## **Original Research Article**

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# To study the epidemiology of various sexually transmitted diseases in tribal area of Valsad

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#### **ABSTRACT**

**Background:** Sexually transmitted diseases have been considered as a major health problem, in developing countries. With up springing of HIV and AIDS, the attention and importance of STDs have again come into limelight. Epidemiological study is needed to understand the pattern of various STDs prevalent in tribal place of Valsad.

**Methods:** The epidemiological pattern of around 1012 patients have been studied. Patients were followed up at regular interval.

**Results:** 33.3% were males and 66.6% were females. Out of these major percentage of patients had reported vaginal discharge (27.7%), followed by genital warts (23.6%). Females were reluctant to consult the doctor for their problem. (72%) were married and (27.7%) were unmarried. No contraceptive measures were taken in 50% cases. 20 cases of pregnancy with STDs were studied.

**Conclusions:** A epidemiology study was taken up to understand the nature, type and extend of sexually transmitted diseases in the tribal population. Also to know the understanding amongst the masses about the STDs especially in teenagers and young people.

Keywords: Epidemiology, Sexually transmitted diseases, Tribal area

## INTRODUCTION

Sexually transmitted diseases have been considered as a major health problem, in developing country like India. Over years, STD cases have decreased drastically due to decrease in debauchery, fearing infliction with HIV and AIDS, increase in usage of preventive measures like condoms, and public awareness.<sup>1</sup>

Also with advent of effective medicines, the transmission of sexually transmitted diseases have decreased. But with up springing of HIV and AIDS, the attention and importance of STDs have again come into limelight.<sup>2</sup> Currently, India has 3rd highest number of HIV infected

patients.<sup>3</sup> The epidemiological pattern of around 1012 patients have been reported here.

The aim of the present study was to the epidemiology of various sexually transmitted diseases in tribal area of Valsad.

#### **METHODS**

The study was conducted during the period from August 2015 to December 2015. A total of 1012 patients with STDS, attending the Department of Dermatology and Venerology, Government Medical College, Valsad, were enrolled for this study. Out of which only 900 completed the study, while 112 did not follow up. Patients who

voluntarily enrolled for the study were taken into the study. Oral verbal consent was taken. Primary screening for all patients was done. Required blood reporting was done.

All the patients were screened for common STIs by standard microbiological methods such as VDRL/PRP/TPHA, Gram stain, wet mount test and KOH test.

#### **RESULTS**

Total number of patients participated in the study was 900. Of them majority were under the age group of 20-24

years (Table 1). Male dominance was seen in the study. Majority of the cases were unemployed (33.3%) and the few were highly skilled (3.3%) as in Table 2. Married cases (72.2%) outnumbered the Unmarried ones (27.7%) as given in Table 3. Physical contraception had pivotal role in preventing STDs. About 50% of cases are not following contraceptive methods (Table 4). In females 20 were pregnant in the present study. Highest number of cases are having the genital warts (15) followed by candidiasis (3) and AIDS (2) as given in Table 5. In female highest number of cases were showing cervical/vaginal discharge and in males genital wart cases were highest. No cases were of syphilis (Table 6).

Table 1: Age and sex wise distribution of the cases.

<20 years		20-24 ye	20-24 years		25-44 years		ars	Total
Male	Female	Male	Female	Male	Female	Male	Female	
40	30	150	250	188	112	87	43	900

**Table 2: Occupation.** 

Occupation	Number	Percentage (%)
Unemployed	300	33.3
Unskilled	250	27.7
Semiskilled	140	15.5
Skilled	40	4.4
Highly Skilled	30	3.3
CSWs	140	15.5
Total	900	

Table 3: Marital status.

	Number	Percentage (%)
Married	650	72.2
Unmarried	250	27.7
Extra marital	50	7.6
Premarital	10	4

**Table 4: Contraception.** 

Contraceptive measures	Percentage (%)
Condoms	20
IUCD	19
Sterilization	11
No measures-	50

Table 5: Pregnancy and STDs.

Cases	Number
Genital warts	15
candidiasis	3
HIV and AIDS	2

#### **DISCUSSION**

As observed in our study, total cases were 900. The number of males and females is more or less the same.

On basis of our study, even the kind of occupation the cases had, had a correlation with the STD that prevailed.<sup>4</sup>

Most of the patients were unemployed labourers. Even in the highly qualified personnel, cases of STDs did prevail.

Out of every 10 cases, 6 were addicted. Addiction was in form of smoking, chewing tobacco, alcohol consumption, marijuana consumption. Mostly chewing tobacco, alcohol consumption was prevalent in unemployed and unskilled labourer. While cases of smoking was seen even in highly skilled people.<sup>5</sup>

Both married and unmarried cases were included in the study. Married people outnumbered the unmarried cases.

Around 4% had the premarital exposure. The reason was Sexual urge, peer pressure, for pleasure, love affair, and curiosity. Around 7.6% had an extra marital affair, reason cited was- lack of harmony in home, office pressure, alcohol abuse, lack of sexual interest amongst the spouse, Monetary gains. The results were almost similar to the study conducted in year 2000, where majority of the males (57%) and the females (93.57%) were married.

Condoms were used in only few cases. 50% didn't take any precautionary measures owing to various reasons like- lack of sexual pleasure with condom, hesitation to go and buy condoms, hesitation to visit doctor for proper advice, unintentional sexual activity.<sup>6</sup>

Few cases of pregnancy with STD were studied. All ANC cases were also screened for syphilis. Out of 20 cases, 19 have successful outcome. Both mother and child were regularly followed up for a period of 6 months.

Maximum cases seen during the study were of vaginal/cervical discharge. Often the females were reluctant to share their problem, owing to the social

stigma attached. Most of the females complained of, only vaginal discharge, without any complaints of itching

/pain/ burning. On examination, only 4% had erythema along with discharge.

Table 6: Pattern of STDs.

Cases	Males	Females	Total	Percentage (%)
Cervical/vaginal discharge	0	250	250	27.7
Genital ulcer-non herpetic	5	0	5	0.5
Genital ulcer-herpetic	20	30	50	5.5
Lower abdominal pain	0	150	150	16.6
Urethral discharge	10	0	10	1.1
Ano-rectal discharge	1	0	1	0.11
Inguinal bubo	2	0	2	0.22
Painful scrotal study	0	0	0	0
Genital wart	103	110	213	23.6
Other STI	63	0	63	7
Asymptomatic STI	80	65	145	16.1
HIV/AIDS	8	3	11	1.2
Syphilis	0	0	0	0

Genital warts were second in the list. Almost equally, it was seen in both sexes. History of sexual contact was noted in almost all cases. Only 1 case of extremely painful genital wart was noted. Genital ulcer- herpetic, was seen in around 50 cases. 3 cases had recurrent history of genital ulcer. Around 11 cases of HIV/AIDs were seen.<sup>8</sup> They were under regular evaluation and under treatment.<sup>9</sup> HIV/AIDS patients were counseled about safe sex practices.<sup>10</sup>

### CONCLUSION

The spread of STDs is at an alarming rate due to ignorance and the stigma attached to these diseases and also because of plain embarrassment when it comes discussing this uncomfortable topic, as we encountered while studying our cases, especially the females. The importance of using condoms is still vague among the masses. Patients had to be counseled about the nature of STDs, its transmission, its effect and how to prevent. Young people were educated about safe sex. Partners were also evaluated. High risk people were educated about the need of safe practices, and to avoid having multiple sexual partners. Patients with HIV and AIDS were counseled, and they were being managed.

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institutional ethics committee

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