

Assessment of Traditional Practices to Relieve Reproductive System Complaints among Adolescent Girls in Ismailia City

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Abstract: Adolescence is one of the fastest stages of human development. At this special period in the life cycle, girls are vulnerable to reproductive health problems and complaints. The aim of the study: is to assess of traditional practices to relieve reproductive system complaints among adolescent girls in Ismailia city. Design: Descriptive study design. Setting: The study carried out at technical institution and faculty of nursing in Suez Canal University and 2 secondary schools of nursing in Ismailia city. Sample: purposive sampling technique of 256 adolescent girls. Tool of Data collection: Data were collected by the researcher using an interviewing questionnaire which cover the research aim. Result: The most frequent complaint among adolescent girls is menstrual problem, followed by Supra-pubic pain lower abdomen, and Vaginal discharge. The majority of studied girls used home remedies (herbs) and worm fluids relieve menstrual symptoms, seek health consultation for pain in lower abdomen, used worm both / perineal care (douche) for vaginal discharge and pay-attention with other things for breast problems. Most of studied girls reported that their reproductive complaints was mitigated by using these traditional methods. There were statistically significant relations between studying girls age, education and traditional practices used to treat reproductive complaints and its effect. Conclusion: The study indicated that, menstrual problems are the most frequent complaints, followed by pain in the reproductive system, vaginal discharge and breast problem. Most of studied girls used home remedies and warm fluid for menstrual problems, seek health consultation for reproductive system pain, warm bath and perineal care external douche for vaginal discharge and warm bath for breast problems. Recommendations: Developing educational material sensitive to adolescent girls about reproductive health promotion. Conducting campaigns within social media, which motivate adolescent girls to seek treatment for their reproductive system complains by professional resources.

Keywords: Adolescence, reproductive complaints, traditional practices.

1. INTRODUCTION

Adolescence is a transition period from childhood to adulthood, which generally occurs during the period between 10 and 19 years (World Health Organization, 2014). During the adolescence period, they are prone to develop reproductive health related problems which are generally neglected leading to further disease burden. Reproductive health issues are a prohibited issue and adds this attitude of society to the problems of young adolescent girls and they are deprived of reproductive health information (Kumar and Babu, 2012; Pavithran et al., 2015).

The majority adolescent girls suffer from menstrual disorder as amenorrhea, menorrhagia, dysmenorrheal, oligomenorrhea, common reproductive tract infection include (vaginal discharge, itching), bacterial vaginitis, and breast

problems, such as breast pain or tenderness, nipple discharge or inversion, and change in the skin of the breast (Finer, 2014; Gedam, 2017).

Traditional practices are considered as complementary Alternative medicine, consists of a wide range of health care practices, products, and therapies. The shared feature is a claim to heal that is not based on the scientific method. Alternative medicine practices are diverse in their foundations and methodologies, alternative medicine practices may be classified by their cultural origins or by the types of beliefs upon which they are based (Ernst, 2010; Bellofiore, 2017)

Alternative medicine has grown in popularity and is used by a significant percentage of the population in many countries. While it has extensively rebranded itself: from quackery to complementary or integrative medicine—it promotes essentially the same practices. Newer proponents often suggest alternative medicine can be used together with functional medical treatment, in a belief that it "complements" (improves the effect of, or mitigates the side effects of) the treatment (Goldrosen, 2011; Saxon, 2014)

Types of traditional practices are to relieve reproductive system complaints. This field includes the more mainstream and accepted forms of therapy, such as yoga, diet and herbs. Dietary and herbal approaches may include: dietary supplements and herbal medicine (National Center for Complementary and Alternative Medicine, 2018)"

Nurse have important role in identifying and preventing reproductive tract complaints. A nurse usually with advanced degrees, who beaches in clinical or educational settings, teach theoretical Knowledge, clinical skills and conduct research provide information and helps the client to learn or acquire new knowledge and technical skills. Promotes healthy lifestyle interprets information to the client. In addition, she participates in identifying significant researchable problems, Nurse has a crucial role to determine whether, after application of the nursing services, the client's satisfaction or well-being improves (Reddy and Usha, 2011; Freedman, 2015; Rakel, 2016).

