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Infertility in women

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Abstract:

Although the universal access the reproductive health care Has received priority, the rural women experiencing infertility problem in India more than urban areas. This review is done to evaluate knowledge awarness among women of infertility and types to infertility. This review is done to know the medical or a treatment approches for the infertility. Women who are suffering with these disorder should be treated with respect and dignity and be given Appropriate information about every treatment and support her. Discription about primary and secondary infertile is also mentioned.

Keywords: Endometriosis, Polycystic ovarian syndrome, Genetic inheritance.

Introduction: [6][13]

Infertility means not being able to become pregnant after a years of trying. If a women can get pregnant but keeps having miscarriages or stillbirths, that is also called infertility. Infertility is nowadays fairly common. The infertility problem has not given attention in India because it is not life threatening condition. The problem of infertility is a life crises with invisible losses, and it's consequences are manifold. WHO(world Health Organization) defines infertility as a failure to concieve dispite many years of cohabition and exposure to pregnancy, then it is called as primary infertility or primary sterility. If a women fails to concieve after previous pregnancy after the time period of 2 yrs then it is called as secondary infertility or secondary sterility. The disorder of infertility relatively affects large no. Of couple

at the same time during their reproductive lives. In pronatalist culture such as those of India and South Asia more generally, the consequences of infertility is devastating. Infertility and Childlessness are nowadays not personal sorrows. The problem of infertility is rising in the cities dramatically. According to the census report the problem of infertility and childlessness is rise upto 50% due to changing lifestyle. Upto 95% of couples are desire to have a child at the same point of life. In urban India, the problem of childlessness is not due to people are choosing to remain single or childless by their choice. The problem of infertility is changing day by day, it may be having many reasons like sexually transmitted infections, increasing stress level, due to routine habits, job pressure, postponding parenthood, obesity etc. In future generation the problem of Infertiliy will become common, with more couples trying to have a child. Nowadays the couples are so proactive that they go to infertility specialist, rather than a gynacologist Or a family physician. A new term on the ground infertility is 'voluntary infertility' a typical urban Indian syndrome. Nowadays the women's are independent, educated, career minded, they put off or delay their marriage or childbearing till they afford all the good things and comforts in their lives. Still the age of 37 yrs, 90% of women's eggs degrade, by the time she decides to have a baby. The International Conference and population Development Programme of action states that the reproductive health services should include the prevention and appropriate treatment of infertility, their is inadequate focus on infertility in Indian programme. Traditionally, women with no child in India are stigmatized and isolated. Infertility can destroy women's status, identity and economic security consequently, be a major source of anxiety leading lower the sense of powerlessness, and self esteem. Couples take over various traditional methods and religious practices, including refusing to visit a place where a women has delivered a child, visiting temples, obeserving tantric rites, participating in rituals and visiting astrologers, wearing charms. Nowadays it is certainly observed that many childless couples turns to traditional healers or quacks. Limited male participation, stigmatizing beliefs, cost, indifferent quality of care, and lack of service public sector are the major obstacles or barriers to prompt and appropriate treatment seeking. The childless women are stigmatized not in just home, but in society too. In ancient times, this kind of women's are not allowed to participate in various auspicious ceremonies, particularly that involves child birth and naming ceremonies. The main causes of infertility are age, harmone issue that prevents ovulation, harmonal menstrual cycle, obesity, being underweight, having a low body fat content from extreme exercise, endometriosis, structural problems (problems with fallopian tubes, uterus or ovaries.)

Objectives:

- To list the diagnostic criteria.
- Relevance to research in related areas such as fertility trends and reproductive health.
- To suggest policy measures to address issue related to infertility treatments.
- To examine the extent of childlessness and infertility among married women in India.
- To examine the treatment seeking behaviour among the infertile married women/couples.
- For detection and highlighting risk factors and to identify and treat women's with endometriosis earlier.
- To individualized and take into consideration the impact of the condition on quality life.
- The problem of infertility is a rising issue in India and it needs to be uncovered.
- The women who is infertile is considered as a curse to the society as well as family, to let them know the causes of infertility.

