INCIDENCE OF URETHROGENITAL TRICHOMONIASIS IN MALES

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Summary

Fourteen per cent prevalence of urethrogenital trichomoniasis was observed in a group of fifty male patients suffering from various types of genitourinary symptoms. The prevalence was highest in the age group of maximum sexual activity (20-30 years). The commonest symptom observed in patients with trichomonal infestation was a sort of penile discomfort. Urethral scrapings were found to be the best sources for the detection of the organism. No superiority of stained smears and culture was observed over fresh wet smears in the diagnosis.

The presence of Trichomonas vaginalis in the urinary tract of male patients was first reported in 1894 by Marchand1, Miura² and Dock³, individually but almost simultaneously. Trichomonal urethritis in men was not widely recognised and was considered to be quite rare till recently. During recent years due to wide spread interest in nonspecific urethritis and greater awareness of this disease complex, more cases of trichomoniasis have been detected. Consequently this disease in men has received a good deal of attention and wide recognition as a definite clinical entity.

The incidence of urethrogenital trichomoniasis in males has been reported by

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different workers from time to time. The figures vary widely ranging from 5.3 per cent to 68 per cent among patients suffering from non-gonococcal urethritis. The condition is said to be five times more common in coloured than in white races.

The present study was undertaken with the aim to estimate the incidence of *T. Vaginalis* infestation in male patients presenting with various types of genitourinary symptoms.

Material and Methods

The present study was carried out on fifty patients with genitourinary symptoms, attending the outpatients department of Skin and Venereal diseases, Medical College, Rohtak. Detailed history and clinical examination of each patient was recorded on a proforma. For the detection of *Trichomonas vaginalis*, material was collected from various sources viz. Subpreputial saline washings, urethral discharge (when present) urethral scrapings, prostatic secretions, seminal fluid and urinary sediments.

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The material so obtained from each of the above mentioned areas was subjected separately to wet smear preparation and examined for the presence of Trichomonas vaginalis by direct micros-The search was made at least for five minutes before discarding the When fresh preparation as negative. wet smears were negative, Leishman stained smears were prepared and cultures were done on Feinburg-Whittington medium. Early morning samples of urine were examined macroscopically for presence of coma shaped threads in all cases.

Observations

Out of the fifty cases investigated for the presence of *Trichomonas vaginalis* only 7 cases (14 per cent) were found to harbour the organism in their genitourinary tracts. Maximum prevalence of urethritis and trichomonal infestation was observed in the age group of 20-40 years with 71.4 per cent. of the patients in the age group of 20-30 years (Table 1).

TABLE 1
The incidence of T. vaginalis in patients and the distribution in different age groups.

Age in years	No. of cases	T. V. Infection		
		No. of cases	Percen- tage	
Below 20	6			
21 – 30	24	5	71.4	
31 - 40	14	2	28.5	
41 - 50	4	-	_	
Above 50	· 2			
Total	50	7		

The common symptoms observed in the present series of cases were irritation on passing urine and urethral discharge. The commonest symptom observed in patients with trichomonal infestation was a sort of penile discomfort in the form of feeling of uneasiness and tickling sensations inside urethra (Table 2). In our study 50 per cent cases presented with symptoms of more than 12 weeks' duration.

TABLE 2

The relationship of T. vaginalis positivity to that of symptoms.

	Total	Trichomonal infection		
Symptoms	No. of cases	No. of cases	Percen- tage	
Irritation on				
passing urine	36	3	8.3	
Discharge per				
urethra	25	4	1,6	
Pain on passing				
urine	9	-		
Increased				
frequency	8		_	
Penile discomfor	rt 7	5	71.4	
Pain in lower				
abdomen	4		_	

The sources of material and the positive yield of *Trichomonas vaginalis* from the different specimens is shown in Table 3. In the present study urethral scrapings were found to be important source for the detection of *Trichomonas vaginalis*.

TABLE 3

The incidence of *T. vaginalis* in different specimens

Source	Total	Positive for TV	
of Materials	No. of cases	No. of cases	%
Urethral scrapings	50	5	10
Urinary sediments	50	3	6
Urethral discharge	25	2	8
Subpreputial Washing	s 50	2	4
Prostatic secretion	25	2	8
Seminal fluid	25	2	8

In all 43 cases negative for *Tricho*monas vaginalis by fresh wet smear examination, fixed Leishman stained smears and culture did not show any positive results.

On macroscopic examination of urine coma shaped threads were seen in 15 (30 per cent) out of 50 cases. Among the 7 patients with trichomonal infestation coma shaped threads were seen in 4 (57.1 per cent).

Metronidazole in the dosage of 600 mg daily in divided doses for a peroid of 7 days was found safe and effective in all positive cases. On follow up at the end of 7 days of treatment, *Trichomonas vaginalis* could not be detected in any of the patients.

Discussion

Subsequent to the first report of trichomoniasis in males, various observers reported isolated instances of this disease from time to time. Incidences have varied widely from that of Ackermann4 in which no Trichomonads was detected in a series of 37 cases of nongonococcal urethritis to that of Coutts et al5 series wherein Trichomonads were detected in 68 per cent of 2,482 patients suffering from nongonococcal urethritis. Intermediate figures have been reported by Allison⁶ (15 per cent), Lanceley⁷ (5.8 per cent), Jera et al8 (10 per cent), Feo et al⁹ (41 per cent), Whittington¹⁰ (15 3 per cent), Nicol¹¹ (5.5 per cent), Shultz¹⁸ (25 per cent), Caterall18 (5.5 per cent), Weston and Nicol¹⁴ (63 per cent).

In the present study 14 per cent prevalence of trichomoniasis was observed. We were not able to trace any report from India on this subject except that of Rama Ayyanger¹⁵ reporting the incidence of trichomoniasis with gonorrhoea in 2.2 per cent cases.

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