

ENVIRONMENTAL & REPRODUCTIVE JUSTICE

The Healthy Vagina -- It's Not Supposed to Smell Like Flowers

By Toni M. Bond Leonard, President and CEO, Black Women for Reproductive Justice

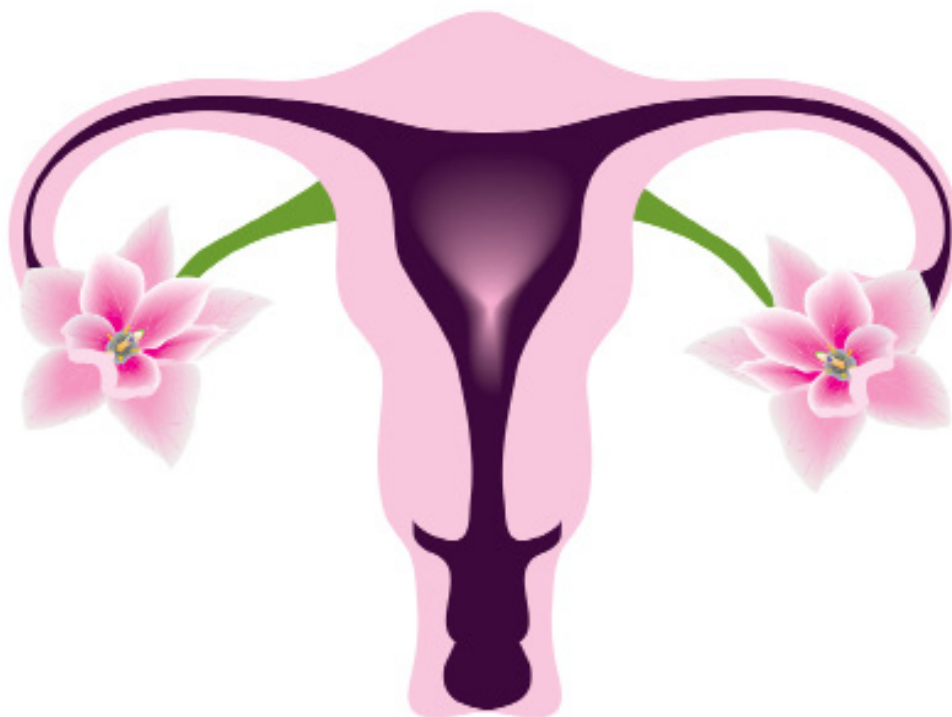
There is a continuous need to educate African American women about the risks associated with the use of feminine hygiene products like douches, feminine spray, personal cleansing clothes, etc. The most harmful are douching products. Numerous studies continue to show links between the practice of vaginal douching (intravaginal cleansing with a liquid solution) and several adverse health outcomes. Some of these include, pelvic inflammatory disease, bacterial vaginosis, cervical cancer, low-birth weight, preterm birth, human immunodeficiency virus transmission, sexually transmitted diseases, ectopic pregnancy, recurrent vulvovaginal candidiasis, and infertility. Douching alters the normal vaginal pH and vaginal flora, weakening the vagina's natural defenses and creates an environment more susceptible to the overgrowth of pathogens. In addition, the process of inserting fluid intravaginally can also help to push harmful bacteria further up into the reproductive tract. Although douching prevalence is higher among women with lower educational levels, the racial difference persists. Approximately 52% of African American college graduates reported that they douched as compared to their Caucasian (12%) and Hispanic (30%) counterparts.

A key reason why women continue to douche is the aggressive advertising by manufacturers of douching products. Major pharmacies and grocery stores have entire aisles dedicated to feminine hygiene products. Positioned directly next to the tampons and sanitary napkins, one can find a broad selection of "medicated" solutions, disposable douche products, and feminine sprays in a number of different scents.

Over the years, messages about vaginal odors, post-menstrual bleeding, and maintaining a "clean, crisp" feeling have been passed on to women by douche manufacturers. Douche manufacturers have, in turn, profited to the tune of approximately \$144 million annually, as women add to their annual health care cost by spending as much as \$500 per year for over-the-counter vaginal products that are not medically necessary. There are two major manufacturers of douching products -- Massengill, manufactured by GlaxoSmithKline and Summer's Eve®, manufactured by C.B. Fleet Company, Inc. The irony behind C.B. Fleet's manufacturing of douching products is that they also manufacturer the Fleet line of disposal enemas, laxatives, and suppositories for constipation. C.B. Fleet has even developed a character called EneMan®. In addition, most of the major pharmacies and neighborhood dollar stores have their own brand of "generic" disposable douches. The tagline on the Summer's Eve® douching product is "Enjoy being a woman®." The message here is that having a "clean, non-smelling vagina" is preferable and that the natural scent of the vagina is unnatural, making it impossible to enjoy being a woman. Massengill offers douching products with scents ranging from baby powder to vinegar and water. Summer's Eve is a bit more creative and offers a variety of scents for the vagina, including, "Fresh Scent", "Tropical Rain", "Island Splash", and "Sweet Romance".

