Results

## STITUS

general hospital on a sample of 300 successive women we found the following results: and condidiasis, with and without IUCD: in the outpatient clinic of Kafer El Sheikh On Studying the prevalence of vaginal infections t(mainly. N.S.V.; trichomoniasis

Table 1 : Symptoms and signs of vaginitia.

	Group I	Group I n=69 *	Group II. n=66 🖈	n=66 <b>≭</b>	Group I	Group III n = 59 *	<del>.</del>
Data	No.	24	No.	38	No.	38	value
Symptoms:-		·					
· Vaginal discharge	69	100%	66	100%	59	100%	> 0.05
offensive odor	45	65.2%	42	63.6%	32	54.2%	> 0.05
Pruritus vulvae	36	52.2%	34	51.2%	쁄	52.5%	> 0.05
• Dysuria	12	17.4%	14	21.2%	18	30 • 5%	<b>&gt; 0.</b> 05
· Dyspareunia	20	28.9%	18	27.3%	16	27.1%	> 0.05
Signs : • Vaginal discharge	69	100%	. 66	100%	59	100%	> 0.05
end vagina of vulva 60	60	86.9%	55	83.3%	51	86•4%	> 0.05
	4						

Group I = with Lippes loop

# number of cases of vaginitis in each group.

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Group II = with Cur<sub>200</sub> devices Group III = control group

incidence of symptoms and signs of vaginitis in the three groups of study (P This table shows that there was no statistically significant difference in the 0.05).

Table 2: Shows the incidence of vaginitis in control women without IUCDg (Group III-100) and = 100). those with co pper T200 IUCD. (Group II=100) and those with lippes loop (Group I

Table 2 : Overall incidence of vaginitis in control group, Lippes loop and Cu T200 IUCD.

vaginitis	•	
100100	No vagini	No vaginitis
No %	No	9
Lippes loop (100) 69 69%	31	31%
Copper T <sub>200</sub> (100) 66 66%	34	34%
control (100) 59 59%	41	11 41%
P. value >0.05	> 0.	> 0.05
Total group (300) 194 64.7%	106	)6 35 <b>•</b> 3%

women wearing copper T200 IUCD was 66% and smong those wearing lippes loop was 69%, a difference which was not statistically significant (P > 0.05), and the incidence of vaginitis among the total study groups was 64.7%. This table shows that the incidence of vaginitis among the control group was 59%, among

Table 3: Shows the incidence of different types of vaginitis in control women without with copper T200 IUCD (Group II = 100). IUCDs (Group III = 100), in those with Lippes loop (Group I=100) and in those

3: Incidence of different types of vaginitis in Lippes loop, copper T200 IUCD and control group.

	משפט פעל ג	TAR TAR and DA DR in the game order	188 188	1 Ag.			twole M.	order of choine respectively Moniliania soccimted for 18%
3 ELIDA	in the same	T.V.V accounted for 15%, 14%, 14% and 22.2%	, 14%, 14%	d for 15%	secounte		eapective	total group of study respectively.
I, TIT O	roup I, I	26% and 45.4% in group I, II, III a	26% and	206, 30%,	accounted for 32°6,		hat N.S.	This table shows that N.S.V.
5.6	11	26%	52	22.2%	43	45.4%	88	Total group (300)
0.05	>	0.05	> 0	•05	> 0.05	05	> 0.05	P. value.
	<b>4</b>	18%	18	1 4%	14	26%	26	Control (100) III
ži.	w	16%	16	1 4%	14	30%	90	Copper T <sub>200</sub> (100) II 30
45%	4	18%	18	15%	15	32%	32	Lippes loop (100) I
%	No	% ₩	No.	%	No	82	No.	ด้าดเก
fection	Mixed infection	Moniliasis	Monil	•	T.V.V.		N.S.V.	
	The state of the s							

order of groups respectively monifies accounted for 10%, 10%, 10% and 20.0% in the same order types of vaginitis in the study groups. respectively. There was no statistically significant difference in the respectively. Mixed infection accounted for 4%, 3%, 4% and 5.6% in the same order of groups incidence of various

4 shows the effect of IUCDs on vaginal PH in patients without evidence of vaginitis in presence and absence of IUCDs.

Table 4 如ffect of IUCD, on vaginal PH in cases without vaginitis.

