

## Letter to the Editor

AMJ 2017 10(12)

### Honeymoon cystitis

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Dear Editor,

“Honeymoon Cystitis” is a well recognised condition that occurs especially with new male partners in sexually active young women.<sup>1</sup> This point is not stressed by some observers. Classical prophylaxis is by good perineal hygiene which women are taught such as increased fluid intake and voiding urine within 15 minutes after intercourse<sup>1</sup> although some authorities do not accept that post-coital micturition prevents acute cystitis. Some books on gynaecology do not even mention specifically honeymoon cystitis. Recent advice on sex education for children did not even mention perineal hygiene.

About 50–60 per cent of women get at least one urinary tract infection in their lifetime. Even women who have no structural abnormality of the urinary tract develop recurrence of infection within 12 months. About 80 per cent of uncomplicated urinary tract infections (UTIs) are caused by *Escherichia coli* (*E. coli*) Young and post-menopausal women tend to develop recurrent UTIs.

Many of the alternatives to antibiotic prophylactic measures have been advised including probiotics but their efficacy have been questioned and many have not been tested scientifically.

Macklin<sup>1</sup> suggests that bacterial colonisation of the female genitalia is related somehow to the male partner but did not suggest any possible mechanism. It is well known that infection with *E. coli* organisms is the most frequent source of cystitis<sup>2</sup> and that *E. coli* deposit is significantly increased in sexually active women. Nuns have lower incidence of bacteruria than young working women.<sup>2</sup> There is an increase in bacteruria after sexual intercourse.

It is NOT generally appreciated that men may have deposits of faecal material under their finger nails and/or in the perineal area, which could come in contact with female genitalia. A common mechanism of cystitis is considered to be due to peri-urethral bacteria ascending into the female urinary tract and vagina.<sup>3</sup> Intercourse then increases

chances of lodging such bacteria in the female tract with resultant cystitis. Penile thrusting may move bacteria that have colonised the lower urethra upwards to infect the bladder with resultant cystitis.<sup>4</sup> The short urethra combined with its close proximity to the vagina and rectum is likely to predispose women to develop cystitis.

Both men’s hands and perineal hygiene are important for prophylaxis of “honeymoon cystitis”.

The link between sexual activity and cystitis remains unresolved but it deserves further study.

Sincerely,

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### ACKNOWLEDGEMENTS

Prashanti Goluguri has been a great help in the preparation of this letter.

Additional references are available on request.

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## Tablets manufactured by pressing powders from drugs, make the equivalent of artificial stones, that are not suitable for the digestive system of humans

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Dear Editor

All modern tablets are prepared by pressing powders. Therefore, these drugs become artificial stones. However, humans are not birds, so the mouth and stomach of people are not ready for the safe reception of the 'stones', even if it is pharmaceutical stone. Earlier this fact was not taken into account when explaining the mechanism of action of drugs with their enteral introduction into patients. However, in recent years there is evidence that the use of drugs in the form of tablets increases their danger for people's health. It transpired that the tablets can break teeth, crowns, braces and other dental structures, can stick to the wall of the stomach and cause a physical-chemical burn progressing to ulcer.<sup>1,2</sup>

Our results showed that there is still no standard for the manufacture of tablets in a single form with allowed values of mass, volume, dimensions, physical-chemical and mechanical properties, including hardness and destructibility when chewing. Therefore, all tablets today can have various shapes, sizes, volume, physical-chemical properties and hardness when chewed. In this regard, mechanical, physical, chemical and physical-chemical properties of pharmaceutical tablets can identify local effects from drugs and from each other many times. The worst part of it is the uncertainty and unpredictability of the local aggressiveness of modern tablets for hard and soft tissues in the digestive system of humans. It transpires that even the USA Pharmacopoeia does not require the testing of tablets for their hardness or the local physical-chemical aggressive action on the enamel of the teeth and the mucous membranes of the cavity of the digestive system. We discovered that tablets sink in water and in gastric juice. Therefore, the ingestion of tablets with the position of the body erect or sitting results in these falling down to lie on the wall of the pylorus of the stomach. In the pylorus tablets begin to absorb the gastric juices, turning into suspension, and/or a saturated solution, which provides

physical-chemical aggressive action on the stomach wall until an ulcer is formed.

It has been discovered that the ingestion of water before, during, or after swallowing the tablet does not protect the stomach from ulcers because the pills remain on the wall of the pylorus, regardless of the amount of water in the stomach.

We were the first to explain why tablets cause ulcers mainly in the pylorus.<sup>1,3</sup>

After this discovery it became obvious that to prevent ulcers in the pylorus, it is necessary for the tablets not to be drowned in gastric juice. To prevent the tablet being drowned in gastric juice, we decided to produce it in the form of solid foam. This tablet we called a floating tablet.<sup>3</sup> The most important thing in this tablet is that the reduced specific weight of tablets is less than  $1\text{g/cm}^3$ . This property of the tablet is achieved thanks to the presence of many internal cavities filled with gas.

Finally, we investigated the natural food lumps in people which are formed in the mouth when chewing bread for ingestion. It is shown that they have the shape of an olive, which is elastic, porous, slippery, very soft when chewed and do not have a local irritating action.<sup>2</sup> Obviously, to improve security for people, pills should be elastic, porous, slippery and very soft, shaped like an olive and without local irritating action.

Sincerely,

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and Alexey Petrovich Reshetnikov  
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