



Never Too Little to Teach – A Narrative of the Sorry State of a Naïve teenager with Literature Review

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ABSTRACT: The teenage period is full of new developments which require attention and care especially of the female gender. New and sometimes embarrassing features emerge such as the sudden show of unprovoked bleeding per vagina and the issues of hygiene in such situations. The consequences of poor hygiene is far reaching both for the immediate as well as at later years of adolescence and adulthood. It should therefore be an issue of paramount importance to parents and guardians to initiate health education as these young ones begin to approach this critical period of their lives. These teenagers are very often naïve about their general health hygiene and are almost blank about how to care for themselves during their menstrual cycles. A scenario where an unprepared uneducated active and healthy young girl suddenly developed abdominal pain which may be excruciating and then vaginal spotting of bright red blood will not only be alarming but embarrassing. More alarming than is when this naïve girl then seeks for counsel from her peer who often may know even less than her or at best have bits of varying information on what is happening and what can be done. Such situation is preventable if these vulnerable individuals are well informed before time on what to expect, and on how to manage themselves when it comes. Such information include but not limited to knowing that it is natural and should be expected, the kinds of sanitary pads/tampons to use and how it is used, appropriate disposal and their general hygiene during this period. We report a case of a naïve teenage girl who was managed for sepsis as a consequence of poor menstrual hygiene.

Keywords: Teenage, septicaemia pads, tampon, hygiene.

CASE HISTORY

13 years old Miss M.E was said to have walked lazily into a near-by Business Center located two residential houses away from where she resides with her family only to lie down on an empty bench, a behaviour which was very much unlike her usual active, cheerful and gregarious self. She was too weak and drained that she fell into asleep almost immediately. This business center is often the only place with regular electricity, powered by their small gasoline generator set. Some

neighbours are opportune to have their cell phone charged and watch television programs for free, a well appreciated community service.

Worried by the unusual behavior exhibited by Miss M.E, the observant staff in the BC enquired after she was awake if all was well, if she was ill or hungry. Although Miss M.E response was not on the affirmative to these questions, there was however an unpleasant smell noticed around her by the staff and coupled with measure of fatigue she probed further. The problem surrounding this unusual weakness and smell when she discovered on questioning that Miss M.E was on the 3rd day of her monthly cycle using a piece of rag torn from an abandoned material she found at home. Miss M.E was unaware of any danger this could cause and felt the unusual smell is part of the menstrual process even though it was now accompanied with fever and weakness. Asked how often she has had to change the piece of cloth, she admitted to just washing it occasionally, squeeze dry and re-use it even though it is wet, as that was the only material she could lay her hands on.

Miss M.E reported that her mother could not afford the cost of a proper sanitary pad and so resorted to the use of pieces of clothing materials. Her mother attested to the non-provision of sanitary pads but was neither aware that Miss M.E re-used wet piece of cloth nor had been unwell not to talk of it left over a day inside of her.

Miss M.E was febrile to touch (37.8°C) not pale not jaundiced. Her other physical examination was essentially normal. A septic work-up was done CBC, Urine MCS and swab of the discharge from the introitus and malarial smear. A stat dose of 1g Ceftriaxone intramuscularly and oral Co-Amoxiclav 1g bid, Metronidazole 400mg t.i.d, Paracetamol and Haematinics were given while awaiting results of investigations. Results of CBC was that of elevated white cells predominantly neutophillia. No malarial parasite seen.

By the 3rd day of presentation, the Urine and Perineal swab yielded moderate growth of coliform organisms sensitive Co-Amoxiclav (+++) with Candida. A single dose of 150mg fluconazole was added as well as topical 1% clotrimazole cream. She was seen after a week, she was much



brighter, and the temperature had subsided and feeling quite well. Both Miss M.E and her mother were educated on the importance of menstrual hygiene and dangers of infection. The Business Center staff who had all the time shown concern, paid for the treatment and accompanied volunteered to provide sanitary pad for the girl during her menstrual flow, provided she is informed early. They all went home satisfied.

DISCUSSION

Menstrual cycle is a physiologic occurrence that occurs cyclically in all female in preparation for a possible pregnancy. If the released egg from the ovary of the female is fertilized by a sperm, then pregnancy occurs and there will be no menstruation, but if the egg is not fertilized, the prepared thicken uterine lining is shed. This is the monthly menstrual bleeding which will occur if no pregnancy is achieved ^(1, 2).

A regular menstrual flow starts from about 10years old – 15years old, mostly around the 12years old, and ceases at about age 45years – 50years old which is known as menopause ^(1, 2).

The parents and guardians of the inexperienced teenagers needs to be informed and educated on what to expect by the initiation of menses and the normal care of these vulnerable girls ^(3 - 5). They should then talk, demonstrate this information to the girls.

These sessions about menstruation can be embarrassing but necessary. Talk of what is normal, the need to keep an accurate diary detailing dates when such periods occurred, for how many days each flow lasted, the heaviness of each cycle, how many times they needed to change pads on a daily basis and occurrence of abdominal pains ⁽⁶⁾. Such basic education for the parents who ought to know by experience and onward to the teenager is important. The uses of sanitary pads or the tampons or where available the menstrual cups should be taught to the teenage girl. Her overall care of herself must be taught and revised before the ultimate onset of menses. This is key and the expectation.

Tampons are placed inside the vagina and they can be changed every 4 – 8 hours and they prevent both indecent leakage of menstrual blood and

also prevents infection as long as they are regularly changed. The average cost of is between N3, 500.00 – N4, 800.00 (\$5 - \$8) for a pack containing 20 pieces. The advantage being the comfort of not having anything around the perineum that may be felt while walking. This is not the choice for girls that still intact hymen.

