

THE FHVSS: The Feminine Hygiene and Vulvovaginal Symptom Survey

A Performance Improvement Measure to Qualify Patient's Understanding of Feminine Hygiene

.Oluwatosin Adebiyi¹, Jennifer Even MD, Erica Overbeek-Wager DO ¹MD Candidate, University of Colorado School of Medicine, Colorado Springs Branch



BACKGROUND

Feminine Hygiene is a general term that encompasses the practices that one may incorporate to maintain optimal vaginal health¹⁻⁵. This term has evolved to include the use of periodic over-the-counter intravaginal products that advertise the enhancement of vaginal pH.

Intravaginal practices and periodic usage of intravaginal products is common among women in the United States⁵. Research demonstrates an increased risk of bacterial vaginosis and candidiasis with continual incorporation of intravaginal practices³; Bacterial vaginosis and candidiasis have been estimated to incur five to ten million clinic visits annually in the United States with a corresponding health care cost of over \$1 billion every year⁵.

Patients' understanding of feminine hygiene and intravaginal practices are typically limited to online resources and previous exposure to sexual education classes during primary education.

Feminine Hygiene and Vulvovaginal Symptom Survey (FHVSS)

This 18-item questionnaire was adapted from the Vulvovaginal Symptom Survey (VSQ)¹ and a Feminine Hygiene survey conducted by YouGov in a cohort of 2,010 individuals². The VSQ is a 21-item, questionnaire that highlights four scales: symptoms, emotions, life-impact, and sexual impact with a test-retest reliability 0.75, 0.60, 0.55, and 0.65 respectively¹.

- There is currently no gold standard for the assessment of feminine hygiene knowledge in woman.
- The Feminine Hygiene pamphlet was adapted from the Cornel Vaginal Hygiene toolkit³ (Figure 1). Information was validated against publicly available resources on the American College of Obstetricians and Gynecologists platform⁴.

normal

yellow when it dries.

unpleasant odor

present as:

What is not

normal?

- burning of the vulva or vagina.

urination, back pain, or a fever, seek

immediate medical care.

HYGIENE TIPS **GENERAL TIPS:**

Do NOT use "feminine hygiene" sprays, douches,

- Wipe from front(urethra) to back(anus) after a
- Keep the vulvar area clean, cool and dry, and to avoid upsetting the normal balance of the
- Shower or bathe regularly; encourage sexual

partners to do the same.

IN THE SHOWER Avoid using harsh soaps on the vulva, as these are alkaline and can upset the normal pH

- Simply cleaning with water is sufficient. You may use gentle soap on the vulva only.
- Be sure to clean the areas around and between the labia majora and labia minora
- Do NOT use soap or cleansers inside the vagina itself or round the vaginal and urethral openings, as this can be irritating and can set the stage for

