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**Research Article**

### ANALYSIS OF DIFFERENT RISK FACTORS WITH GYNAECOLOGICAL PROBLEMS ON THE HEALTH OF UNIVERSITY STUDENTS

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**Abstract:**

**Introduction:** Over the last few years, gynaecology and obstetrics as other medical specialties have been subject to extensive changes.

**Aims and objectives:** The basic aim of the study is to analyse the different risk factors with gynaecological problems on the health of university students.

**Material and methods:** This cross-sectional study was conducted at different parts and different medical universities of Punjab during June 2018 to March 2019. The data was collected from 500 female students of different universities. The data was collected with a questionnaire. The most common gynecological problems were listed and the definition and symptoms of each problem was given in parenthesis.

**Results:** The data was collected from 500 female students. The average age of the students was  $19.7 \pm 0.45$ , and the average of Body Mass Index (BMI) was found to be  $21.4 \pm 3.1$ . 99.2 percent of the students were single; 66.7% of them perceived their economic situation as good; and 64.6% of them stayed in the state dormitory.

**Conclusion:** It is concluded that young women in this study had high risk of gynecological disorders. Risk with gynecological problems can lead to worse health conditions.

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**INTRODUCTION:**

Over the last few years, gynaecology and obstetrics as other medical specialties have been subject to extensive changes. Increasing specialisation of techniques, methods and procedures have been observed in diagnostic and therapeutic health care, as well as in research. This development will also continue over the coming years [1]. With this, there is a growing risk that the professional unity will be fragmented and that isolated innovation processes will not be integrated and implemented in the speciality.

At the same time, clinics and research facilities are under increasing pressure to perform and under increasing competitive pressure to be able to exist under clinical, scientific and economic terms and to continue to develop [2]. The condensation of demands on hospitals observed in all industrial nations also characterizes the situation in German women's hospitals. Based on these aspects, a pooling of expertise and resources in the areas of science and health care appears sensible [3].

Adolescents encounter some risks with gynecological problems such as menstrual problems, vaginal discharge and infections, pelvic mass and ovarian cysts, trauma and sexual abuse, genital system anomalies, abdominal and pelvic pain, adolescent pregnancies, breast problems, and early and late puberty. In a study 33.4% of the adolescents consulted a doctor with complaints of menstrual disorder and that 2.8 percent of all the patients were hospitalized for treatment [4]. Furthermore, as revealed by the study, the young population is generally perceived as a healthy group that does not require health care services, and thus they cannot adequately benefit from these services [5]. For this reason, the diagnosis of the gynecological problems whose onset is rooted in this period may be delayed, leading to higher

mortality or morbidity at adult ages. However, it must be noted that the majority of the health problems experienced in this period may be prevented [6].

**AIMS AND OBJECTIVES:**

The basic aim of the study is to analyse the different risk factors with gynaecological problems on the health of university students.

**MATERIAL AND METHODS:**

This cross sectional study was conducted at different parts and different medical universities of Punjab during June 2018 to March 2019. The data was collected from 500 female students of different universities. The data was collected with a questionnaire. The most common gynecological problems were listed and the definition and symptoms of each problem was given in parenthesis. For example, Premenstrual Syndrome (a condition characterized by some emotional changes that start a few days before menstruation and which could continue throughout the menstruation such as edema, headache, nervousness and tension), or urinary tract infection

**Statistical Analysis:** The data was collected and analysed using SPSS version 20.0.

**RESULTS:**

The data was collected from 500 female students. The average age of the students was  $19.7 \pm 0.45$ , and the average of Body Mass Index (BMI) was found to be  $21.4 \pm 3.1$ . 99.2 percent of the students were single; 66.7% of them perceived their economic situation as good; and 64.6% of them stayed in the state dormitory. It was found that 90.4% of the students did not smoke, and 98.5% of the students stated that they do not use alcohol. The study further found that 75.8% of the participants do not do regular exercise.

**Table 01:** General values of Control group and diseased group

Variable		t Value	p Value
Age (Year)	$19.7 \pm 0.45$	1.716	0.081
BMI (kg/m <sup>2</sup> )	$21.4 \pm 3.1$	2.195	0.031
SBP (mmHg)	$140.36 \pm 15.70$	8.248	0.000
DBP (mmHg)	$87.94 \pm 10.69$	5.967	0.000
PP (mmHg)	$52.42 \pm 12.87$	5.426	0.000
FBG (mmol/L)	$5.12 \pm 0.65$	1.764	0.081
TG (mmol/L)	$1.74 \pm 0.75$	1.838	0.071
TC (mmol/L)	$4.95 \pm 0.76$	1.712	0.090
HDL-	$1.30 \pm 0.43$	1.717	0.089
LDL-C	$3.46 \pm 0.58$	1.139	0.266

**DISCUSSION:**

We found that 22.4% of the female students in our study had the symptoms of urinary tract infection. Despite the detailed literature review, we could not find any recent studies conducted to determine the prevalence of urinary tract infection problem in young womens [7]. However, the studies carried out with young womens and adolescents found the prevalence of urinary tract infection to be between 2% and 30 percent. The study also revealed similar findings as 14.1% of the students had infections such as fungus infection (8.8%), bacterial infection (2.8%), and parasitic infection (2.5%). Moreira et al. found bacterial (5%) and fungus infection (4%) in adolescents [8]. The study findings coincide with those in the literature. The rate of physician-diagnosed polycystic ovarian syndrome (POS) was found to be 3.5%. In another study, the prevalence of diagnosed POS was found to be 2.6% in women aged 25-34 [9]. In the literature, the prevalence of POS in women at reproductive age was found as 4 to 10 percent. In this study, the rate of the young womens who were not given a diagnosis by a physician, but who had POS symptoms was found to be 13%. It is believed that this rate may increase when detailed examinations are conducted [10].

**CONCLUSION:**

It is concluded that young womens in this study had high risk of gynecological disorders. Risk with gynecological problems can lead to worse health conditions.

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