ABSTRACT
Sexually transmitted infections have been identified as a co-factor of AIDS. Reproductive tract infections (RTI) are infections that affect the reproductive tract, which is part of the Reproductive System. Three types of RTIs are endogenous infections, iatrogenic infections and sexually transmitted infections. Globally, according to 2005 World Health Organization (WHO) estimates, 448 million new cases of curable STIs (syphilis, gonorrhoea, chlamydia, and trichomoniasis) occur annually in adults aged 15-49 years. In India, the annual incidence of STIs is estimated to be 5%. Various measures have been developed to prevent reproductive tract infections.

Key words: RTI, STI, syphilis, gonorrhoea, chlamydia, and trichomoniasis

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INTRODUCTION
In developing countries, among reproductive age women reproductive tract infections including sexually transmitted infections (STIs) are considered as public health problem and ranked second as the cause of healthy life lost. STIs have been identified as a co factor of AIDS. Strategies which are made to control the transmission of HIV/ AIDS also include control of STIs.
All over the World over 340 million people are affected by sexually transmitted infections, out of which 30 million live in India. However, baseline information regarding prevalence of reproductive tract infections is lacking. Reproductive tract infections (RTI) are infections that affect the reproductive tract, which is part of the Reproductive System. For females, reproductive tract infections can affect the upper reproductive tract (fallopian tubes, ovary and uterus) and the lower reproductive tract (vagina, cervix and vulva); for males these infections affect the penis, testicles, urethra or the vas deferens. Each has its own specific causes and symptoms, caused by a bacterium, virus, fungus or other organism. Some infections are easily treatable and can be cured, some are more difficult, and some are non curable such as AIDS and herpes.

DEFINITION
Reproductive tract infections (RTIs) consist of three different types of infection and these are as follows:
1. Endogenous infections: These are the most common RTIs worldwide. These include bacterial vaginosis and candidiasis. Treatment and cure can be easily done for these infections.
2. Iatrogenic infections: These types of infections occur during medical procedures such as regulation of menstrual cycle, induced abortion, intrauterine device insertion or during childbirth. These can happen due to use of unsterilised instruments or if already there is an infection in lower reproductive tract that is pushed into upper reproductive tract.
3. Sexually transmitted infections: These infections are transmitted through sexual activity and causative factors are viruses, bacteria or parasitic micro-organisms.

EPIDEMIOLOGY
Globally, according to 2005 World Health Organization (WHO) estimates, 448 million new cases of curable STIs (syphilis, gonorrhoea, chlamydia, and trichomoniasis) occur annually in adults aged 15-49 years. In India, the annual incidence of STIs is estimated to be 5%. The prevalence of self-reported morbidity varies in different regions in India. Various community-based studies in India have shown the prevalence of RTIs to range from 39% to 84%. It not only depends on the prevalence of RTIs/ STIs in that area, but also on various other factors such as the inability of women to take decisions on their own, their impoverished status within the family, and their health seeking behaviour.
## Endogenous infections and organisms normally found in vagina

<table>
<thead>
<tr>
<th>Infection types</th>
<th>Where they come from</th>
<th>How they spread</th>
<th>Common Examples</th>
</tr>
</thead>
<tbody>
<tr>
<td>Endogenous infections</td>
<td>Organisms normally found in vagina</td>
<td>Usually not spread from person to person, but overgrowth can lead to symptoms</td>
<td>Yeast infection, bacterial vaginosis</td>
</tr>
<tr>
<td>Sexually transmitted</td>
<td>Sexual partners with STI</td>
<td>Sexual contact with infected partner</td>
<td>Gonorrhoea, chlamydia, syphilis, chancroid, trichomoniasis, genital herpes, genital warts, HIV etc.</td>
</tr>
<tr>
<td>Iatrogenic infections</td>
<td>Inside or outside the body: • Endogenous (vagina) • STI (cervix or vagina) • Contamination from outside</td>
<td>By medical procedures or following examination or intervention during pregnancy, childbirth, the postpartum period or in family planning (e.g., IUD insertion) and gynaecology settings. Infection may be pushed through the cervix into the upper genital tract and cause serious infection of the uterus, fallopian tubes and other pelvic organs. Contaminated needles or other instruments, e.g. uterine sounds, may transmit infection if infection control is poor.</td>
<td>Pelvic inflammatory disease (PID) following abortion or other transcervical procedure. Also, many infectious complications of pregnancy and postpartum period.</td>
</tr>
</tbody>
</table>

### CAUSES
1. Bacterial vaginosis
2. Chlamydia
3. Gonorrhoea
4. Herpes
5. Pelvic inflammatory disease
6. Trichomoniasis
7. Yeast infection
8. Human papillomavirus
9. Syphilis
10. HIV/ AIDS
11. Hepatitis B & C

**SYMPTOMS**
1. Unusual vaginal discharge
2. Abnormal or heavy vaginal bleeding
3. Postcoital bleeding
4. Pelvic pain
5. Blisters or sores on the genitals, anus, or surrounding areas
6. Warts or bumps on the genitals, anus, or surrounding areas
7. Persistent vaginal yeast infections
8. Yellowing of the eyes and skin (jaundice)
9. Burning or pain during urination
10. Dysuria

**GENERAL PRINCIPLES FOR RTI CONTROL**
The main goals of RTI control are accomplished by the following steps:
1. Reducing exposure to infection by educating people at risk to reduce the number of sex partners and to avoid sexual intercourse with people who have a high probability of being infected.
2. Preventing infection by promoting the use of condoms or other prophylactic barriers.
3. Detecting and curing disease by implementing disease detection activities, providing adequate diagnostic and treatment facilities, and promoting health-seeking behaviour.
4. Limiting complications and further transmission of infection by providing early and appropriate treatment for symptomatic and asymptomatic patients and their sex partners, and through counselling.

**GENERAL GUIDELINES FOR THE PREVENTION OF RTIS/STDs**
The best way to prevent sexually transmitted diseases (STDs) and reproductive tract infections (RTIs) is to not have sexual relations. However, if you do decide to be sexually active, there are ways to reduce the risk of contracting an STD or RTI:
- Ask a new sex partner if he or she has an STD/ RTI, has been exposed to one, or has any unexplained physical symptoms. Do not have sex if your partner has signs or symptoms, such as sores, rashes, or discharge from the genital area.
- Many common STDs/ RTIs have no symptoms but can still be transmitted to a sexual partner. If your partner has had sexual relations with someone else recently, they may have an infection, even if there are no symptoms. Therefore, do not have sex if you think your partner may have been exposed to an STD/ RTI, even if they do not show any symptoms.
- Use a condom correctly and consistently during all types of sexual intercourse (oral, vaginal, and anal).
- Get regular checkups for STDs and RTIs (even if you show no symptoms), and be familiar with the common symptoms.
- Most bacterial infections are readily treated, and the earlier treatment is sought and sex partners are warned, the less likely the disease will do irreparable damage.
REFERENCES
1. National guidelines on prevention, management and control of reproductive tract infections including sexually transmitted infections. 2007