Significance of the study

Adolescence is recognized as a turbulent period, which signifies the transition from childhood to adulthood. Adolescent bad healthy behavior is known to give influence health status, and nurse can be used specific strategies to help adolescent girl to maintain and adopt positive health behaviors. Indirect health information and informed decision or direct health education, disease and injury prevention practices all can lead to the adoption of health behavior. (Huebner and Minmin, 2016)

During this period adolescent girl is more vulnerable to diseases of the reproductive system and the prevalence of most common gynecologic problems in this period is dysmenorrheal (75%), premenstrual syndrome (85%), alterations in cyclic bleeding (irregular bleeding, (83.3%), excessive bleeding (19%), pelvic pain (26.6%), breast heaviness (24.2%), vaginal infection as Bacterial vaginosis (95%) (Colins, 2016)

Egyptian female school students receive insufficient reproductive health education through the formal education in the school. The nurse role in this period is responsible for assessing the practices used by girls to relieve the problems of the reproductive system and correct the wrong practices that affect the reproductive health and can affect reproductive function (Weaver, 2015).

Aim of the study:

This study aimed to assess the traditional practices used by adolescent girls to relieve reproductive system complaints in Ismailia city.

Objectives of the study:

- 1- Assess most common types of reproductive complaints among adolescent girls in Ismailia city
- 2- Assess traditional practices used by adolescent girls to relieve the most common reproductive system complaints.

Research questions:

1. What are the most common types of reproductive complaints among adolescent girl in Ismailia city?
2. What are the traditional practices used by adolescent girls to get over their reproductive system complains?

2-Methodology:

Study design: The design of this study was Descriptive study.

Study Setting: This study carried out at Technical Institute of Nursing and Faculty of Nursing in Suez Canal University and two secondary schools were selected randomly in the Ismailia city.

Target Population: The target population of this study was consisted of adolescent girls aged 15-21 years.

Inclusion criteria: Adolescent girls suffering from reproductive system complaints, middle and late adolescence 15-21 year and virgin.

Exclusion criteria: Early adolescent 12-14 years and girls who had a gynecological disease.

Sample size: The sample size was purposive sample of 256 adolescent girl determined according to the following equation:

$$n = \left[\frac{Z_{\alpha/2}}{E} \right]^2 * P(1 - P) \quad \text{(Dawson, 2004).}$$

n = required sample size,

$Z_{\alpha/2} = 1.96$ (The critical value that divides the central 95% of the Z distribution from the 5% in the tail)

P1 = prevalence of reproductive health problems among adolescents (78.8 %) (Mohamed, 2013)

E = margin of error

Tools of data collection:

Data was collected by using an interviewing questionnaire sheet. The researcher, based on literature, designed it. It consists of four parts as follows:

Part I: Socio-demographic characteristics, sanitary conditions.

Part II: Medical & surgical history, Menstrual history, Reproductive tract related complaints.

Part III: Traditional practices used by adolescent girls to relieve reproductive system complaints and their effects

Part VI: To assess adolescent student behavior regarding perineal care adopted from Ali, (2013) includes perineal hygiene, menstrual hygiene, suitability & care of underwear.

Scoring system:

For the knowledge, practical knowledge and practical items, the responses were scored (2) for each correct answer, (1) for the incorrect one and do not know. For each part, the scores of the items were summed up and the total divided by the number of the items giving a mean score for that part. These scores were converted into a percent score, means and standard deviations. The score was converted to a qualitative variable through categorization based on a cut of 50%. The student knowledge and practices were considered unhealthy practices if the percent score were less 50% and healthy practices if 50% or more.

Ethical consideration:

Full brief explanation about the aim of the importance of the study was provided to the adolescent girl participant. Reassuring the adolescent that the confidentiality of the personal information and human rights were kept at all the study period and collected data were used for the research purpose only and they have the opportunity to withdraw from the study at any time. Then oral consent will be obtained from the participant.