Despite the research pointing to various associated health risks and adverse effects, the sanitization by women of their bodies is still a regular practice. Black Women for Reproductive Justice successfully got a policy resolution passed in November 2007 by the American Public Health Association, setting the stage for greater education through public health institutions, nursing and medical school, and health care providers about the need for increase patient education about douching. This also provides BWRJ yet another opportunity to engage its expanding volunteer core in policy advocacy around both provider-to-patient education. Additionally, BWRJ will need to build a broad-based collaborative of groups to begin the longer term work to get the Surgeon General to post a warning on douching

Black Women for Reproductive Justice



A random telephone survey of 535 adult women living in the southeastern United States found that 65% of the women believed that douching was a good hygienic practice. Half of the 65% reported that douching was necessary for good hygiene. More African American women believed this to be true than White women. Along age and class lines, older women and less-educated women were more likely to believe that douching prevented infections and pregnancies. Reasons given included washing away old blood after the menstrual cycle, washing away fluids after sexual intercourse, and self-treating abnormal discharge.

products about the connections between douching, reproductive tract infections, low-birth weight, and pre-term delivery.

There is some conflict, however, among studies with respect to those adverse health outcomes that have a causal link or an observed association. For example, those women with certain risk factors (i.e., multiple sexual partners, poverty, certain races, and lower educational level) are also at a greater risk of sexually transmitted infection, bacterial vaginosis, and pelvic inflammatory disease. This situation makes it difficult to determine causality, because women may douche as a result of infection-related symptoms rather than as a part of their normal hygienic practice. The 2002 National Survey of Family Growth reported that women who douched in the 12 months prior to the survey had a higher prevalence of pelvic inflammatory disease than those who did not douche. A study of douching and endometriosis found that recent and frequent douching in a group of women with clinical pelvic inflammatory disease was associated with endometritis and upper genital tract

-continued on page 17

-continued from page 16

infections in those women with normal or intermediate vaginal flora. Although some studies report that bacterial vaginosis is sometimes sexually transmitted, it can also occur in women who have never had sexual intercourse.

Beyond the immediate connection between douching and reproductive tract infections, the sanitization of women's bodies by the feminine hygiene industry brings forth concerns about toxins or antimicrobial agents in antiseptic douching products that are inhibitory to lactobacilli. The major bacteria in a normal, healthy vagina are lactobacilli. Women with bacterial vaginosis, for example, have been found to have decreased hydrogen peroxide (H₂O₂) producing lactobacilli. Douching can upset the normal vaginal flora, creating a greater susceptibility to certain sexually transmitted diseases. Women who douche are at greater risk of contracting bacterial vaginosis. In their efforts to treat the symptoms of bacterial vaginosis through douching, the healthy bacteria are killed, and unhealthy bacteria are allowed to grow. If a pregnant woman has bacterial vaginosis and douches, chronic bacterial colonization of the endometrium may cause premature rupture of the uterine membranes or early labor.

The popularization of a way to remove semen from the vagina came from Charles Knowlton, a Massachusetts doctor in the 1800s. Knowlton published a description of douching in his 1832 publication, *The Fruits of Philosophy*; or the Private Companion of Young Married People. Knowlton suggested using a syringe filled with a solution of the astringent alum and infusions of white oak or hemlock bark, green tea, or raspberry leaf. Shortly thereafter, Frederick Hollick spoke of the douching in his publication, *The Marriage Guide*, which was printed in 300 editions between 1850 and 1875. Edward Bliss Foote also celebrated douching in his publication, *Medical Common Sense*. It is estimated that 250,000 copies of Foote's publication were sold between 1858 and 1900.

