

**LIFESTYLE BEHAVIOUR, CUSTOMS, TOILET AND VAGINAL HYGIENE
PRACTICES AS CONTRIBUTORY FACTORS IN BACTERIAL VAGINOSIS:
A CASE OF NAIROBI, KENYA.**

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ABSTRACT

Bacterial vaginosis (BV) is a poly-microbial syndrome characterized by a shift in vaginal flora from a predominant population of *Lactobacilli* to their gradual or total replacement with anaerobes. BV appears to be particularly common in sub-Saharan Africa where several studies have reported high prevalences. Lifestyle behaviour, customs, toilet and vaginal hygiene practices have been suggested as important factors that might influence vaginal flora composition, but little data is available from African populations to support or dispute these claims. Non pregnant women seeking care at Special Treatment Centre (STC) in Nairobi, Kenya were evaluated. Lifestyle behaviour, customs, demographic characteristics, vaginal and toilet hygiene practices were determined. Vaginal smears were obtained from each participant and Gram stained for evaluation of BV using Nugent's criteria. Data was analyzed using both Univariate and Multivariate models. The prevalence of BV was found to be 28.5%. Vaginal douching (O.R=1.874, 95% C.I=1.078-3.328), cleaning anus with water after defecation (O.R=2.191, 95% C.I=1.056-4.542) and retaining one sexual partner in the previous two months (O.R=4.588, 95% C.I=1.586-13.272) had significant positive association with BV while use of sanitary pads and tampons (O.R=0.499, 95% C.I=0.252-0.989) had significant negative association with BV. There were significant positive independent association between BV and vaginal douching (O.R=2.086, 95% C.I=1.154-3.772) and having retained at least one sexual partner in the previous two months (OR=5.302, 95% CI= 1.807-15.554) while there was significant negative independent association between BV and those who used sanitary pads and tampons (O.R=0.428, 95% C.I=0.207-0.885). BV was prevalent among these women and a

better understanding of the link between toilet and vaginal hygiene and their links with BV is warranted, as reducing BV prevalence may need targeted interventions at behaviour associated with its occurrence.