Prevalent causes of infertility in women of reproductive age in Srinagar city

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■ **ABSTRACT :** The cram is a stab to scrutinize the major causes of infertility in Srinagar. Aridity is the ability of a sexually active couple, not using any birth control, to get pregnant after one year of trying. The main objective of the study was to underline the causes and to find out the psychological distress among these women folk. Qualitative techniques such as in- depth interviews and structured questionnaire was administered towards execution of the objectives. It was found that women with infertility have sporadic ovulation; these women usually have irregular periods. Ovulation can be disturbed by changes in hormones and the other causes of infertility were ovulatory dysfunction, STD, like chlamydia and gonorrhea that can cause tubal blockage. Infertility persecutes a woman's distinctiveness, detonate their conjugal stability and turn out to be a major source of anxiety leading to depression.

■ **KEY WORDS :** Infertility, Women, Reproductive age

Infertility is the inability to conceive after 1- 2 years of unprotected intercourse according to medical Guidelines and textbooks. In common language infertile' means 'impossible to conceive' or 'unable to have a child' in the sense of being sterile (Dhont, 2009). Infertility is the inability to conceive a child. A couple may be considered infertile if, after two years of regular sexual intercourse, without contraception, the woman has not become pregnant (and there is no other reason, such as breastfeeding or postpartum amenorrhea). Primary infertility is infertility in a couple who have never had a child. Secondary infertility is failure to conceive following a previous pregnancy. Infertility may be caused by infection in the man or woman, but often there is no obvious underlying cause (WHO, 1994, Anonymous, 1998). In fertility, is seldom if ever a physically a debilitating diseases. Still it has devastating consequences for men and particularly for women's wellbeing. It may outrageously jeopardize the couple's psychological harmony and perilously shatter their marital stability (Datta and Guha, 2007).

Childbearing and rising of children are extremely important events in every human's life and are strongly associated with the ultimate goals of completeness, happiness and family integration. It is widely accepted that human existence reaches completeness through a child and fulfils the individual's need for reproduction. Human fertility, compared with other species of animal kingdom, is unfortunately low (Gnoth *et al.*, 2005; Benagiano *et al.*, 2006; Kelley and Cox, 2006 and Boivin *et al.*, 2007). According to recent studies by the World Health Organization (WHO), approximately 8-10 per cent of couples are facing some kind of infertility problem. Globally, this means that 50-80 million people are facing the problem of getting an integrated family. In the USA, approximately 5 million people have infertility problems, while in Europe the incidence is estimated around 14 per cent (Gnoth *et al.*, 2005; Benagiano *et al.*, 2006; Kelley and Cox, 2006 and Boivin *et al.*, 2007). The problem of infertility is attributed to a galaxy of factors. Infertility can be attributed to many causes. Broken down the statistics, it said that 40 per cent of infertility issues are female, 40 per cent male and 20 per cent are unexplained (Richard *et al.*, 1997).

Evidently, infertility is often an amalgamation of male and female factors. The present cram deals with only female

infertility.

Objectives:

–To find out the causes of infertility among women and to assess the psychological disturbances associated with infertile women.

■ RESEARCH METHODS

For the present study, the sample was derived from urban area, which comprised of 50 women from Srinagar. Primary data were used to collect the information. A specially structured questionnaire was used for the study. In addition, job satisfaction scale was used to collect the data. The questions included both of demographic characteristics and the causative factors of infertility. The sample was taken from different infertility centres, Rotunda Hygenia, Royal infertility clinic, L.D. Hospital of Gynecology and Obstetrics. The data thus, collected were tabulated and analyzed as per need of the study.

■ RESEARCH FINDINGS AND DISCUSSION

Table 1 depicts the demographic characteristics of respondents. It is evident that highest number of respondents

(42%) were in the age group of 30-35 years followed by 20 per cent in the age group of 35-40, 12 per cent were in the age group of 40-45 whereas 4 per cent were in the age group of 20-25 years and only 2 per cent were in the age group of above 45 years.

