

Original Research Article

Knowledge and awareness of general medical practitioners and nursing staff regarding genital warts

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Abstract: Genital wart is the commonest sexually transmitted disease worldwide and sexual behavior may be different in different countries. The present study was done to study the knowledge and awareness of nursing staff and general medical practitioners about genital warts. The study was carried out at SMBT medical college, Dhamangaon, Ghoti, Nasik, with the help of 16 questionnaires about the knowledge and awareness of the general medical practitioners and nursing staff regarding the genital warts, its etiology, transmission, symptoms, prevention and its treatment. A total of 67 general medical practitioners and 43 nursing staff were taken as participants. Knowledge and awareness scores of the general medical practitioners and nursing staff had shown that the scores of the general medical practitioners (10.75 ± 1.88) was high as compared to the nursing staff (7.44 ± 2.52) and the difference was found to be statistically significant. Nurses should have enough knowledge and awareness about the genital warts, as their knowledge and awareness plays an important role in education of the community.

Keywords: Genital warts, HPV infection, Sexual risk factors

INTRODUCTION

Genital wart is the most common sexually transmitted infection worldwide. This disease is caused by human papillomavirus (HPV) that has approximately 100 types, among them about 40 types are known to cause genital infection. The prevalence of HPV infection is estimated as 10 % – 24.4 % among women in different studies [1-4].

Over 100 different types of HPV exist, and they can be grouped according to their oncogenic potential. HPV 6 and 11 are termed 'low risk', as they are rarely associated with carcinomas and most commonly manifest as external genital warts. Genital warts, however, have been found to be induced by other 'high' or 'intermediate' risk HPVs. Genital warts are exophytic, confluent, cauliflower tumors and their typical morphologies aid their diagnosis. Their most common location in women is the vulva [5].

The present study was done to study the knowledge and awareness of nursing staff and general medical practitioners about genital warts.

MATERIALS AND METHODS

The study was carried out at SMBT medical college, Dhamangaon, Ghoti, Nasik, with the help of 16 questionnaires about the knowledge and awareness of the general medical practitioners and nursing staff regarding the genital warts, its etiology, transmission, symptoms, prevention and its treatment. A total of 67 general medical practitioners and 43 nursing staff were taken as participants. The general medical practitioners were from the nearby village area and nursing staff were of the medical college and nearby hospitals. Only participants willing to participate in the study were considered. Approval of the ethical committee and informed consent was taken. Each correct answer was given score one and wrong answer was given score zero. All the data were collected, tabulated and analyzed with the help of IBM SPSS statistics version 17 using students t test.

RESULTS

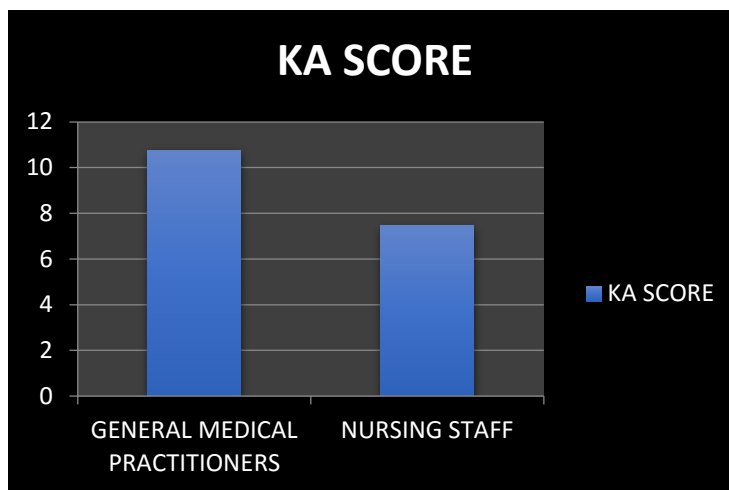
Knowledge and awareness scores of the general medical practitioners and nursing staff had

shown that the scores of the general medical practitioners (10.75 ± 1.88) was high as compared to the nursing staff (7.44 ± 2.52) and the difference was found to be statistically significant. (Students t test,

p<0.001) As nurses are the important media of education to the patients and community, their knowledge has to be improved.

Table -1: Comparison of the scores of the general medical practitioners and nursing staff of the knowledge and awareness scores regarding the genital warts

Group	Number of participants (n)	KA Score Mean ± SD	T value	P value
General medical practitioners	67	10.75 ± 1.88	7.8651	<0.001
Nursing staff	43	7.44 ± 2.52		



Graph-1: Graph showing comparison of the scores of the general medical practitioners and nursing staff of the knowledge and awareness scores regarding the genital warts

DISCUSSION

Warts are caused by human papillomaviruses which infect keratinocytes [6]. External genital warts, also known as condylomata acuminata, are one of the most common forms of sexually transmitted diseases affecting the general population [7].