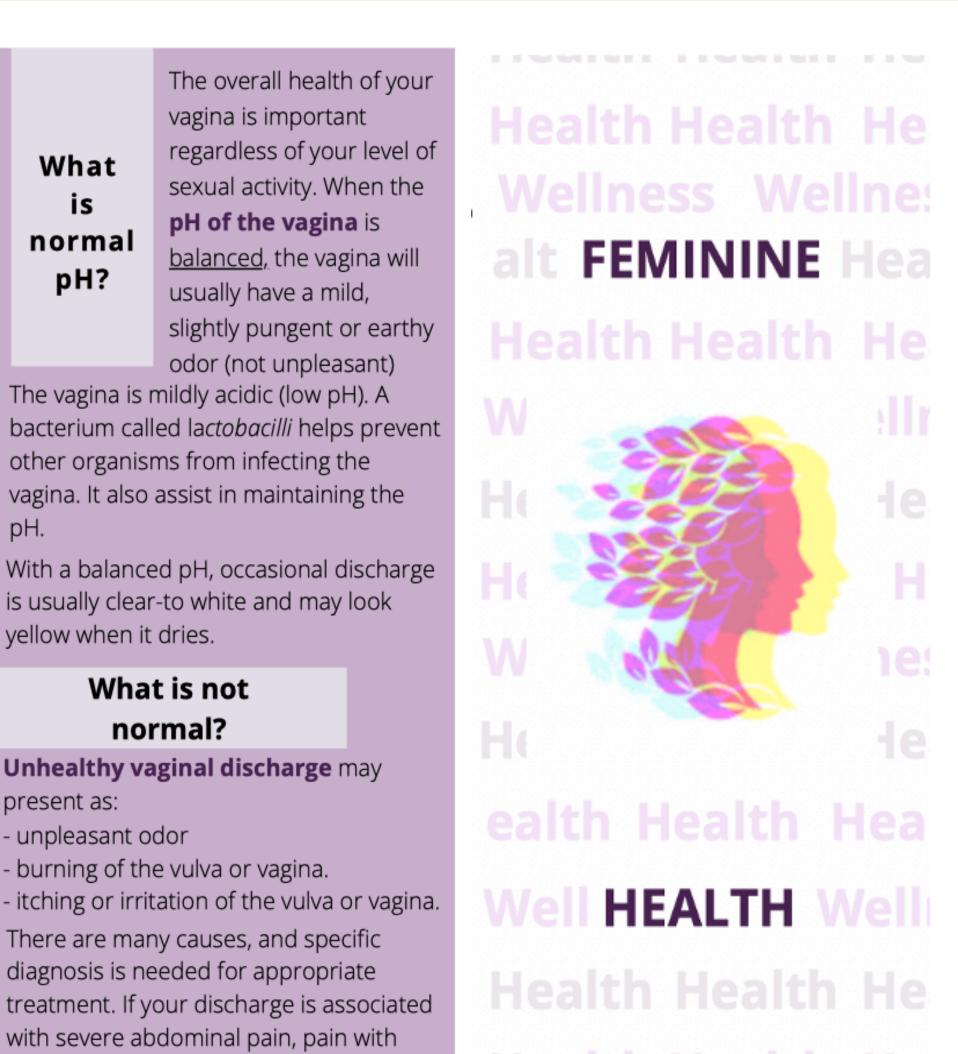
DURING YOUR CYCLE: Change pads and tampons regularly.

Only use pads or pantyliner when you have your

period; they are not for everyday use, as they keep warmth and moisture close to the body.

 Wear only loose-fitting undergarments. Avoid tight-fitting clothing.

 Change out of wet swimsuits or sweaty workout clothing as soon as possible.



PROJECT OVERVIEW

- In 2019, The Feminine Hygiene and VulvoVaginal Symptom Survey (FHVSS) was finalized and adapted for clinical use.
- In 2019, the Feminine Hygiene Pamphlet was curated and finalized for clinical use.

Objective

To understand patients' understanding of feminine hygiene and vulvovaginal symptoms. To provide feminine hygiene education to patients.

METHODS

- The FHVSS and Feminine Hygiene Pamphlet were approved by the **Evans Army Community Hospital Performance Improvement** Department, Ivy Clinic, and Women's Health Clinic.
- Staff received education on the objectives of the Performance Improvement Project. Staff also received sample prints of the FVHSS and Feminine Hygiene Pamphlet.
- For a period of two weeks Female patients >18 y/o presetting at each clinic were provided the FHVSS and Feminine Hygiene Pamphlet.

RESULTS

- Six(6) women completed the the FHVSS and Six (6) women received the Feminine Hygiene pamphlet.
- The mean age was 46.1 years and ages ranged from 37 to 52 years.
- 71% reported having at least one of the five vulvovaginal symptoms in the last two weeks (Figure 2).
- 33% of women misidentified the urethra on the anatomical vulva diagram.

