Sexual intercourse during menstruation and the risk of Sexually Transmitted Infections

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Abstract

Introduction: Allah, exalted in might commands Muslims to abstain from sexual intercourse during menstruation describing it as filth. In spite of this divine command, people still engage in sex during menstruation while some even encourage it. The study aims at determining if there is an association between sexually transmitted infections and sexual intercourse during menstruation as well as use of condom by those who practice it.

Methodology: A total of 330 female undergraduates from Auchi polytechnic were selected using systematic random sampling and recruited for the study. Pre-tested questionnaires were administered to the students and the results were entered into epi-info statistical software and analysed.

Results: Of the 330 respondents, 243 (73.6%) were sexually active while the remaining 87 (26.4%) were virgins. The Muslim respondents were 60 (18.2%). Thirty six (10.9%) of the respondents were married and 180 (54.5%) respondents have been treated for sexually transmitted infection in the past. Of the 243 respondents that were sexually active, 66 (27.2%) respondents have had sex during their menses out of which 60 (90.9%) had sexually transmitted infection which was significant (P < 0.001). Most of them were married (P < 0.001). Though more than half (63.6%) of those who had sex during menstruation used barrier contraceptive, the difference was not significant (P > 0.1).

Conclusion: There was an association between having sex during menstruation and occurrence of sexually transmitted infection (p < 0.001) and the difference between those who used barrier contraceptives and those who did not was not significant (p > 0.1).

Key Words: sex, menstruation, infections

Introduction

Allah, exalted in might commands Muslims to abstain from sexual intercourse during menstruation describing it as filth (They ask you concerning the menstrual flow. Say: it's filth: So keep away from women during

their menses and do not approach them until they are clean). In spite of this divine command, people still engage in sex during menstruation while some even encourage it. Apart from the spiritual implication of disobeying Allah, several health challenges are associated with sexual intercourse during menstruation.

transmitted infections Sexually (STIs) remain major causes of reproductive morbidity and mortality in developing countries; and their high prevalence facilitate HIV transmission.² STIs are usually common among young undergraduates who engage in risky sexual behaviours such as having a high number of partners and poor healthcare seeking behaviour.³ Studies have shown a high prevalence of sexual intercourse among school-going adolescents.^{4,5} Early coitarche, being single, having a non-faithful partner, previous history of PID/STI, selecting older sexual partners, low socioeconomic status, inconsistent use of condoms, and inaccurate information regarding PID and STIs among members of the public are also known risk factors for STI.5,6

Students especially those in tertiary institutions are particularly vulnerable to engage in practices that will predispose them to developing STI as most of them are adolescents and young adults who are adventurous and tend to experiment since they are free from direct parental control in the campus.⁶ Young adults and adolescents have increased cervical mucosal permeability, a larger zone of cervical

ectopy, a lower prevalence of protective antichlamydial antibodies, and increased risk-taking behaviours.⁷ Developing STI at this stage puts the patient at risk of PID and the sequelae of PID (such as infertility, ectopic pregnancy and chronic pelvic pain) later in life when they eventually marry and want to settle down.

This study was aimed at determining if there was an association between sexually transmitted infections and sexual intercourse during menstruation as well as use of condom by those who practice it.

Methodology

A total of 330 female undergraduates of reproductive age from Auchi polytechnic were selected using systematic random sampling and recruited for the study. All female undergraduates of reproductive age who studied at the institution were eligible. Participants were selected through a twostage systematic sampling. At the first stage, departments were selected with equal probability. At the second stage all female students from selected departments were randomly sampled. Ladies who provided informed consent were given questionnaires to fill. They were asked about their sociodemographic information, sexual risk behaviours including engaging in sex during

menstruation, self-perception of risk for STIs, STI history and clinical features suggestive of STI such as presence of lower abdominal pain, abnormal vaginal discharge, painful menses and painful intercourse. Students were considered to have had STI in the past if it was confirmed by a medical doctor in a health facility. Questionnaires were pre-tested before administration to the students.

The data were coded and entered into epiinfo statistical software and analysed. Descriptive statistics were used to describe variables in terms of frequency, mean and median. Chi-square test was used to determine association between sex during menstruation and presence of STI. Confidence interval was set at 95% and pvalue less than or equal to 0.05 was considered statistically significant.