Cages	Range of PH	Mean of PH	Standard deviation
	-		S.D.
Negative cases without	3.5 - 4.5	4.07	+ 0.07
$IUCD_g$ . (n = 41)	1 400		
Negative cases with	3.5 - 4.5	4.05	± 0.05
IUCD g(n = 65)			
P. value.	<b>&gt;</b>	0.05	

statistically significant (p > 0.05). This means that the presence of IUCD $_g$  did not mean was 4.07 and 4.05 in these without and with IUCD respectively, which was not significantly alter the vaginal PH. This table shows that, the range of PH was from 3.5 - 4.5 in both groups and the

Table 5: shows PH values of the vaginal discharge in normal cases and in different types of vaginitis.

Table 5 : PH of vaginal discharge in normal cases and with vaginal infections.

•	± 0.25	± 0.05	± 0.27	+ 0.06	S.D.
7	4.2	5.7	5.2	4.06	Меал
TO*Q	4 - 4.5	5 - 645	5 - 5.5	3.5 - 4.5	Range.
<b>&gt;</b> a	Candidal vaginal discharge (n = 52)	T.V.V vaginal dis- charge(n=43)	N.S.V. vaginal discharge (n = 88)	Normal vaginal discharge (n = 43)	<b>PH.</b>

discharge where (P < 0.05). with mean of 5.2 ± 0.27 The PH of trichomonal vaginal discharge ranged from 5 to 6.5 with vaginal discharge between the three groups of vaginitis and that of the normal vaginal a mean of 4.2 ± 0.25. There was statistically significant difference regarding PH of a mean of  $5.7 \pm 0.05$  and the PH of candidal vaginal discharge ranged from 4 to 4.5, with 4.5, with a mean of 4.06  $\pm$  0.06. The PH of N.S.V. vaginal discharge ranged from 5 to 5.5, This table shows that, the PH of normal vaginal discharge ranged from 3.5 to

Table Table 6 : Parity and vaginitis. Shows the relation between Parity and Vaginitis.

	Parity & 4	·// 4	Parity	y > 4	b. Value
e adapte	No.	88	No.	39	
Positive cases n = 194	143	73.7%	51	26.3%	< 0.05
Negative cases n = 106	78	73.6%	28	26.4%	المحت

pathints of parity 4 times or less than smong those above 4 (P < 0.05). This table shows that the incidence of vaginitis was higher among

Table (7): Shows the relation between the age of patients and the incidence of vaginitis.

Table (7): Age and vaginitis.

	I 20-30 years	ears	> 30-	) 30-40 years	> 40 years	ers
	No.	38	No.	88	No•	38
Postiive cases (n = 194)	79	40.7%	94	48.5%	21	10.8%
Negative cases (n= 106)	54	51%	44	41.4%	8	7.6%

I & III ∧ 0.05 value I &

HH

> 0.05

II % III ▲ 0.05

This table shows that the incidence of vaginitis was higher in patients

from 20 - 40 years than above 40 years.

Table 8 contraceptive devices and vaginitis. Shows the relation between the duration of the intrauterine

Table 8: Duration of IUCD, and vaginitis.

	Duration < 2 years	⟨ 2 years	Duration )	> 2 years	P. value
Groups	No.	39	No.	34	
Positive cases n = 135	011	81.5%	25	18.5%	< 0.05
Negative cases n= 65	49	75.4%	9.€	24.6%	

IUCDs Thte for 2 years or less than among patients more than 2 years (P < 0.05). table shows that the incidence of vaginitis was higher in patients with

Table **(**9): Shows the symptomatology in different types of vaginitis

Table (9): Symptomatology

Groups	Ve.	Vaginal discharge	offe	Offensive Odor	Pruritus vulvae	itus Vae	Dys	Dysurie	Dyspareunia	eunia
	No.	%	No.	28	No.	34	No.	8	No.	8
N.S.V. (I)	88	100%	72	81.8%	12	13.6%	ហ	5.7%	8	9,1%
$T_{\bullet}V_{\bullet}V$ (II) $D_{\bullet} = 43$	43	200%	3 7	86 %	32	14.4%	11	25.6%	ಬ	53 <b>.5%</b>
Monilial (III) vaginitis n= 52	52	100%	ı	•	46	88.5%	24	46.2%	22	42 <b>. 3%</b>
										2

II& III > 0.05	I & III 🗸 0.05	P. value I & II < 0.05	Regarding pruritus vulvae:	P. value I & II > 0.05	Regarding offensive odor	P. value I & II & III > 0.05	megarding vaginal discharge
דו & דו	II & III	P. value I & II	Regarding dyspareunia	II & II	III % I	5 P. value I & II	Regarding dysuria
II & III > 0.05.	10.01	TO.07		<b>C0.01</b>	TO.01		