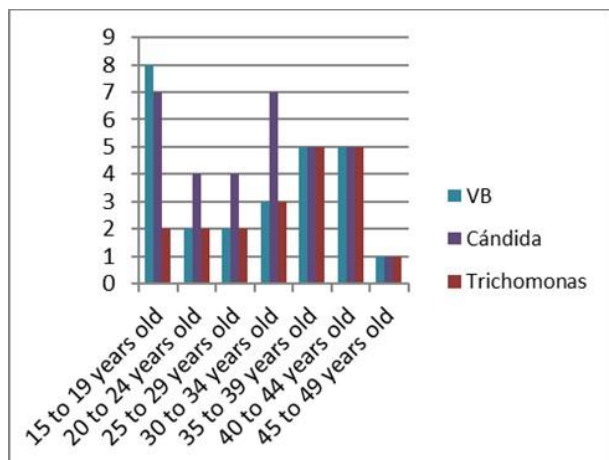


Graphic 1 Cervicovaginitis most common in women aged 15-49 years

The 33 patients who were *Candida* positive 7 were in the age range 15-19 years, 4 in the range 20-24 years, 4 in the range 25-29 years, 7 in the range 30-34 years, 5 in the range 35-39 years, 5 in the range 40-44 years and 1 in the range 45-49 years (Figure 2).

Of the 26 patients who had bacterial vaginosis, 8 were in the 15-19 age range, 2 were in the 20-24 age range, 2 in the 25-29 age range, 3 in the 30-34 age range, 5 in the 35-39 age range, 5 in the 40-44 age range, 1 in the 45-49 age range (Figure 2).

Of 20 patients who tested positive for *Trichomonas*, 2 were in the 15-19 age range, 7 were in the 20-24 age range, 2 in the 25-29 age range, 3 in the 30-34 age range, 3 in the 35-39 age range, 2 in the 40-44 age range, 2 in the 45-49 age range (Figure 2).



Graphic 2 Classification of pathologies based on the age of the patients

It was found that 36 of the patients studied were in union, 20 were married and 24 were single.

In the three entities studied, the patients have reached the following level of education: 9 finished high school, 30 finished secondary school, 26 reached primary school level and 15 are illiterate.

A number of 61 patients started their sexual life at the age of 15-19 years, 17 started at the age of 20-24 years and 2 patients at the age of 25-29 years.

Of the 80 with a diagnosis, 46 of the patients studied have had 2 or more sexual partners and 34 patients have had only one sexual partner.

The predominant level in this study was level 1, with a total of 55 patients and 20 in level 2 and 5 in level 3.

Of the 80 patients, 22 used oral contraception, 17 used hormonal IUDs, 9 hormonal injectables, 5 used condoms, 20 did not use any method and 7 had a hysterectomy.

Conclusions

We conclude that the main aetiology of cervicovaginitis was *Candida*, occurring most frequently in patients aged 15 to 19 years. The highest incidence of the pathology was found in women who were living in a union and those with an intermediate level of education. It was also observed that the sexual debut of the patients with the pathology was before the age of 18 and that they had a poverty level of 1.

It was also concluded that the number of sexual partners that the patients had was 2 or more and that the most used method of family planning was oral hormonal contraceptives.

References

López Álvarez et al. Guías clínicas vulvovaginitis 2006 (recuperado) 10/02/2007. <https://www.scsalud.es/documents/2162705/2163019/BOLETIN+4+2006-+VULVOVAGINITIS.pdf>

Manual de salud reproductiva en la adolescencia, Aspectos básicos y clínicos, vol.30,2005.https://hosting.sec.es/descargas/AA_1999_Manual_Salud_Reproductiva_Adolescence.pdf

Montoya, J. B., Avila-Vergara, M. A., Vadillo-Ortega, F., Hernández-Guerrero, C., Peraza-Garay, F., & Olivares-Morales, S. (2002). Infección cervicovaginal como factor de riesgo para parto pretérmino. *Ginecol. obstet. Méx.*, 203-209. <https://pesquisa.bvsalud.org/portal/resource/pt/il-331098>

Nachamkin, I., Crane, L., Brown, J., Huang, C., Liu, X., & Van Der Pol, B. (2023). Clinical Evaluation of a New Molecular Test for the Detection of Organisms Causing Vaginitis and Vaginosis. <https://www.elabmarket.net/files/articles/670/e9019739e14f23b799d3facf02499781.pdf>

Sánchez Abascal, S. D. R. (2019). Morbilidades del embarazo adolescente en el HGZ No. 20 IMSS “La Margarita”. <https://repositorioinstitucional.buap.mx/bitstream/handle/20.500.12371/13925/20210426132812-3979-T.pdf?sequence=1>

Trejo y Pérez et al. *Revista médica del IMSS* 2006 41 (suple) S71-S76 Guía clínica para el diagnóstico, tratamiento y prevención de cervicovaginitis por bacterias, tricomonas y *Candida* vol. 41 Pág.71-76. http://www.imss.gob.mx/sites/all/statics/guiasclinicas/081GER_1.pdf

Yalew, G. T., Muthupandian, S., Hagos, K., Negash, L., Venkatraman, G., Hagos, Y. M., ... & Saki, M. (2022). Prevalence of bacterial vaginosis and aerobic vaginitis and their associated risk factors among pregnant women from northern Ethiopia: A cross-sectional study. *PloS one*, 17(2), e0262692. <https://journals.plos.org/plosone/article?id=10.1371/journal.pone.0262692>