The field work:

- Data were collected within a 6-month period started in December 2016 and ended in May 2017. Data were collected on Monday, and Thursday in Technical Institution of nursing, Sunday and Tuesday in Faculty of Nursing in Suez Canal

University, and Wednesday in two secondary schools of nursing one school every week, from each week. The researcher interviewed and fills the questionnaire for each adolescent girl individually.

- In coordination with courses coordinator of each sitting, the researcher interviewed the students in groups ranged between 6 to 10 girls/ day and each group separately .The approximate time spent with each adolescent girl during the interview to complete the questionnaire was 20 to 40 minutes started at 9.00 AM to 1.00PM. Sometime meeting with student in classroom & or training class.
- The researcher started by introducing herself and brief explanation of the aim of the study was given to the participant stressing on the confidentiality of information and the important of the stud.
- The researcher explained the purpose of the study for every adolescent girl , clarified each item in the tool of data collection , and any item needing practice was explained ,together answered any questions related to traditional practice to reduce fear and anxiety of the adolescent girl .
- The researcher filled the questionnaire; the suitable cases were recruited in the study after obtaining the oral consent to apply first tools.
- The researcher collect data from the participant adolescent girl as regarding: Socio- Demographic characteristic to assess personal data, Health assessment sheet to assess medical and surgical history, menstrual history and reproductive tract related complaints. In addition to Traditional practices among adolescent girls for relieving reproductive system complaints.

Pilot study:

A pilot study was carried out after the development of the tools and before starting the data collection, it was carried out on a 10% of the sample (27adolescence girl) who was selected randomly from the previous mentioned setting in order to:

- Ascertain the relevance and content validity of the tools, detect any problem peculiar to data collection tools that might face the researcher and interfere with data collection.
- Identify the suitable place at which the interview will be held, and estimate the exact time required to fill in sheets.
- Make the required modifications needed according to the analysis of that study.
- The necessary changes were performed and the tools were reconstructed and made ready for use.

All shared in the pilot study were excluded from the studied sample.

3. RESULTS

Table (1): shows that, the age of studied girls ranged from 15 to 21years with mean age of 18 ± 0.5 , 60.5% were living in rural area, 40.6 % were in Technical Institute of Nursing

Figure (1): illustrate the reproductive system complaints among studied girls. It shown that, menstrual problems (95.7%) were the most frequent complain, followed by pain in the lower abdomen (94.9%) and vaginal discharge (58.6%).

Table (2) : illustrate that, 93% of studied girls used home remedies (herbs) and worm fluids to relieve menstrual problems, 65%seek health consultation for pain in the reproductive system, 40.3% used worm both / perineal care (douche) for vaginal discharge and 51.2% used worm for breast problems

Table (3) distributes the effectiveness of practice used by studied girls to relieve most common reproductive complaint. It shows that the most common reproductive complaint was relieved in 88.3%, 69.2%, 76.7%, and 57.3%, of the studied girls who had menstrual symptoms, pain in the lower abdomen, vaginal discharge and breast problems respectively.

Table (4) shows that ,there were statistically significant relation between practices applied to get rid reproductive system complaints and its positive response

Table(5): shows that the relations between studied girls' age, and their reproductive system complaints were statistical significant

Table (1): Distribution of studied girls according to their socio-demographic characteristics. (n = 256).

Items	No	%
Age in years		
15 -	65	25.4
18 -	181	70.7
20 - 21	10	3.9
Mean ± SD	18±0.5	
Residence		
Urban	101	39.5
Rural	155	60.5
Education		
School of nursing	67	26.2
Technical institute of nursing	104	40.6
Faulty of nursing	85	33.2

