Introduction

Reproductive tract infection (RTIs) including sexually transmitted disease and HIV/AIDS are being increasingly recognized as a serious public health problem. RTIs cause, suffering both men and women but their consequences are far more devastating and widespread among women. RTIs often go undiagnosed and untreated, pelvic inflammatory diseases, ectopic pregnancy, miscarriage, cervical cancer and increasing the risk of HIV transmission.

Adolescent too are vulnerable to RTIs due to their ignorance of risk factor, inadequate accessibility to service and social power houses. Women carry a heavy burden of reproductive morbidity. Male supremacy in Indian society along with the restrictive social structure, limits women independency, leading to strong, male control over female sexuality.

The results of number of community based prevalence studies of gynecological morbidity; undertaken in the last decades, both in India and in other developing countries, have lead to increase awareness among researchers and policy makers of the magnitude of reproductive tract infections and their grave consequences among the poor women.

Reproductive tract infection (RTIs) especially, sexually transmitted infection cause a wide spectrum of pathology, in women which includes vaginitis, cervicitis, salpingitis, pelvic inflammatory diseases (PID), ectopic pregnancy, infertility and also prematurity, still birth. Since even the non-ulcerative STI increase the risk of HIV transmission by 3.5 folds.
It is burden of a symptomatic disease, that is responsible for the frequent and severe or long term morbidity and in part of the persistence and spread of STI in the communities.