

Adolescent gynecological problems in rural India: A review of hospital admissions in a tertiary rural teaching hospital, Kancheepuram

Wills Shiela

Shri Sathya Sai Medical College and Research Institute, India

Aim: Aim of the current work was to evaluate gynecological problems in adolescent girls; to analyze gynecological emergencies and to develop modalities to improve adolescent health and prepare them for safe-motherhood.

Study Period: Study period was 1 year.

Study Design: Retrospective hospital based observational study was done.

Study Subjects: Girls in the age group of 13-19 years, hospitalized for medical and surgical problems in Shri Sathya Sai Medical College were included in the study.

Method: Analysis of hospital records and interview by structured questionnaire regarding health issues and awareness of health services.

Results: Number of medical admissions was 34; surgical interventions were done in 16 cases. Observations include: Severe anemia 50%-Hb<7 gm needed blood transfusion; 13-puberty menorrhagia, 2-hypothyroid, 10-postabortal bleeding, E. coli urinary infection-5, congenital prolapsed uterus-2 and acute pelvic infection with dysmenorrhoea-3. For surgical intervention on 16 patients: Emergency laparotomy for torsion dermoid cyst-2, ruptured corpus leuteal cyst in an anomalous uterus didelphus 1, ruptured tubal ectopic pregnancy-1, appendectomy-2, emergency evacuation of products following snake bite-1. For elective laparotomy for simple serous ovarian cyst in 4 patients: Hymenectomy-3 and excision of Gartner's cyst-1. Removal of giant ovarian tumor of size 36 weeks and 7 kg weight in a 13 year old school girl, histology was simple serous cystadenoma. These girls were from rural background belonging to low-socio economic status. 34 girls were school dropouts, 40% admissions were for severe anemia and menorrhagia. 10 unmarried girls were admitted with postabortal bleeding did not have any knowledge about contraception. This study emphasizes the need to sensitize them on issues like gender relationships, sex abuse, health services and early admission. Active implementation of projects like ARSH-Adolescent Friendly Reproductive Service and supplementation iron and folic acid to ensure safe motherhood is needed.

drgwillssheelaa@yahoo.in