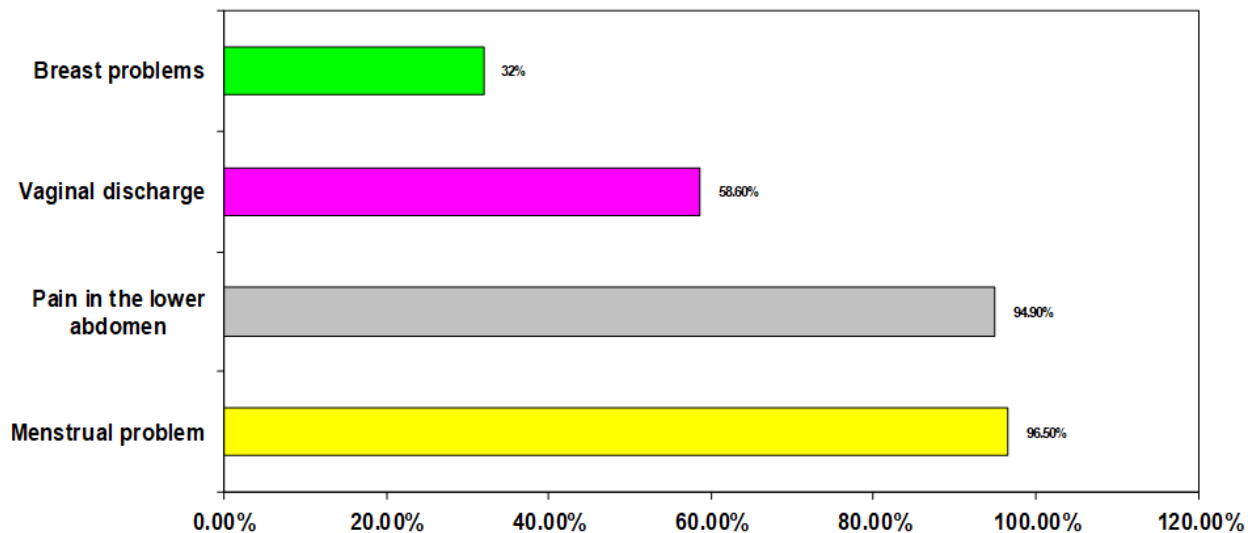


Figure (1): Distribution of studied girls according to their reproductive system complaints (n=256)

Table (2): Frequency distribution of methods used by studied girl to relieve common reproductive complaints (n= 256).

Practice to relieve Reproductive complain	No	%
1- Menstrual symptoms (n=247)*		
- Nothing	8	3.2
- Health consultation	170	68.8
- Used drugs without order's	75	30.4
- Home remedies(herbs) worm fluids	238	93.0
- Paying attention to something else	76	30.7
- others (warm compresses and fluids)	98	39.7
- Bed rest / sleep	143	57.9
2- Pain in the reproductive system (243) *		
- Nothing	75	30.3
- Health consultation	158	65.0
- Used drugs without order's	26	10.7

-	Warm bath / preneal care (douche)	3	1.2
-	Home remedies(herbs) worm fluids	65	26.7
-	Paying attention to something else	40	16.5
-	Bed rest / sleep	38	14.4
-	Warm compresses	98	40.3
3-	Vaginal discharge (n=150)*		
-	Nothing	15	10.0
-	Health consultation	100	66.7
-	Used drugs without order's	24	16.0
-	Warm bath / preneal care (douche)	135	90.0
-	Home remedies(herbs) worm fluids	64	42.7
-	Paying attention to something else	126	84.0
-	Wearing cotton clothes	110	73.3
4-	Breast problems (n= 82)		
-	Nothing	40	48.9
-	Health consultation	42	50.4
-	Used drugs without order's	11	13.4
-	Warm bath	42	51.2
-	Home remedies(herbs) worm fluids	11	13.4
-	Paying attention to something else	39	47.5
-	changing in daily activities	15	18.3

Table (3): Effectiveness of methods used by studied girls to relieve most common reproductive complaint (n= 256).

Reproductive complaints	Effectiveness			
	Relieved		Not Relieved	
	N	%	N	%
1. Menstrual symptoms (n=247)	218	88.3	29	11.7
2. Pain in the lower abdomen (n=243)	168	69.2	75	30.8
Vaginal discharge (n=150).	115	76.7	35	23.3
3. Breast problems (n= 82)	47	57.3	35	42.7

Table (4): the relations between Practices applied by studied girls' to get rid of their reproductive system complaints and its positive response for each practices.

