

CASE REPORT

Intimate partner violence with vaginal insertion of a partial chili pod (*Capsicum annuum*): A case report

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Abstract

A case of intimate partner violence (IPV) with vaginal insertion of an irritant foreign body, chili pod of *Capsicum annuum*, in a 36-year-old woman. She presented with severe burning sensation in the lower abdomen and vulva. This highlights the unique role of gynecologists in the recognition and treatment of IPV.

KEYWORDS

sexual violence, vaginal irrigation, vaginal speculum, women health services

1 | INTRODUCTION

Gender equality and prevention of women and girls from violence and discrimination are important components of social progress and sustainable development goals.^{1,2} Violence against women takes many forms, some of which may be influenced by socio-cultural contexts and income levels. Intimate partner violence (IPV) includes physical, emotional, sexual, and financial abuse and control over contraception, pregnancy, or medical care.³ The levels of IPV among ever-partnered women aged 15–49 years range from 5%–40% across low- and middle-income countries with different patterns observed across age group and place of residence.^{2,4} IPV results in endocrine, gynecologic, reproductive, musculoskeletal, neurologic, psychiatric, and pulmonary disorders³ with an escalation of the degree of injury to the victim with recurrent exposures to violence.⁵

Intimate partner violence involving genital organs may constitute up to 25% of clinical presentations among women who have access to healthcare.⁶ Insertion of foreign bodies into the vagina is a common form of violence and may present with foul-smelling vaginal discharge, lower abdominal pain and persistent urine leakage, dysuria, vesicovaginal fistula, and recto-vaginal fistula.⁷ We present a case of IPV with insertion of a partial chili pod, *Capsicum annuum L*, into the vagina in a heterosexual couple in Bhutan. *Capsicum annuum L* is a pungent hot pepper commonly available in the southern districts of Bhutan and the sub-Himalayan region.⁸ In a review of literature in PubMed and Google Scholar using the keywords “intimate partner violence (IPV), *Capsicum annuum*, foreign body in the vagina, and domestic violence”, no reports of IPV by insertion of irritant chili in the vagina were found. The purpose of this case report is to highlight the clinical presentations of vaginal insertion of *Capsicum annuum*.

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2 | CASE REPORT

A 36-year-old woman, a homemaker with no formal education and married for the second time, a mother of two children, and a daily alcohol consumer (70–80 g per day) presented to a remote health center in Bhutan in 2021 with the complaints of severe burning sensation in the lower abdomen and vulva for 3 days. On presentation, she was disoriented and inattentive with frank signs of acute alcohol intoxication.

On physical examination, her vital signs, general physical examination, and abdominal examination were within normal limits with no obvious evidence of physical abuse. On genital examination, there were no scratch marks, bruises, lacerations, or evidence of other forms of abuse. On vaginal examination with Cusco's speculum in the presence of a female chaperone, a piece of chili pod of a locally grown species, *Capsicum annuum* L (local name: "dalle khursani") measuring 2 × 1.5 cm was noted in the posterior fornix of her vagina (Figure 1). The vaginal mucosa that was in contact with the chili pod was erythematous but there were no erosions or breach of the epithelium. The chili pod was evacuated and the vagina was rinsed with two liters of normal saline.

Upon further history taking, it was learned that the husband had inserted the chili pod into her vagina following a quarrel. She was dependent on alcohol and had remained under alcohol intoxication for 3 days due to which she was not able to visit the health center. She further revealed a history of frequent physical and emotional abuse by her husband, especially when both of them were under alcohol intoxication. Her husband, educated up to grade X, works as a driver in one of the government offices in the locality. After recognizing that there was a concern for continuing IPV after being discharged, the local authorities were informed, and the couple was subsequently referred for counseling for alcohol cessation and mediation for domestic violence. Her basic laboratory tests were within normal limits, and her chest radiograph did not show any features of old fractures.

3 | DISCUSSION

Although IPV is a common problem, many women do not have access to social help or medical care during injuries resulting from such violence. Up to 42% of women who experience IPV suffer from physical injuries including genital injuries.² Victims of IPV are at increased risk for unintended pregnancy, abortions, infections, and sexual dysfunctions.⁹ Obstetrician–gynecologists are in a unique position to identify, support, and treat women who are victims of IPV. However, gynecologists often underestimate the extent of the problem of IPV and fail to provide comprehensive care and help to such victims. In a study among gynecologists, it was noted that there was a lack of knowledge on IPV and only 6.8% of respondents had ever pursued or received any kind of education on IPV.¹⁰

This is probably the first reported case of IPV with vaginal insertion of chili pod of *Capsicum annuum* L. *Capsicum annuum* is one of the hottest chili peppers with 100,000 to 350,000 Scoville Heat Units. Capsicum species are natural to tropical and humid climates and are used as spices, flavorings, and as vegetables.^{8,11} Capsaicin (8-methyl-N-vanillyl-6-nonenamide) is the primary irritant that produces a burning sensation when it comes in contact with skin and mucosa. The pod contains large quantities of capsaicin in the placental tissue (which holds the seeds), internal membranes and fleshy parts of the fruit.