Datta and Guha (2007) reported that maximum number of fertile women belonged to the age group between 26- 30 years (60.6%) and next highest group was between 21-25 years *i.e.* 27.27 per cent (4) Datta and Guha (2007).

Table 1 also depicts the occupation as well as the qualification of the respondents wherein it was found that highest frequency of infertility was among housewives (40%) followed by teachers (26%), employees (18%) and farmers (16%). Regarding educational background, 44 per cent of respondents were post graduates and 38 per cent graduates.

Table represents the menstrual history of the respondents. It reveals that 40 per cent of the respondents have their first menarche at the age of 13 years, 38 per cent at the age of 14 years, 16 per cent at the age of 12 years and only 6 per cent at the age of 15 years. It further depicts the distribution as per regularity of their menstrual periods. It showed that 56 per cent had irregular periods and 44 per cent had regular periods. The study further bared that 72 per cent of the infertile women were having painful periods and 28 per cent among

Table1: Demographic characteristics

Distribution as per demographic characteristics	N	Percentage (%)
Age in years		
20-25	2	4
25-30	10	20
30-35	21	42
35-40	10	20
40-45	6	12
Above 45	1	2
Occupation		
Teacher	13	26
Employee	9	18
Farmer	8	16
Housewife	20	40
Qualification		
Secondary education	9	18
Graduation	19	38
Post Graduation	22	44

Table 2: Menstrual hstory

Distribution of sample according to menarche		
Age in years	N	Percentage
12	8	16
13	20	40
14	19	38
15	3	6
Distribution of sample according to irregularity of periods		
Regular	22	44
Irregular	28	56
Distribution of sample according to dysmenorrhea (painful periods)		
Painful	36	72
Normal	14	28

Table 3: Causative factors

Causative factors	N	Percentage
Ovulatory dysfunction	10	20
STD (Chlamydia/ Gonorrhea)	12	24
Thyroid	16	32
Ectopic pregnancy	1	2
Pelvic factors	8	16
Unexplained	3	6

Table 4 : Psychological disturbances

Depression	N	Percentage
Yes	31	62
No	19	38
Anxiety		
Yes	35	70
No	15	30

them did not experience painful periods.

The literal occurrence of the diverse causative factors appears to diverge with the sample studied (Table 3). In the ample of the stipulations, 20 per cent of the causes of infertility were the fallout of ovulatory dysfunction,16 per cent were antecedent of pelvic factors such as endometriosis, adhesions or tubal diseases,32 per cent were originated by thyroid, more than 20 per cent were caused by STD (Chlamydia- bacterial infection/ Gonorrhea- a sexually transmitted diseases caused by gonococcal bacteria that effect the mucous membrane of the genital and urinary tract). In 6 per cent of females no direct cause of their unproductiveness could be found, that is why this cluster is allude to as unexplained infertility and 2 per cent because of ectopic pregnancy (a pregnancy in which the foetus develops outside the uterus, typically in a fallopian tube).

Table 4 reveals that each facet of the infertility induced psychological hassle for the women concerned. 70 per cent of the respondents experience anxiety throughout infertility, moreover 62 per cent of the respondents had developed depression.

A similar study by Ashkani et al. (2006) reported that the depression can be one of the main psychological problems among infertile couples (especially women), which may affect all the aspects of life of infertile couples and even treatment process of infertility .

Conclusion :

Infertility is considered a curse for women where female partner is blamed in almost all cases. Infertility in women is anarchy of reproductive system that obstructs the body's ability to ovulate, conjure up an infant to term. Women's age is perhaps the most considerable factor allied to her ability to conceive. In addition to age, there are a number of causes that impede with a woman's fertility including STD, ovulatory dysfunction, pelvic factors etc. Moreover aridity associated anxiety among arid women with higher edification was also distinguished.

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