	Positive response				p-value
	Yes		No		
	N	%	N	%	
Practices applied to get rid of menstrual complaints					
Nothing	2	25	6	75	
Health consultation	155	90.1	17	9.9	0.001^{1*}
Taking drugs without order	88	88	12	12	0.001^{1*}
Home remedies (herbs) or warm fluids	219	91.6	20	8.4	0.001^{1*}
Paying attention to something else	89	88.1	12	11.9	0.001^{1*}
Others (warm compresses, fluids)	103	85.1	18	14.9	0.001^{1*}
Beds rest/ sleep	138	85.2	6	14.8	0.001^{1*}
Practices applied to get rid of lower abdominal pain					
Nothing	1	1.3	74	98.7	
Health consultation	158	100	0	0	0.001^{1*}
Taking drugs without a doctor	26	100	0	0	0.001^{1*}

Use herbs	65	100	0	0	0.001^{1*}
Paying attention to something else	40	100	0	0	0.001^{1*}
Others	3	1.3	0	0	0.001^{2*}
Practices applied to get rid of vaginal discharge					
Nothing	0	0	35	100	< 0.001^{1*}
Health consultation	156	94.5	9	5.5	< 0.001^{1*}
Taking drugs without a doctor	21	87.5	3	12.5	< 0.001^{1*}
Use herbs	64	95.5	3	4.5	< 0.001^{1*}
Paying attention to something else	120	95.2	6	4.8	< 0.001^{1*}
drinking lots of hot liquids	158	96.3	6	3.7	< 0.001^{1*}
More cleansing	133	98.5	2	1.5	< 0.001^{1*}
Wearing cotton clothes	108	8.2	2	1.8	< 0.001^{1*}
Practices applied to get rid of breast problems					
Nothing	8	7.3)	102	92.7	
Health consultation	123	95.3	6	4.7	< 0.001^{1*}
Taking drugs without a doctor	20	100	0	0	< 0.001^{1*}
Use herbs	40	95.2	2	4.8	< 0.001^{1*}
trainings or bodies activities	39	100	0	0	< 0.001^{1*}
changing in daily activities	15	100	0	0	< 0.001^{1*}

Comparisons were made with those who did nothing; 1Fisher’s exact test

*Statistically significant at $p < 0.05$.

Table (5) The relations between studied girls' age and their reproductive system complaints

Reproductive system complaints	Age in years			p-value
	<18	18-20	>20	
Menstrual problems (n= 247)	63(25.5%)	176(71.3%)	8 (3.2%)	0.002^{1*}
Lower abdomen pain (n= 243)	60 (24.7%)	177(72.8%)	6 (2.5%)	0.001^{1*}
vaginal discharge (n= 150)	42 (28%)	105 (70%)	3 (2%)	<0.004^{1*}
Breast problems (n=82)	37 (45.1%)	43(52.4%)	2 (0%)	<0.001^{1*}

1. Fisher’s exact *statically significant at ($p < 0.05$)

Positive response

P-value

Yes No

Practices applied to get rid of pain related to the reproductive system

Nothing 1(1.3%) 74(98.7%)

Health consultation 158(100%) 0(0%) < 0.001

1*

Taking drugs without a doctor 26(100%) 0(0%) < 0.001

1*

Use herbs 65(100%) 0(0%) < 0.001

1*

Paying attention to something else 40(100%) 0(0%) < 0.001

1*

Others 3(100%) 0(0%) < 0.001

2*

Practices applied to get rid of vaginal discharge

Nothing 0(0%) 35(100%)

Health consultation 156(94.5%) 9(5.5%) < 0.001

1*

Taking drugs without a doctor 21(87.5%) 3(12.5%) < 0.001

1*

Use herbs 64(95.5%) 3(4.5%) < 0.001

1*

Paying attention to something else 120(95.2%) 6(4.8%) < 0.001

1*

Drinking lots of hot liquids 158(96.3%) 6(3.7%) < 0.001

1*

More cleansing 133(98.5%) 2(1.5%) < 0.001

1*

Wearing cotton clothes 108(98.2%) 2(1.8%) < 0.001

1*

Practices applied to get rid of breast problems

Nothing 8(7.3%) 102(92.7%)