The sanitary pads are placed across the vagina orifice and they absorb the menstrual blood and prevent the clothes of the teenage from getting soaked with blood unless in very serious cases of menorrhagia.

Sanitary pads should be replace often say about 3 – 4 hours apart depending on the flow. A pack of 8 – 10 pieces (depending on type) cost between N600.00 and N870.00 (\$1 - \$1and 5cents). This action is to prevent the growth of infective bacteria that may find the menstrual blood as a good growth medium, and it also ensures that no offensive odour comes out from around the girl.

While the menstrual cup is placed inside the vagina cavity to collect the menstrual blood. The cups are then emptied, and can be washed and re-inserted or can be discarded and a new one placed in if available ^(2, 7-9).

In these rural areas, women and girls lack adequate information about reproduction health, do not even have access to sanitary products, do not know enough about the sanitary products and how to use them and more importantly, cannot afford the cost of buying them ⁽¹⁰⁾. This is compounded by the wrong practice of using pieces of cloth which is common in resource poor communities and if not properly managed can cause ill-health.

Poor menstrual hygiene can lead to some serious complications if not adequately managed. Such complications may include urinary tract infection, vaginal infection and rashes, and pelvic pains. Such genitalia infections can cause heavy menstrual flows leading to anemia in some cases ⁽¹¹⁾.



Some studies have shown that the persistent use of pieces of clothing instead of proper pad or tampons are mostly due to poverty and ignorance⁽¹²⁾, and also may be due to low levels of education⁽¹³⁾.

This lack of proper sanitary products lead to “period poverty” which is when such an effected girl who cannot afford proper menstrual products during her regular menses, instead uses improper unhygienic practices and therefore may not go to her school⁽¹⁴⁾.

Healthcare generally is a problem in developing countries where health education of the population is low, financial capacity is low, no welfare facilities exists, and health care is always out of pocket. The people resort to all kinds of practices to help themselves.

It is our recommendation that the government through the ministry of education entrench sex health education. Religious organization as well as community groups should raise awareness in this regard. It should not be viewed as “sacred” and thus suffer neglect with attendant preventable consequences. NGOs and other associations can assist in free provision sanitary products as part of their school health campaigns.

More importantly, healthcare practitioners should seize every opportunity of encounter to educate mothers and guardian on the need of sex education and care of this crucial aspect of teenage girls under their care.

REFERENCES

- Normal Menstrual Cycles in teens: care instruction. Health Advice 24/7 MyHealth.Alberta.ca. February 11 2021. Accessed April 2022 online www.myhealth.alberta.ca/health/aftercareinformation/pages/conditions.aspx?avrid=av2813.
- Krishna Wood White. All about periods. Nemours Teens Health, official publication of Nemours Children’s Health. Reviewed Oct 2021, accessed April 2022 online. www.kidshealth.org/en/teens/menstruation.html

- American College of Obstetricians and Gynecologist (ACOG) Committee Opinion, Clinical Guidance: Menstruation in girls and adolescents: using the menstrual cycle as a vital sign. *Obstet Gynecol* 2015; 126:e 143 -146 No. 651 (2015).
- Renee A. Alli (2014). Your daughters first period: Help them be ready. www.webmd.com/parenting/features/daughters-first-period-how-to-prepare retrieved online April 2022
- Mayo Clinic Staff. Tween and teen health. mayoclinic.org/healthy-lifestyle/tween-and-teen-health/in-depth/menstruation/art-20046004.
- Menstruation in adolescent: The importance of using menses as a vital sign. *Nationwide childrens*. Accessed online May 2022 www.nationwidechildrens.org/family-resources-education/700childrens/2019/07/menstruation-in-adolescents
- Amy W. Anzilotti. Tampons, pads, and other period supplies. *Teens Health*. kidshealth.org/en/teens/supplies.html
- Meredith Wallis (2022). 15 best period pads for every size, shape, and feel, according to gynecologist. *Sexual Health*. healthline.com/health/womens-health/best-pads.
- Cath Hakason. Best periods products to use for a first period. *Sex Ed Rescue*. sexedrescue.com/menstruation-products.
- Rajanbir Kaur, Kanwaljit Kaur, Rajinder Kaur. Menstrual hygiene, management and waste disposal: Practice and challenges faced by girls/women of developing countries. *Journal of Environmental and Public Health*. vol. 2018, Article ID 1730964 9 pages, 2018. <https://doi.org/10.1155/2018/1730964>.
- Karishma Kuenzang. City doctors talk about how being careless about your period can harm you. *IndiaToday*. indiatoday.in/lifestyle/wellness/strong/menstrual-hygiene-managingperiods-womens-health-tampons-pads-indio-lifest-979769-2017-05-29
- Baishakhi Paria, Agrihistic Battacharyya, Sukes Das. A comparative study on menstrual hygiene among urban and rural adolescent girls of West Bengal. *J. of Family Medicine and Primary care*. 2014 Oct – Dec; 3(4): 413 – 417
- Shivani Azad. 62% young women in country using cloth for menstrual protection, says NFHS report. *The Times of India*.



timesofindia.indiatimes.com/city/dehradun/62-young-women-in-country-using-cloth-for-menstrual-protection-says-nfhs-report/articlesshow/62608932.com.

Ebuka Onyeji (2019). Period Poverty: How menstruation makes Nigerian girls miss school. Premium Times.

premiumtimes.org.com/health/healthnews/331979-period-poverty-how-menstruation-makes-Nigerian-girls-miss-school.html.