

## Editor's Note: Journal of Women's Health Care (Volume 5, Issue 6)

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Received date: December 12, 2016; Accepted date: December 20, 2016; Published date: December 30, 2016

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### Introduction

Women's Health is the most delicate issue among the global health care sector. Women's health is determined by not just by the biological aspect but also by conditions such as Destitution, Employment, and personal responsibilities. The reproductive and sexual health is the major influencing condition on the mental and physical well-being of many women. Women's health in most countries is only related to pregnancy, childbirth and the post-maternity issues, whereas the mental and physical wellbeing are treated secondary. Several other conditions like cardiovascular disease, Cancer, Human papilloma virus (HPV), Depression, Dementia, and Osteoporosis etc. are given minimal importance. Several such issues have been discussed through Volume 5 Issue 6 of the Journal of Women's Health Care. The authors mainly focused upon issues like Urinary incontinence, Family planning, Pre-menstrual dysphoric disorder, and Sex during pregnancy, Endoscopy in pregnancy, Tuberculosis peritonitis and Dry eye in women.

### Discussion

Urinary Incontinence (UI) means involuntary leakage of urine, which is due to lack of control over urinary sphincter. It is a much more common problem in women and seems to vary widely. Dhillon et al. [1] provided significant information about the UI, its prevalence, risk factors and quality of life among Malaysian women. To access this, they selected Scopus and Medline search, but the information collected is incomplete and inconclusive. Thus, there is a need for bigger national population based study by employing a validated standardized symptom-based questionnaire in various local languages with sufficient details that allow for grading of UI severity and to estimate accurately the prevalence of UI.

The prevention of unintended and closely spaced pregnancies, in first 12 months following childbirth is termed as postpartum family planning. The first year after delivery is very critical period for the uptake of contraceptives to prevent unintended pregnancy. But the usage of these contraceptives by women is very low during this period that eventually resulted to unintended pregnancies and unwanted childbearing. Nigussie et al. [2], tried to assess postpartum contraceptive utilization in Kebribeyah town, Somali region, Eastern Ethiopia. The results of this study reported low postpartum family planning utilization by the women during postpartum period. Thus, there is a need for Kebribeyah woreda health office to enhance awareness in people to improve the uptake of postpartum contraceptive in order to reduce maternal and new born mortality and morbidity.

Premenstrual dysphoric disorder is a condition in which a woman suffers from severe depression symptoms, tension before menstruation, irritability etc. Agustin et al. [3], focused on the factors those have impact on the pathology on premenstrual Dysphoric disorders and

also tried to explore the consequences of the disorders. To assess this they conducted self-administered online survey in four different internet forums around world. The result emphasizes the need to use specific strategies to improve the number of participants and also to check the authenticity of the response.

The intercourse during pregnancy has many advantages such as good outcome of the pregnancy and child birth, harmony in the couple etc. Prohibition of intercourse during pregnancy cause complications such as, still child birth or miscarriage, so it is necessary for repeated sexual intercourse during first 7 months of the pregnancy. Kiemtore et al. [4] collected the information about the attitudes, opinions, and sexual practices among pregnant women present in the city of Ouagadougou city. To study this they conducted a cross-sectional survey in 10 different health centers in Ouagadougou city. This survey reported different sexual interest during pregnancy. Thus, health providers must ensure a good counseling about intercourse during the antenatal cares.

Carbohydrate antigen125 (CA125) is often measured as an indicator of ovarian malignancy. However, CA 125 is often elevated in variety of other non-ovarian conditions such as, pregnancy, pelvic inflammatory disease, endometriosis etc. The popularity of CA125 in the diagnosis of ovarian cancer is declined because CA 125 was not elevated in most primary ovarian mucinous neoplasms. Khan et al. [5], tried to evaluate the utility of CA 125 in the diagnosis of intestinal tuberculosis peritonitis in female patients. For this they conducted observational study and this study recorded high CA125 in patients with tuberculosis. Thus, CA 125 can be used as an effective marker for diagnosis of the severity of peritoneal inflammation.

Women are facing many complications, ill-health and death during motherhood time. Nearly 289000 maternal deaths were estimated in 2013, among which Sub-Saharan Africa countries share more than half of these deaths. Hussen et al. [6] assessed the prevalence of antenatal care visit and associated factors among pregnant women attending ante natal care visit at Wollaita Soddo town health institution. According to this study the factors like education, knowledge on timely initiation of ANC, early recognition of pregnancy and parity zero were found to be associated with timely initiation of first antenatal care.

Patient preferences in choosing their obstetrician/gynecologist especially gender related criterion is increasing day-by-day. At the same time increase in number of female gynecologist was reported to correlate the demand. Shamrani et al. [7] investigated women's gender preferences gynecologist for their regular check-up. They piloted a survey on participants, who are visiting the obstetrics and gynecology clinics at King Abdul-Aziz University hospital, Jeddah. From the survey it is clear that all women prefer female gynecologist for pelvic examinations, for new born care and for primary health screening.

## Conclusion

Several organizational awareness programs have been initiated in last few decades. Legal and constitutional supports are also enacted for the betterment for women health around the world. Progressive research has provided the opportunity to cost effective health check-up in every possible corner of the globe. 'Journal of Women Health Care' is among such journals which are devoted to gather information about women health, which could provide a better world for women [8-10].

## References

1. Dhillon HK, MZain AZ, Quek KF, Singh HJ, Kaur G, et al. (2016) Prevalence and risk factors of urinary incontinence and its impact on the quality of life and treatment seeking behavior among Malaysian women: A review. J Women's Health Care 5: 337.
2. Nigussie AT, Girma D, Tura G (2016) Postpartum family planning utilization and associated factors among women who gave birth in the past 12 months, Kebribeyah Town, Somali Region, Eastern Ethiopia. J Women's Health Care 5: 340.
3. Quilez A (2016) Socio-demographic profile of a sample of women with premenstrual dysphoric disorder: Exploratory study. J Women's Health Care 5: 341.
4. Kiemtore S, Ouedraogo I, Ouattara A, Zamane H, Sawadogo YA, et al. (2016) Sex during pregnancy: Opinions, attitudes and practices among pregnant women. J Women's Health Care 5: 343.
5. Khan A, Haider I, Ayub M, Tahir AA (2016) Serum CA 125 is a biomarker of tuberculous peritonitis and its inflammatory severity in female patients. J Women's Health Care 5: 345.
6. Hussen SH, Melese ES, Dembelu MG (2016) Timely initiation of first antenatal care visit of pregnant women attending antenatal care service. J Women's Health Care 5: 346.
7. Shamrani H (2016) A cross-sectional survey of women's provider gender preferences for gynecology and obstetrics care at King Abdulaziz University Hospital. J Women's Health Care 5: 347.
8. Melissa T (2016) Commentary on dry eye in women. J Women's Health Care 5: 348.
9. Nitin J, Hrushikesh C, Manu T, Rajesh G, Reddy DN (2016) Diagnostic and therapeutic endoscopy in pregnancy: When, why and how? J Women's Health Care 5: 344.
10. Dibaba B, Mitike G (2016) Factors influencing desired family size among residents of Assela Town. J Women's Health Care 5: 342.