In the early 20th century, varying types of chemicals and detergents were advertised as feminine hygiene douches; Lysol and Fresca advertised their products for use as contraceptive "feminine hygiene" douches. For many African American women, cleansing the vaginal cavity is part and parcel of a monthly hygienic ritual associated with menstrual cycles. In the African American community, douching is a practice that has been handed down generationally. In the Gynecologic Infections Follow-Through (GIFT) Study of 532 douching women, 45% of the respondents cited their mothers as the person who first recommended douching. Approximately 28.6% of the respondents cited friends and other relatives as the first persons to recommend douching. In this same study, women gave the following reasons for douching: to cleanse after the menses, general hygiene, before or after sex, to reduce vaginal odor, "it's normal to douche," abnormal vaginal discharge, bleeding between menses, pregnancy prevention, and recommendation by a health professional. Pregnancy prevention and recommendation by a health professional were reported by 3% or less of the respondents. Few women in the study linked douching to health conditions such as pelvic inflammatory disease, HIV infection, or cervical cancer. A little more than half of the women (52%) did not think anything would happen if they stopped douching, or they thought they would experience some adverse effect, including feeling less clean, being less sexually attractive, or more likely to get an infection if they stopped douching. More than half of the respondents reported being advised by a health professional to stop douching. However, 85% reported that they would stop if they were told that douching might cause a sexually transmitted infection, infertility, or cancer.

Another area of grave concern is the way in which feminine hygiene products, specifically, douching products are regulated. The US Food and Drug Administration (FDA) classifies douche products as cosmetics. Cosmetics need not be sterile; however, they must not be contaminated with microorganisms that may be pathogenic, and the density of nonpathogenic microorganisms should be low. The FDA requires tamper-resistant packaging of products used vaginally. However, the FDA does not stringently review or regulate douche products. Nor does the FDA require that cosmetic manufacturers or marketers test their products for safety. The FDA merely "strongly urges" cosmetic manufacturers to conduct toxicological or other tests manufacturers deem appropriate to substantiate the safety of their

products. Under the Federal Drug and Cosmetic Act, cosmetic manufacturers are not required to register manufacturing establishments or formulations with FDA or make safety data available or other information available before a product is marketed in the United States. Providing this information is on a voluntary basis.

The issue of douching among women has gone historically unaddressed by the public health community. Despite the wide body of research that points to various adverse reproductive and maternal outcomes and medical personnel's knowledge of the harmful effects, scores of women still continue this harmful practice. In 1997, GlaxoSmithKline came under a legal challenge from National Black Nurses Association because they included the organization's name and logo in its advertisements in *Essence* and *Heart & Soul* magazines. The Association subsequently issued a resolution opposing douching. There is some information available that warn women about the harmful effects of douching. For example, The National Women's Health Information Center produced a douching fact sheet of "frequently asked questions" about douching and Blue Cross Blue Shield of Massachusetts has a fact sheet. In some instances, a physician may advise a woman to douche for certain chronic vaginal infections but that is only after thorough screening for preexisting conditions that may be better treated by other prescribed medications.

Even Massengill acknowledges on its douching product box that douching does not prevent pregnancy, has been linked to pelvic inflammatory disease (PID), and warns against possible vaginal discharge, vaginal bleeding, nausea and/or fever. They also inform women that douching does not prevent against contracting sexually transmitted infections, coming short of a full warning that douching is harmful overall.

The work we all must engage in is demystifying the vagina and eradicating the myths that it must smell like anything other than its natural smell. It's not supposed to smell like flowers, baby power, rain, a Caribbean island, vinegar or anything else. If there is some sort of unusually foul odor, a woman needs to see her physician to find out the root cause of the odor. A foul smell is usually the body's way of clueing us in to some abnormality that no amount of douching will cure. We must also do greater education with women about their menstrual cycles and the fact that the menstrual cycle is the body's way of cleansing itself. For lack of a better example, a woman's body is like a self-cleansing oven, quite capable and efficient at cleaning itself.

Some of the policy recommendations in BWRJ's APHA policy resolution include:

1. Schools of public health, pharmacy, and medicine and nursing should include in their curriculum specific education about the impact of douching on reproductive and maternal outcomes. (BWRJ is currently working to have a section included about douching in the standard medical curriculum).
2. Public health efforts should be increased through federal and state public health departments, federal and state offices of women's health, private and public medical institutions, local and state departments of public health, and physicians and other medical professionals to provide culturally competent education to women about the reproductive and maternal risks associated with douching. (BWRJ produced a douching factsheet that is now being distributed at some Chicago Department of Public Health Clinics, local abortion clinics, and at a clinic within the University of Chicago that provides gynecological services to low- to moderately income predominantly women of color).
3. The US surgeon general should include a warning label with all associated risks on douching product labels. (Understanding the public health urgency of douching, the APHA added this policy recommendations. BWRJ will be pursuing this policy effort in collaboration with several partners in the near future).
4. Public health promotion efforts should be increased through the use of population-specific media venues such as radio, television, and newspaper to provide culturally competent education to women about reproductive and maternal risks associated with douching. (BWRJ will be working in the future to develop an audio/print campaign to encourage women to stop douching).