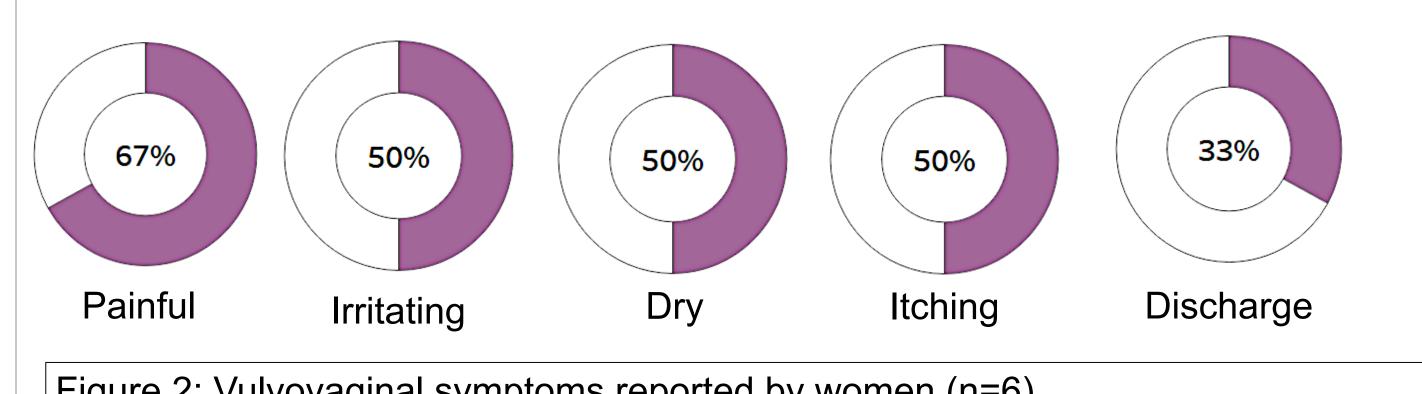


Figure 2: Vulvovaginal symptoms reported by women (n=6).