In this case, the chili pod was cracked open exposing the vaginal mucosa to a higher concentration of capsaicin. Removal of chili followed by copious vaginal irrigation with normal saline led to immediate relief of symptoms. There was no mucosal erosion or fistulization. The victim had alcohol dependence with frequent episodes of intoxication.

Bhutan is a country located in the eastern Himalayas with a population of 756,129 and 361,806 females in the year 2021.¹² In Bhutan, among 2184 females aged 15–64 years interviewed in 2017, the life-time prevalence of ever-partnered women and girls who have experienced

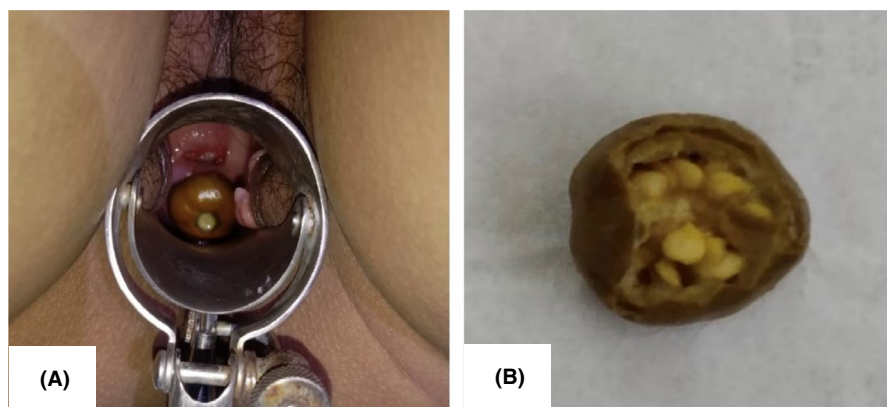


FIGURE 1 Vaginal examination with Cusco's speculum of a 36-year-old woman in Bhutan in 2021 who presented with severe burning sensation in the lower abdomen and vulva shows (A) *Capsicum annuum* lodged in the posterior fornix with surrounding erythema, no mucosal erosions, (B) A half-opened *Capsicum annuum* chili pod measuring 2 × 1.5 cm that was evacuated

partner violence was 13.9% and the prevalence of having suffered sexual violence was 4.5%.¹³ The National Commission of Women and Children, a governmental organization and the Respect, Educate, Nurture and Empower Women (RENEW), a civil-society organization, work towards awareness and promotion of sexual and reproductive health rights, prevention of domestic, intimate partner and sexual and gender-based violence. All patients receive free health care at all levels of hospitals in Bhutan. This case highlights one extreme form of IPV with a method of inducing harm that was adapted from the social surroundings with an inter-connected alcohol use disorder of both the partners.

For medical officers and gynecologists working in resource-limited settings, this case highlights the importance of appropriate history taking and clinical examination in the diagnosis of one form of IPV. While the medical intervention was the evacuation of the irritant chili pod and irrigation, if left untreated could have led to mucosal ulceration and fistulization, abscess formation or sepsis leading to higher healthcare utilization. It also highlights the role of gynecologists in the detection and management of clinical cases of IPV and sexual violence.

4 | CONCLUSION

This is a rare and possibly the first reported case of vaginal insertion of *Capsicum annum* chili pod as a form of IPV in a heterosexual couple. An appropriate history and clinical examination helped the victim to receive appropriate medical care. This case highlights the role of gynecologists in the detection of IPV and in providing necessary help to the victims.

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CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

AUTHOR CONTRIBUTION

ND and TD involved in conception, design, data collection, manuscript writing, review, and final consent for publication. ST involved in manuscript writing, review, and final consent for publication. DW involved in data collection, review, and final consent for publication.

ETHICAL APPROVAL

Ethical approval was obtained from Research Ethics Board of Bhutan, Ministry of Health, Thimphu, Bhutan

(Reference number: REBH/Approval/2021/141 dated 07 December 2021).

CONSENT

Written informed consent was obtained from the patient to publish this report in accordance with the journal's patient consent policy.

DATA AVAILABILITY STATEMENT

The data that support the findings of this study are available from the corresponding author upon reasonable request.

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