Human papillomavirus infection is one of the three most common sexually transmitted diseases in the United States, along with gonorrhea and chlamydia [5].

Genital warts are caused by infection with certain types of human papillomavirus. More than 100 types of HPV exist, of which between 30 and 40 are associated with the mucosa and skin of the anogenital area. Approximately 90% of cases of genital warts are due to infection by HPV types 6 and 11. The use of condoms reduces but does not eliminate the risk of HPV infection [8].

Human papilloma virus is a group of non-enveloped, double-stranded deoxyribonucleic acid (DNA) viruses belonging to the family Papovaviridae. Viral replication is restricted to the basal cell layer of surface tissues. The virus will penetrate both the cutaneous and mucosal epithelium in search of the appropriate cellular host. It will subsequently invade

and infect the basal keratinocytes of the epidermis. The mucosa can be infected anywhere along the genital tract, including the vulva, vagina, cervix, and perianal regions in females as well as the penile shaft, scrotum, periurethral, and perianal regions in males. Infected regions will be marked by a proliferation of viral DNA and the formation of a warty papule or plaque [7].

An important issue for women with genital warts is the concern about transmission of HPV and genital warts to their sexual partners. Transmission is believed to be predominantly through sexual intercourse, as genital HPV is absent in the majority of women who have not had sexual intercourse [5].

Genital warts are often perceived as benign and non-serious infections, and there have been few studies on the quality of life of patients with genital warts; the majority of studies on HPV-related diseases concern women’s experiences with cervical dysplasia and cervical cancer [8].

Genital warts are not only cosmetically unacceptable and associated with discomfort and pain, but they are also associated with emotional stress. It is reported that the psychological stress of having genital warts is often greater than the medical effects of the

disease. Some of the psychological outcomes of patients with genital HPV infection are impairments to their sex life, a fear of cancer and aworsening of the emotional relationship with their partner [5].

Protected safe sexual intercourse is one of the best strategies to protect against STDs, among which condom can cut the risk of HPV infection by 70% among sex partners. However, it is likely to acquire HPV infection by skin contact while using condom, showing again the importance and effectiveness of protected sexual intercourse. Thus, today vaccination is an obligation to protect against HPV infection [9].

In the present study, knowledge and awareness scores of the general medical practitioners and nursing staff had shown that the scores of the general medical practitioners was high as compared to the nursing staff. As nurses are the important media of education to the patients and community, their knowledge has to be improved.

CONCLUSION

Nurses should have enough knowledge and awareness about the genital warts, as their knowledge and awareness plays an important role in education of the community. These findings can provide a baseline and will likely prove helpful in the development of training materials for nurses.

REFERENCES

1. Bosch FX BA, Schiffman M, Giuliano AR, de Sanjose S, Bruni L, Tortolero- Luna G, et al. Epidemiology and natural history of human papilloma virus infections and type-specific implications in cervical neoplasia. *Vaccine*. 2008; 26: K1-K16.
2. Chelimo C, Wouldes TA, Cameron LD, Elwood JM. Risk factors for and prevention of human papillomaviruses (HPV), genital warts, and cervical cancer. *Journal of Infection*. 2012; 66(3): 207-217.
3. Mu~noz N CX, de Gonzalez AB, Gissmann L. Chapter 1: HPV in the etiology of human cancer. *Vaccine*. 2006; 24(Suppl 3): 1-10.
4. Soori T, Hallaji Z, Noroozi-Nejad E. Genital warts in 250 Iranian patients and their high- risk sexual behaviors. *Arch Iran Med*. 2013; 16(9):518-520.
5. Gall SA. Female genital warts: global trends and treatments. *Infect Dis Obstet Gynecol*. 2001; 9:149-154.
6. Saoji V, Lade NR, Gadegone R, Bhat A. Immunotherapy using purified protein derivative in the treatment of warts: An open uncontrolled trial. *Indian J Dermatol Venereol Leprol*. 2016; 82:42-6.
7. Yanfsky VR, Patel RV, Goldenberg G. Genital warts: A comprehensive review. *J Clin Aesthet Dermatol*. 2012; 5(6):25-36.
8. Mortensen GL, Larsen HK. The quality of life of patients with genital warts: a qualitative study. *BMC Public Health*. 2010 Mar 7; 10(1):1.
9. Mahdavi S, Kamalinejad M, Emtiazy M, Enayatrads M, Naghshi M. The epidemiologic investigation of genital warts within the females referred to Shahid Sadoughi hospital inYazd-A case series study. *Journals of Community Health Research*. 2015 Dec 15; 4(3):168-76.