- To gain knowledge regarding the extent of infertility and the treatment seeking behaviour among married women in India.

Some diseases related to infertility:

Pathophysiology:

Endometriosis: [7]

A disorder in which tissue that normally lines the uterus grows outside the uterus. With endometriosis, the tissue can be found on ovaries, fallopian tubes or the intestines.

Ayurvedic treatment for endometriosis is the safest way to get relief from the symptoms of endometriosis is like heavy bleeding and severe pelvic pain etc.

The internal lining of the uterus is made up of cells called endometrial cells. These cells are discarded every month during menstrual. Sometimes these cells attach to the tissue, which present outside the uterus called endometrial implants. These implants leads to an unbearable condition called Endometriosis.

Endometriosis affect most of the women in their reproductive age. The cause of infertility is endometriosis in 25-35% females. About 30-45% of cases painful menses are because of endometriosis. Endometriosis is rare in post menopausal females.

A) Causes of Endometriosis: [6]

The exact cause of endometriosis is unidentified. But some theories suggest possibilities of these underlying cause-

- 1. Unprogressive menstrustion.
- 2. Abnormal growth of embryonic cells.
- 3. Transportation of endometrial cells through blood or lymphatic.
- 4. Loss in immunity.
- 5. History of endometriosis in family.
- 6. Toxins in the environmental leads an imbalance in hormones.
- 7. Condition associated with chronic stress.

B) Root causes of endometriosis:

Although the exact cause of endometriosis is not certain but the possibilities includes:

Retrograde Menstruation:

In retrograde menstruation, menstrual blood containing endometrial cells flows back through the fallopian tubes and into the pelvic cavity instead of out of the body. These endometrial cells stick to the pelvic walls and surfaces of pelvic organs, where they grow and continue to thicken and bleed over the course of each menstrual cycle.

b. Transformation of peritoneal cells:

In what's known as the "induction theory," experts propose that hormones or immune factors promote transformation of peritoneal cells — cells that line the inner side of your abdomen — into endometriallike cells.

EMBRYONIC CELL TRANSFORMATION: Hormones such as estrogen may transform embryonic cells — cells in the earliest stages of development — into endometrial-like cell implants during puberty.

d. Surgical scar implantation:

After a surgery, such as a hysterectomy or C-section, endometrial cells may attach to a surgical incision.

- e. ENDOMETRIAL CELL TRANSPORT: The blood vessels or tissue fluid (lymphatic) system may transport endometrial cells to other parts of the body.
- f. IMMUNE SYSTEM DISORDER: A problem with the immune system may make the body unable to recognize and destroy endometrial-like tissue that's growing outside the uterus. 1JCR

C) Symptoms:

Some common symptoms of endometriosis are as followed:

- 1. Severe, debilitating abdominal cramps.
- 2. The tissues is not cancerous, but it can lead to scarring and adhesion.
- 3. It may affect a person's chances of becoming pregnant.
- 4. nausea and vomiting
- 5. Constipation
- 6. Increase in urinary frequency.
- 7. Endometriosis is first diagnosed in those seeking treatment for infertility.
- 8. Pain during or after sex is common with endometriosis.
- 9. lower back and abdominal pain
- 10. It may have irritable bowel syndrome.

D) Genetic inheritenc:

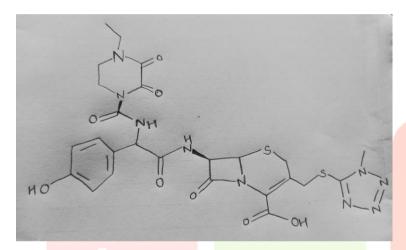
The genetic of endometriosis is complex and remains unexplained, however most investigators feel that it is inherited in a polygenic or multifactorial mode. The polygenic or multifactorial type of inheritance occurs when phenotype is determined by a combination of multiple genes and environmental effects.

E) Some common drugs used in endometriosis:

A) Cefoperazoene sodium injection:

Cefoperazone sodium injection is an Cephalosporin antibiotic prescribed for Infections such as respiratory tract infection, urinary tract infection, infection of skin, pelvic inflammatory endometritis and other infection.