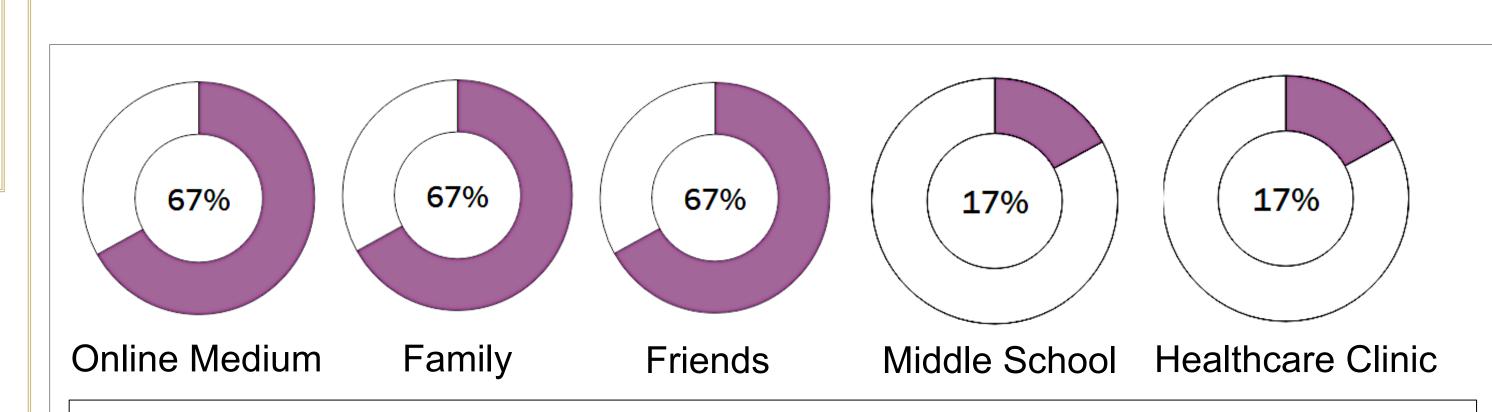
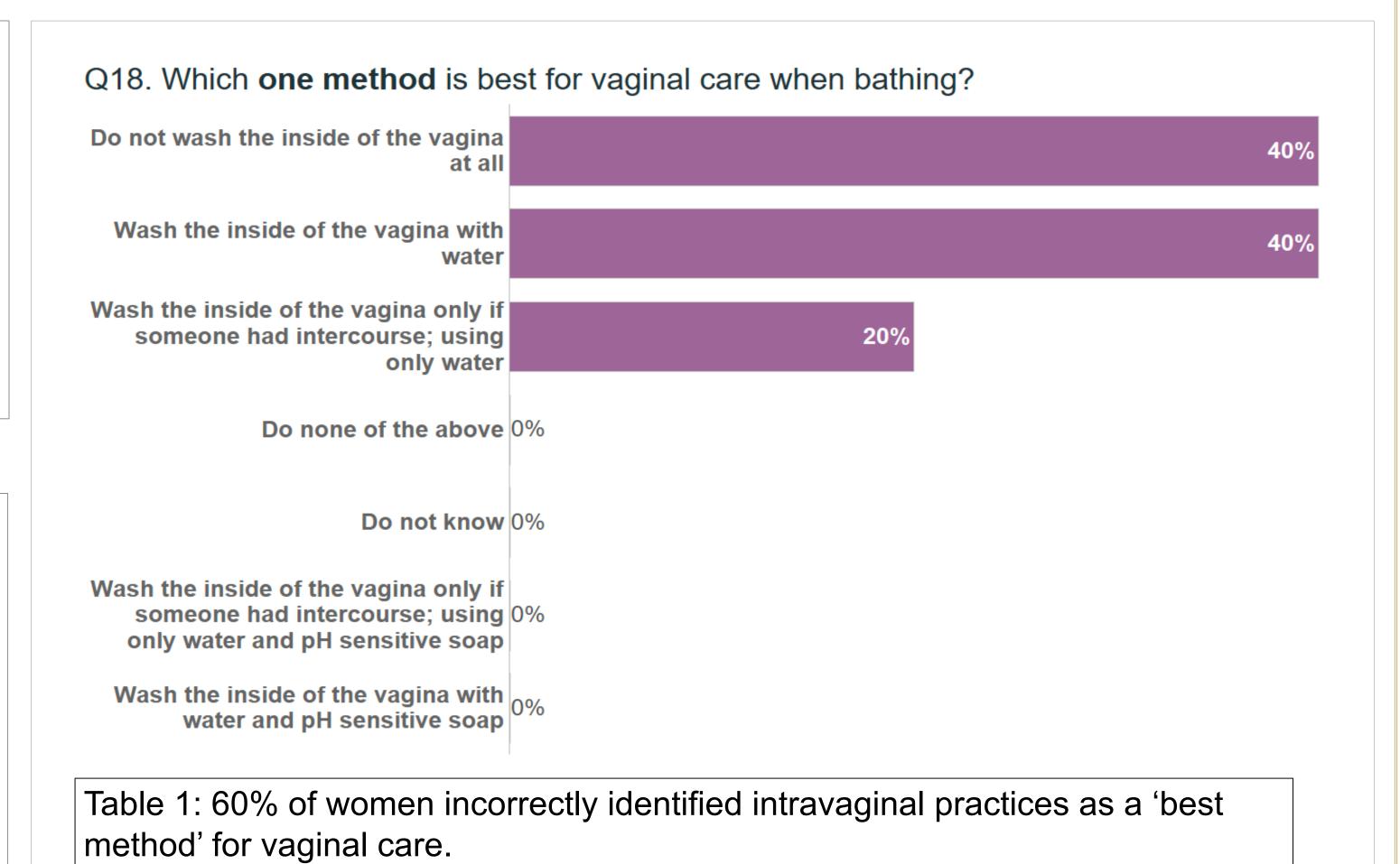


Figure 3: Self Reported knowledge acquisition of current feminine hygiene routine.



DISCUSSION

Recommendation

Intravaginal practices are common among women. Clinics that provide Obstetrics and Gynecological services should screen patients' vulvovaginal symptoms and provide corresponding Feminine Hygiene educational tools.

Future Direction

- ☐ Complete a second round of data collection to increase the sample size and obtain a representative sample of clinic population.
- ☐ Incorporate questionnaire in the Electronic Medical Record.
- ☐ Formulate a Post survey to qualify the efficacy of the feminine hygiene handouts. Through a follow-up phone conversation or through an online format (Relay).

CONCLUSION

Feminine Hygiene education is commonly acquired from family, friends, and online mediums. The healthcare clinic can serve as an outlet to provide best practices for feminine hygiene. Accurate guidance could decrease the incidence of intravaginal practices that lead to bacterial vaginosis.

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