Results

Of the 330 respondents, 231 (70%) were between the ages of 21 to 25, 294 (89.1%) were single and 60 (18.2%) were Muslims.

Majority of the respondents 213 (64.5%) attained menarche between the ages of 13 and 15 years. Most of them 243 (73.6%) were sexually active out of which 66 (27.2%) have had sex during menstruation

and 135 (55.6%) consistently used condom during sexual intercourse.

Table 1: Sociodemographic characteristics of Respondents (N = 330)

Characteristic $(N = 330)$	Frequency	%
Age		
16 - 20	66	20
21 - 25	231	70
26 - 30	27	8.2
> 30	6	1.8
Marital Status		
Single	294	89.1
Married	36	10.9
Ethnic Group		
Afenmai	144	43.6
Esan	51	15.5
Ibo	45	13.6
Bini	36	10.9
Yoruba	15	4.6
Others	39	11.8
Religion		
Christianity	270	81.8
Islam	60	18.2

Of the 243 respondents that were sexually active, 99 (40.7%) had STI. Of those that had STI, 60.6% (60) had sex during menstruation. This was statistically significant (2 =94.45, df = 1, p < 0.001). A total of 15 (29.4%) Muslims had sex during menstruation out of the 51 Muslims that were sexually active. There was however no statistically significant difference between

the religion of respondents and engagement in sex during menstruation (2 = 0.18, df = 1, p > 0.5). Most respondents who engaged in sex during menstruation were single and the difference between those who were single and those married in relation to having sex during menstruation was statistically significant (2 =11.14, df = 1, p < 0.001). Though more than half (63.6%) of those who had sex during menstruation used condom, the difference was not significant (2 = 2.4, df = 1, p > 0.1).

Table 2: sexual History of Respondents

Sexual History	Frequency	%			
Age at Menarche $(N = 330)$	<u> </u>				
10 – 12	84	25.5			
13 – 15	213	64.5			
16 – 18	33	10			
Sexually Active $(N = 330)$					
Yes	243	73.6			
No	87	26.4			
Age at Coitarche $(N = 243)$					
14 – 16	12	4.9			
17 – 19	102	42			
20 - 22	120	49.4			
23 - 25	9	3.7			
No of Sex Partners $(N = 243)$					
1	105	43.2			
2	66	27.2			
3	27	11.1			
4 and more	45	18.5			
Consistent Use of Condom $(N = 243)$					
Yes	135	55.6			
No	108	44.4			
Sex During Menstruation					
Yes	66	27.2			
No	177	72.8			

Table 3: Respondents that had sex during menstruation (N = 243)

Characteristics	Sex during menstruation		Total	Statistical Test
	Yes	No	243	2
Presence of STI				$^2 = 94.45$
Yes	60	39	99	df = 1
No	6	138	144	P < 0.001
Religion				2 = 0.18
Islam	15	36	51	df = 1
Christianity	51	141	192	p > 0.5
Marital Status				$^{2} = 11.14$
Single	48	159	207	df = 1
Married	18	18	36	p < 0.001
Barrier Contrac	eptive Use			$^{2} = 2.4$
Yes	42	93	135	df = 1
No	24	84	108	p > 0.1

Discussion

A significant number of respondents had STI with a prevalence of 40.7%. This is high compared to findings by Wariso et al³ in Port Harcourt where the prevalence of STI among university undergraduates was found to be 11%. The prevalence of STI among those who engaged in sexual intercourse during menstruation was significantly high (90.9%). It was also found to be high among those who did not use condom during intercourse. Though barrier contraceptive offer protection from STI during menstruation, the risk of leakage, burst condom and other problems associated with condom use will not make it advisable. Therefore it is essential that as Muslims we stick to Allah's command of abstaining from sex during menstruation to protect us from STIs and other problems associated with the act as well as save ourselves from incurring Allah's wrath.

Conclusion

There was an association between having sex during menstruation and occurrence of sexually transmitted infection (P < 0.001)

and the difference between those who used barrier contraceptives and those who did not was not significant (p > 0.1).

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Conflict of interest: Nil