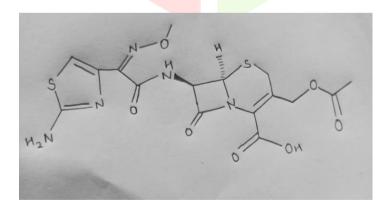
Trade name: ceprazo, novacip, myticef etc



B) Cefotaxime:

Cefotaxime is an antibiotic which is basically Known as Cephalosporin antibiotic which is prescribed for skin infection, respiratory tract infection, pelvic inflammatory diseases, endometritis etc

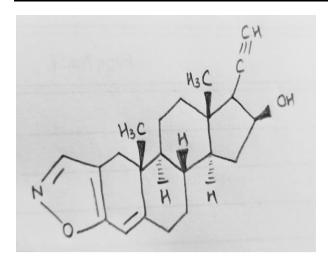
Trade name: ceftax, ominax neonatal, antax etc.



C) Danzol:

Danzol is a synthetic steroid, prescribed for endometriosis and hereditary angioedema.

Trade name: Endozol(100mg), Benzol (100mg), Gynazol(100mg). etc



D) Elagolix:

Elagolix tablets are prescribed to manage moderate to severe pain associated with endometriosis in premenopausal women. Elagolix helps to reduce the symptoms of menstrual and non menstrual pelvic pain, and pain that occurs during sexual intercourse.

Elagolix belongs to a class of drug that reduces the female sex harmones called progesterone and estrogen. It is medically a gonadotropin-releasing harmone antagonist that works by blocking the signals of gonadotropin- releasing harmone resulting in suppression of follicle stimulating harmone (FSH) and lutenizing hormone (LH) and thereby reducing blood levels ovarian sex hormones, progesterone and estradiol.

F) Surgical treatment for Endometriosis:

In severe cases of endometriosis most can be treated with laproscopic surgery. In laproscopic surgery, a surgeon insert a slender viewing instrument (laproscope) through small incision near your navel and inserts instruments to remove endometrial tissue through another small incision.

a) Hysterectomy:

This is a surgical prosses for the removal of endometrial tissue and uterus, with or without the ovaries. A treatment is contraversial. A hysterectomy is major type of surgery with permanant effects, and it's not always a cure, the condition and the related pain may return.

Types of Hysterectomy:

A hysterectomy may be done abdominally, laproscopically or vaginally. There are three types of this technique which are as followed;

Partial hysterectomy. In this procedure, also known as a supracervical hysterectomy, the uterus is removed but not the cervix.

Total hysterectomy. The entire uterus, including the cervix, is removed.

Hysterectomy and salpingo-oophorectomy. The uterus and one or both ovaries and fallopian tubes are removed.

Ablation technique: b)

Endometrial ablation is a procedure in which the lining of the uterus (endometrium) is surgically destroyed (ablated). The goal of endometrial ablation is to reduce menstrual flow. In some women, menstrual flow may stop completely. No incisions are needed for endometrial ablation.

. Polycystic ovarian syndrom (PCOS):[9]

These is also kind of disorder in which women get many pregnancy complications, and even infertility. Polycystic ovarian syndrom is a harmonal disorder in which the ovaries are enlarged in size and their are small cyst on the outer edges. Women's with PCOS may have infrequent or prolonged menstrual periods or excess of male harmones (androgen) levels. The ovaries may develop numerous small collection of fluids (follicles) and fail to regularly release eggs. PCOS is one of the most common but treatable type of infertility. The problems of ovulation are usually the primary cause on infertility in women with PCOS. Due to more production of testosterone and ovulation may not occur, because follicles on the ovaries do not mature.

Pregnancy complications in women with PCOS: [16] A)

Many studies has been performed comparing pregnancy outcomes in women with PCOS versus controls;

1. Miscarriage (Early loss of pregnancy):

women with PCOS are three times as likely to miscarry in early month of pregnancy as women without PCOS. Some research shows that metformin may reduce the risk of miscarriage in pregnant women with PCOS.

