Sexual Abuse as a Risk Factor for



Gynaecological Morbidity

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Introduction

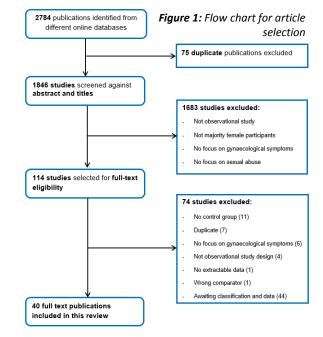
- Sexual abuse is a prevalent and serious public health issue
- 1 in 5 Australian women experience sexual violence from 15 years of age1
- Victims can suffer immense psychological and physical morbidity
- Pelvic pain and sexual abuse history has previously been researched 2
- Literature on other gynaecological symptoms is limited

Objectives

- Systematic review with subgroup analysis of gynaecological symptoms from articles published between 1993 - 2018
- Random effects analysis to determine relationship between sexual assault history and gynaecological symptomatology

Methods

- Searched online databases of PubMed, MEDLINE, EMBASE, PsycINFO, Web of Science, The Cochrane Library and CINAHL
- Search terms included variants of 'sexual abuse' and gynaecological symptoms
- Articles screened by two independent reviewers



Results

- 1846 studies identified and 40 included in review
- Sexual abuse history positively associated with pelvic pain, dyspareunia, dysmenorrhoea and abnormal menses
- Sexual abuse not significantly associated with other symptoms

Conclusion

This meta-analysis showed an association between women who suffered sexual abuse and complaints of pelvic pain, dyspareunia, dysmenorrhoea and abnormal menses.

Figure 2: Random effects analysis of gynaecological symptoms and sexual abuse history

Symptom	Sample Size	Odds Ratio	95% CI
Pelvic Pain	8692	2.18	1.58 - 3.01
Dyspareunia	2074	2.31	1.79 - 2.99
Dysmenorrhoea	1807	1.61	1.30 - 2.00
Abnormal menses	4724	1.50	1.12 - 2.01
Vaginismus	983	1.78	0.86 - 3.70
Vulvodynia	459	1.90	0.98 - 3.67
Vulvar or vaginal pain	3340	0.54	0.16 - 1.83
Urinary incontinence	3754	1.05	0.43 - 2.51
Vaginal prolapse	1833	1.06	0.42 - 2.66