RESULTS

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The incidence of nonspecific vaginitis (N.S.V.) in our study is shown in table I.

Among our 300 successive female patients subjected to the four diagnostic criteria for nonspecific vaginitis, three positive criteria at least were found in 112 patients (37.33%). In another 18 patients (6.0%) had positive criteria for diagnosis of nonspecific vaginitis but were associated with trichomoniasis and/or candidiasis.

Table (1): Incidence of nonspecific vaginitis (300 patients):

Type of vaginitis	No.of cases	%
Pure nonspecific vaginitis	112	37.33%
Mixed vaginitis	18	6.00%
Nonspecific vaginitis + Trichomoniasis	8	2.66%
Nonspecific vaginitis + Candidiasis	7	2.33%
Nonspecific vaginitis + both candidiasis and trichomoniasis.	3	1.00%
Total	130	43.33%

Nonspecific vaginitis was diagnosed by the presence of three out of the four following criteria (Vontver & Eschenbach, 1981).

a) The characteristic vaginal discharge of nonspecific vaginitis.

b) Acidic PH of the vaginal discharge, ranging from 4-6.5.

c) Fishy odour (Whiff, test) after addition of 10% potassium hydroxide.

d) Delection of the clue cells microscopically.

The frequency of diagnostic criteria of nonspecific vaginitis in the 112 cases with pure N.S.V. are shown in Table II.

Table (II): Frequency of diagnostic criteria of nonspicific vaginitis (112 cases):

Criteria	No.of patient	%
a) Characteristic vaginal discharge.	86	76.8 %
b) PH of vaginal discharge (4-6.5)	89	79.5 %
c) Fishy odour of vaginal discharge. (Positive Whiff test).	78	69.6 %
d) Presence of clue cells microscopically	93	83.1 %

The frequency of combination of diagnostic criteria of nonspecific vaginitis is shown in table III.

Table (III): Combination of diagnostic criteria of non-specific vaginitis (112 cases):

Diagnostic criteria	No,of patient	%
All four criteria	10	8.9%
Three criteria*		
a + b + c	19	16.9%
a + b + d	34	30.3%
a + c + d	23	20.5%
b + c + d	26	23.2%

* a= characteristic vaginal discharge, b= PH 4-6.5. c= positive Whiff test, d= presence of clue cells.

This table shows that 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 in wet mount preparation of vaginal discharge examined microscopically (30.3%).

The PH of the vaginal discharge in the 112 patients with pure nonspecific vaginitis is shown in table IV.

Table(IV): Range of PH with pure nonspecific vaginitis (112 patients):

PH range	No. of patients	%
4.0-4.5	4	3.6%
4.5-5.0	17	15.2%
5.0-5.5	72	64.3%
5.5-6.0	13	11.6%
6.0-6.5	6	5.4%

This table shows that 64.3% of patients with nonspecific vaginitis had a PH range from 5 to 5.5 with the mean value (5.25).

Table V shows the symptoms and signs in the 112 patients with pure nonspecific vaginitis.

Table (V): Symptoms and signs with pure nonspecific vaginitis (112 patients):

Symptoms and signs	No.of patients	%
Asymptomatic	15	13.4%
Symptomatic	97	86.6%
A. Symptoms		
1. Discharge	73	65.2%
2. Itching	11	9.8%
3. Discharge and itching	13	11.6%
B. Signs		
1. Redness of vulva	7	6.3%
2. Redness of vagina	9	8 %
3. Discharge		
a) Amount		
Slight	22	25.6%
Moderate	56	65.1%
Copious	8	9.3%
b) Colour		
white to grey	38	44.2%
yellow	21	24.4%
Green	19	22.1%
clear	8	9.3%
c) Malodour	79	91.9%
d) Frothiness	21	24.4%

Table VI shows the age distribution in the 112 patients with pure nonspecific vaginitis.

Age group (years)	No. of patients	%
16-25	43	38.4%
> 25-35	39	34.8%
> 35-45	19	16.9%
> 45-55	11	9.8%

This table shows that the highest incidence of nonspecific vaginitis in age groups 16-25 years (38.4%) and 25-35 years (34.8%).

Table VII shows the parity in the 112 patients with pure non specific vaginitis.

Table (VII): Parity with non specific vaginitis:
(112 patients).

Parity	No. of Patients	%
Nullipara	22	19.6%
Multipara (1-4)	73	65.2%
Grandmultipara (5 or more)	17	15.2%

This table shows that the incidence of non-specific vaginitis was higher in multiparous females (65.2%).