SUMMARY

Non specific vaginitis is one of the commonest diseases of the vagina. This disease leads to malodourous vaginal discharge and/or vulval itching. The causative organisms of this disease are the gardnerella vaginalis and the anaerobic bacteria. This disease may be present at different ages, but more commonly in the reproductive period.

In our study, we aimed at detect the incidence of N.S.V. and its symptomatology and clinical signs in Egyptian patients attending to out patient clinic of Simbellawain General Hospital - Dakahlia Governorate- Egypt. These patients who were complaining of vaginal discharge and/or vulval itching. Also we looked for the association of nonspecific vaginitis with other types of specific vaginitis namely; trichomoniasis and candidiasis.

This study included 300 successive women. They were not menstruating, not pregnant, not taking any antibiotics or vaginal chemicals for at least 3 months. Also they

were not using any contraceptive method for at least 3 months.

A complete history was taken and carful vaginal examination was done, with special reference to the vaginal discharge.

Three specimens of vaginal discharge were collected by cusco's vaginal speculum, The first specimen for PH determination, the second for testing the fishy odour (Whiff test) and the third was examined microscopically to detect the clue cells.

The diagnosis of N.S.V. was made if at least three of these four criteria were found in the vaginal discharge. These criteria are; (a) The characteristic vaginal discharge of N.S.V. (b) Acidic PH of the vaginal discharge ranging from 4 to 6.5. (c) positive Whiff test and (d) presence of clue cells when examined the discharge microscopically.

In this study, we found that the incidence of pure nonspecific vaginitis was 37.33% There was association

between N.S.V., trichononiasis and candida in 18 cases (6.0%). Also, we found that the incidence was higher in age groups 16-25 years (38.4%) and 25-35 years(34.8%).

The incidence of pure nonspecific vaginitis was higher in multiparous women (65.2%) than in nullipara or grandmultipara (5 or more).

We found also that the frequent diagnostic criteria of N.S.V. was the presence of clue cells microscopically (83.1%) and the most common combination of diagnostic criteria was the presence of the characteristic vaginal discharge, vaginal PH of 4-6.5 and the presence of clue cells (30.3%).

As regard to the clinical presentation we found that the most frequent symptom was the vaginal discharge (76.8%) which was moderate in amount (65.1%), white to grey in colour (44.2%), malodourous (91.9%) and had frothy in 24.4% of cases. There also was itching in 11.6% and itching associated with discharge in 9.8% of cases.

The clinical evidences of inflamation were found as redness of vulva in (6.3%) and redness of vagina in

8% of cases.

We found also that 64.3% of patients with nonspecific vagin had a PH range from 5 to 5.5.