J Cont Med A Dent. January-April 2017;5(1):45-49.

Clinico-Microbiological Correlation of Vaginal Discharge

Ashwini A Deshmukh, Ruchika P Yengantiwar, Kanan Yelikar, Shubhangi D Chaudhari, Maya N Arvikar

Dr. Ashwini A. Deshmukh, Assistant Professor, Department of Obstetrics & Gynaecology, Dr. Ulhas Patil Medical College & Hospital, Jalgaon Kh, Tal & Dist Jalgaon 425309. Maharashtra, India. Phone: 09048824872 (M), 0257-2366700 (O). Fax: 0257-2366648. E-mail: ashwini.nagawade@gmail.com

Abstract

Aims and Objectives: To establish clinical diagnosis of vaginal discharge and the type of vaginitis, to confirm the type of vaginitis with the help of microbiology of vaginal discharge and to establish clinico-microbiological co-relation of vaginal discharge. Methods: This prospective analytical study was undertaken in 200 patients from July 2010 to June 2012. Results: Clinical diagnosis has moderate sensitivity i.e. 70% and 53.84% for Bacterial vaginosis and candidial vaginitis respectively. But has poor sensitivity i.e. 33.33% for Trichomonas Vaginalis. Clinical diagnosis has high specificity i.e. 97.46% and 81.60% for Candidial vaginitis and Trichomonial vaginitis respectively but has poor specificity i.e. 44.28% for Bacterial vaginosis. Wet mount shows highest sensitivity (83.33%) for diagnosis of Bacterial Vaginosis Wet mount was highly specific for all the three types of vaginitis with highest specificity (98.57%) for Bacterial Vaginosis Conclusions: Gram staining can be restricted to the patients in whom diagnosis cannot be made or in those not responding to routine line of treatment or recurrent vaginitis. If we add simple bed side tools like pH, Whiff test and wet mount microscopy to the diagnosis of all the three type of vaginitis we could increase both sensitivity and specificity.