Health consultation 123(95.3%) 6(4.7%) < 0.001

1*

Taking drugs without a doctor 20(100%) 0(0%) < 0.001

1*

Use herbs 40(95.2%) 2(4.8%) < 0.001

1*

Trainings or bodies activities 39(100%) 0(0%) < 0.001

1*

Changing in daily activities 15(100%) 0(0%) < 0.001

1*

Practices applied to get rid of mood change or depression

Nothing 2(4.4%) 43(95.6%)

Health consultation 60(93.8%) 4(6.3%) < 0.001

1*

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Taking drugs without a doctor 30(93.8%) 2(6.3%) < 0.001
1*
Use herbs 68(94.4%) 4(5.6%) < 0.001
1*
Paying attention to something else 53(94.6%) 3(5.4%) < 0.001
1*
Others 150(91.5%) 14(8.5%) < 0.001
1*
Practices applied to get rid of menstrual complaints
Nothing 2 (25%) 6 (75%)
Health consultation 155 (90.1%) 17 (9.9%) < 0.001
1*
Taking drugs without order 88 (88%) 12(12%) < 0.001
1*
Home remedies (herbs) or warm
Fluids
219(91.6%) 20(8.4%)
< 0.001
1*
Paying attention to something else 89 (88.1%) 12 (11.9%) < 0.001
1*
Others (warm compresses, fluids) 103 (85.1%) 18(14.9%) < 0.001
1*
Beds rest/ sleep 138 (85.2%) 24 (14.8%) < 0.001
1*
Comparisons were made with those who did nothing; one Fisher's exact test.
***Statistically significant at p < 0.05**
Positive response
P-value
Yes No
Practices applied to get rid of pain related to the reproductive system
Nothing 1(1.3%) 74(98.7%)
Health consultation 158(100%) 0(0%) < 0.001
1*
Taking drugs without a doctor 26(100%) 0(0%) < 0.001

1*

Use herbs 65(100%) 0(0%) < 0.001

1*

Paying attention to something else 40(100%) 0(0%) < 0.001

1*

Others 3(100%) 0(0%) < 0.001

2*

Practices applied to get rid of vaginal discharge

Nothing 0(0%) 35(100%)

Health consultation 156(94.5%) 9(5.5%) < 0.001

1*

Taking drugs without a doctor 21(87.5%) 3(12.5%) < 0.001

1*

Use herbs 64(95.5%) 3(4.5%) < 0.001

1*

Paying attention to something else 120(95.2%) 6(4.8%) < 0.001

1*

Drinking lots of hot liquids 158(96.3%) 6(3.7%) < 0.001

1*

More cleansing 133(98.5%) 2(1.5%) < 0.001

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Wearing cotton clothes 108(98.2%) 2(1.8%) < 0.001

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Practices applied to get rid of breast problems

Nothing 8(7.3%) 102(92.7%)

Health consultation 123(95.3%) 6(4.7%) < 0.001

1*

Taking drugs without a doctor 20(100%) 0(0%) < 0.001

1*

Use herbs 40(95.2%) 2(4.8%) < 0.001

1*

Trainings or bodies activities 39(100%) 0(0%) < 0.001

1*

Changing in daily activities 15(100%) 0(0%) < 0.001

1*

Practices applied to get rid of mood change or depression

Nothing 2(4.4%) 43(95.6%)

Health consultation 60(93.8%) 4(6.3%) < 0.001

1*

Taking drugs without a doctor 30(93.8%) 2(6.3%) < 0.001

1*

Use herbs 68(94.4%) 4(5.6%) < 0.001

1*

Paying attention to something else 53(94.6%) 3(5.4%) < 0.001

1*

Others 150(91.5%) 14(8.5%) < 0.001

1*

Practices applied to get rid of menstrual complaints

Nothing 2 (25%) 6 (75%)

Health consultation 155 (90.1%) 17 (9.9%) < 0.001

1*

Taking drugs without order 88 (88%) 12(12%) < 0.001

1*

Home remedies (herbs) or warm

Fluids

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< 0.001

1*

Paying attention to something else 89 (88.1%) 12 (11.9%) < 0.001

1*

Others (warm compresses, fluids) 103 (85.1%) 18(14.9%) < 0.001

1*

Beds rest/ sleep 138 (85.2%) 24 (14.8%) < 0.001

1*

Comparisons were made with those who did nothing; one Fisher's exact test.

