

MICROBIAL SCREENING OF FEMALES WITH VAGINITIS

T. vaginalis, *M. hominis* and *L. monocytogenes* were isolated in significantly higher number of study cases ($p > 0.001$) as compared to control group, followed by *C. vaginalis* and *Candida* species ($p > 0.01$). Among anaerobes, *Bacteroides* and *Pseudomonas* were isolated in 22.6% and 4.3% of study cases respectively. Miscellaneous species identified in German strain pattern were marginally significant ($p > 0.05$) as compared to control group patients.

INTRODUCTION

About one fourth of women who attend the Gynaecology Out Patient Clinics, complain of vaginal discharge (leucorrhoea), and amongst these at least 50% are due to vaginal infection. Vaginitis continues to be a common result of infection of the female genital tract, being the most common cause of vaginal symptoms. Vaginitis is a poorly defined clinical condition, characterized by the presence of pathology through the vaginal wall

epithelium by the microorganism. Hargill (1969). The symptoms most commonly associated with this established clinical entity are vaginal discharge, coarseness, irritation and dyspareunia. Hargill (1969). Vaginitis may be caused by various micro-organisms. *C. vaginalis*, *Candida*, *M. hominis* and *L. monocytogenes* are the most specific bacterial pathogens. (1) The microorganism which was isolated in most of the study cases of vaginal infection was *T. vaginalis*. The other organisms which were isolated in patients suffering from vaginitis were *Bacteroides*, *Pseudomonas*, *C. vaginalis* and *Candida* species.

Dept. of Microbiology, T. M. Medical College, Bangalore.
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