Summary in English

The PhD-thesis consists of three original papers and one review. The overall aims of this study were to provide knowledge of the health consequences of sexual abuse and to add to the understanding of physical findings in a legal perspective. We wanted to assess the impact of factors related to the assault as to the risk of inflicting genitoanal injury in women examined shortly after an acute assault. In women with a past history of sexual abuse the aim was to assess associations between sexual abuse history and later poor health. We specifically wanted to determine if characteristics such as invasiveness, recentness, age, additional physical or emotional abuse, and relation to the abuser determines the impact the assault has on health. Finally, we sought to describe women's experiences with the gynaecological examination, both in women with and without a history of sexual abuse.

The thesis present results from two different studies; one in sexually assaulted women examined at The Centre for Victims of Sexual Assault and one in gynaecological patients visiting gynaecological departments in five Nordic countries (The KK-NorVold Study). Data on genitoanal injury in 249 sexually assaulted women were reviewed. Genitoanal injury was associated with sexual assault on women without prior sexual intercourse experience and in women exposed to anal penetration. Genitoanal injury was not associated with the severity of the assault.

In 3,539 Nordic gynaecological patients we found that a sexual abuse history, with prevalence of 21 %, was associated to chronic pelvic pain and an overall poor general health status. Several specific characteristics of the abuse seemed to influence the negative effect on health.

The gynaecological examination was generally well tolerated. However, we found that severe discomfort during the examination was associated with several specific factors such as young age, a negative emotional contact with the gynaecologist, and a history of sexual abuse.

In conclusion, the results confirm that sexual abuse victimization affects health both in the short term and in the long term.

Gynaecologists must recognize the importance of this issue, and consider incorporating questions on abuse when taking a history in selected, if not all, patients.