*Statistically significant at $p < 0.05$

4. DISCUSSION

Adolescence is one of the most rapid phases of human development .As that special period in life cycle. Adolescent girls require specific and special attention. This transition phase makes girls vulnerable to a number of problems for example, general reproductive health problems and complaint (WHO. 2018). followed by pain in the lower abdomen, vaginal discharge and breast problems.

This study illustrates that, menstrual problems were the most frequent complaint. This result is the same as (Raj et al., 2015), who studied Menstrual characteristics and prevalence of dysmenorrhea in college-going girls in central India. In addition, it is nearly similar. High prevalence of the menstrual problems more than two-thirds was reported by (Sharma et al. 2010). This indicates that menstrual problems are still an important public health problem which may have a negative impact on health, social environment, work and psychological status.

Pain in the lower abdomen came as second reproductive system complaints. This result agreed with (Wittchen et al., 2012), who reported that approximately half-four-fifths of the adolescent girls aged 14 and over experienced pain in the lower abdomen that may be varied from mild to severe. This proportionality of the ratio is possible because of the age factor and physical factors that are similar in this age among adolescent girls.

The vaginal discharge came in third from reproductive system problems. This result is congruent with (Chandra et al., 2012) who study that reproductive health problems of adolescent girls between 15 and 19 in Andhra Pradesh. This study is not in line with the studies done by (Joshi et al., 2010) who study that reproductive health problems and help-seeking behavior among adolescents in urban India; who found that where adolescent girls presented with excessive vaginal discharge, itching of genitalia and urinary complaints. This difference may be due to the fact that about half of the girls in this study were B.Sc nursing students, who are more aware of the hygiene.

Regarding traditional practices used to relieve reproductive system complaints among adolescents' girls, almost all studied girls used home remedies (herbs) and warm fluids, more than two-thirds used health consultation to relieve menstrual symptoms. The finding can be explained by (Michal, 2010) who stated that treatment for menstrual cramping was almost exclusively carried out in the home utilizing common herbs. In Western cultures, treatment for menstrual cramping was almost exclusively carried out in the home, utilizing common herbs. Throughout history, whole hosts of plants were used to treat dysmenorrhea.

In the middle Ages, lemon balm was cited as a type of cure-all and was often given to women suffering from pain. Catnip and caraway were also recorded as effective cures for cramps. In the seventeenth-century motherwort was used interchangeably as a uterine stimulant to quicken the birthing process or as a uterine relaxant to ease menstrual pain. Ginger tea has served as a popular remedy throughout history, and is sometimes used today by women attempting to relieve menstrual cramps without the use of over-the-counter painkillers. Similarly, (Michal, 2010) have used peppermint tea and infusions of yarrow to provide assistance for particularly bad cramps.

Regarding methods used to deal with pain in the reproductive system found that more than two-thirds of adolescent girls had health consultation and respectively two-fifths of adolescent girls used warm compression, one-third of girls had paying attention to something else. This result agreed with (Poureslami, 2012) who studied The majority of the adolescents in the present study more than two-thirds used health consultation, rest as their pain-relief method, whereas more than half used medication for relief. Others nearly quarter used hot fermentation, few number used exercise, and yoga. This study not in line with (Nwankwo et al., 2010) who reported that only more than teens of adolescent girls sought medical advice regarding dysmenorrhea and pain in the reproductive system in Enugu, Nigeria.

Concerning methods used to deal with breast problem found that half of study participant had health consultation and warm bath, while less than half pay-attention with other things, more than teens changing daily activity. This result agreed with (Debra, 2017) who mentioned that Lifestyle changes can help manage premenstrual breast swelling and tenderness. Wear a supportive support bra when symptoms are at their worst. Wear the bra at night as well, to provide extra support while you sleep.

