GONORRHOEA IN A CASE OF CONGENITAL ABSENCE OF THE VAGINA*

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As we have been unable to trace any reference to urethral gonorrhoea in a patient who has an atresia or absence of the vagina, we consider the following case worthy of note.

Case Report

An unmarried white girl aged 20 attended our Clinic on November 8, 1954. She gave a history of perineal discharge, and of frequency and burning of micturition for 1 week. She stated that for the past 6 months she had been having regular "intercourse" with a soldier, who had told her that he was having treatment for gonorrhoea at another centre. Intercourse had always been painful and difficult for the patient. She had never menstruated.

Examination.—The patient was a normally developed girl for her age. Her labia majora were normal. The clitoris was very small. Her labia minora appeared to be undeveloped and atrophic. The urethral orifice was inflamed, and the purulent discharge had spread, matting the pubic hair.

The vaginal orifice was replaced by an indentation about \( \frac{1}{2} \) in. deep which was covered with clinically normal skin. No uterus or cervix could be felt on rectal examination.

Cultures from the urethral orifice gave ready growth of Neisseria gonorrhoeae. The gonococcal complement-fixation and Kahn tests and the Wassermann reaction were negative.

The urethritis responded readily to systemic penicillin treatment, and recovery of the patient was uneventful.

We are grateful to Dr. R. M. Heggie for the bacteriological examination, and to Mr. G. S. Sturtridge for gynaecological confirmation of the anatomical defect.

* Received for publication June 14, 1955.