Diet can play a role in breast pain. Caffeine and foods that are high in fat and salt can increase discomfort. Reducing or eliminating these substances from diet in the week or two before period may help manage or prevent symptoms. Certain vitamins and minerals may help relieve breast pain and related PMS symptoms. Exercise can also improve breast soreness, cramps, and fatigue associated with PMS (Debra, 2017).

Regarding methods that used to deal with vaginal secretion that found almost of study participant used warm bath / perineal care, more than two-thirds had health consultation while more than four-fifths of adolescent girls had paying attention to something else, less than three-quarters of girls had wear cotton clothes. This result agreed with (Syed et

al., 2014) who mentioned that good hygiene, such as use of sanitary pads and adequate washing of genital area is essential during menstruation.

The result of the present study showed that less than half were in Technical Institute of Nursing, all relations were statistically significant between studied girls' educational level and Traditional methods used to treat reproductive complaints and its effectiveness ($P < 0.001$). This result disagreed with (Ola et al., 2007) which Concerning the educational back-ground, the present study focused on university female. The different types of educations (faculties) have been considered. The study showed no statistically significant difference between educational type and the adolescent female's knowledge regarding RTIs. In general, knowledge about RTIs was considerably more satisfactory among females of faculty of Ulson, and Engineering (15.8% and 13%) respectively. This finding was expected because of all the adolescent female from non-medical faculty

The result of the present study indicate that, there was Statistically significant relation between studied girls for Practices applied to get rid of reproductive system complaint and their positive response for menstrual complaint ($p < 0.001$). This result agreed with (Karout, 2018). Who studied Knowledge and beliefs regarding menstruation among Saudi nursing students, P value < 0.05 will be considered as statistically significant relation and positive response for practices that relieve menstrual problem.

Regarding the distribution of studied girls according to pain, there were Statistically significant relation between studied girls for Practices applied to get rid of reproductive system complaint and their positive response for pain related to the reproductive system ($p < 0.001$). This result agreed with (Poureslami, 2012) who reported that, more than two thirds used health consultation, rest as their pain-relief method, whereas more than half used medication for relief. Others nearly quarter used hot fermentation, few number used exercise, and yoga.

The result of the present study indicate that, Statistically significant relation between studied girls for Practices applied to get rid of reproductive system complaint and their positive response for vaginal discharge ($p < 0.001$). This result agreed with (Parker et al, 2014) who mentioned that good hygiene, such as use of sanitary pads and adequate washing of genital area is essential during menstruation.

The result of the present study indicate that, Statistically significant relation between studied girls for Practices applied to get rid of reproductive system complaint and their positive response for breast problem ($p < 0.001$). This result agreed with (Aleena et al., 2018) who mentioned that knowledge, and the attitude of female students towards premenstrual syndrome (PMS). Only about a third of the females said that they are likely to consult a doctor for more information and a checkup for breast problem. More than teens of the females were using traditional remedies. Statistically significant relation between studied girls for Practices relieve breast problems (P value < 0.05).

5. CONCLUSION

Based on the findings of the current study, it could be concluded that.

All of studied girls had reproductive system complaints in like deferent way, menstrual problems, were the most frequent complain, followed by pain in the lower abdomen, and more than half had vaginal discharge & breast problem. The majority of them studied girls used home remedies (herbs) and warm fluids to relieve menstrual problems, other two thirds of them seek health consultation for pain in the reproductive system, slightly more than two fifths used warm bath / perineal care (douche) and slightly more than half used worm for breast problems. They found that traditional methods were effective in relieving reproductive complaints among adolescent's girl's. As menstrual symptoms, pain in the lower abdomen, vaginal secretion, breast problem.

6. RECOMMENDATION

Based on the results of this study, the following recommendations are suggested:-

1. Developing educational material sensitive to adolescent girls about reproductive health promotion.
2. Conducting campaigns within social media, which motivate adolescent girls to seek treatment for their reproductive system, complains by professional resources.

3. Reproductive health and menstrual hygiene should be included in school health educational program and school library should be containing a self-learning manual or handbook to guide the girls about Reproductive health and menstrual hygiene.
4. Further researches should be conducted to develop strategy to overcome unfulfilled reproductive complaints and other investigates the effect of traditional practices on adolescent's girl's quality of life.

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