2. Gestational Diabetes mellitus:

Women who do not get pregnant with the condition, however has the higher risk of gestational diabetes. This is because this condition is associated high blood sugar and insulin resistance. Women with PCOS are often insulin resistence their body can make insulin but can't use it effectively, increasing their risk of type 2 diabetes at the age till 40. Lifestyle can have a big impact on insulin resistance, especially if a women is overweight because of an unhealthy diet, and lack of physical activity.

3. Pregnancy induced hypertension and preeclampsia:

preeclampsia is a sudden increase in blood pressure after 20th week of pregnancy, can effect the mother kidney, liver, and brain. If left untreated preeclampsia can turn into eclampsia. Eclampsia can change cause organ damage, seizures and even death. Hypertension condition is due to increase in blood pressure that may occur in second half of the pregnancy. This type of high blood pressure can also effect delivery of the baby.

4. Offsprings Health:

Children born to the mother with PCOS are considered to be at increased risk of developing endocrine and cardiovascular dysfuction. Born to a mother who has suffered pregnancy complication may increase, the risk of metabolic abnormalities such as obesity and early IR, in PCOS offspring. Women with PCOS are considered to have a reduced breastfeeding rate that resulted significantly related to mid pregnancy androgen level.

Root causes of pcos: [9] B)

The exact cause of pcos is not known still. The factors that may play role include:

Excess insulin: a)

Insulin is the hormone produced in the pancreas that allows cells to use sugar, your body's primary energy supply. If your cells become resistant to the action of insulin, then your blood sugar levels can rise and your body might produce more insulin. Excess insulin might increase androgen production, causing difficulty with ovulation.

b) Low grade inflammation:

This term is used to describe white blood cells' production of substances to fight infection. Research has shown that women with PCOS have a type of low-grade inflammation that stimulates polycystic ovaries to produce androgens, which can lead to heart and blood vessel problems.

c) Exess Androgen:

The ovaries produce abnormally high levels of androgen, resulting in hirsutism and acne.

d) Genetic inheritance:

Polycystic ovary syndrome does not have clear pattern inheritance, although affected individuals may have close family members with the same condition. It is seen that 20 to 40 percent of women with polycystic ovary syndrome have an affected mother and sister. The condition of pcos can be passed from mother side and father side or from both.

C) Causes of polycystic ovarian syndrom(PCOS):[6]

The exact cause of pcos is unknown. Early diagnosis and treatment along with weight low along with weight loss may reduce the risk of long term complications such as type 2 diabetes, and heart disease.

Gene insulin resistance and inflammation have all been linked to excess androgen production.

Obesity is the major cause of insulin resistance. Both obesity and insuline production can increase the risk of type 2 diabetes.

D) Symptoms of PCOS:

some women starts seeing the symptoms around the time of their first period. The other women only iillustrate that they have pcos after they have gained weight and they are facing problem to get pregnant.

The most common PCOS symtomps are:

a) Irregular periods:

If a women is facing the problem of pcos, their is a lack of ovulation which prevents the uterine lining from shedding every month. Some women with pcos get fewer than eight periods a year or none at all.

b) Heavy Bleeding:

The uterine lining bulids up to a longer period of time, so that the period that a women may get can be heavior than normal.

c) Hair growth:

More than 70% of women faceing the problem with the condition of hair growth on their face and body, including their chest and belly, back. Excess hair growth is called as hirsutism.

d) Acne:

Male harmones makes the skin oilier than usual and causes breakout on areas like face, chest and upper back.

e) Weight gain:

Upto 80% of women with pcos are overweight or have obesity.

f) Darkening the skin:

Dark patches of skin can form in body creases like those on the neck in the groin and under the breast.

E) Diagnostic cretiaria for Pcos: [16]

Doctors typically diagnose PCOS in women who have at least two of these three symptoms:

- a) High androgen
- b) Irregular menstrual cycles
- c) Cysts in ovaries.

Doctors also check wheather the women has acne, facial and body hair growth and weight gain. Blood test checks for higher than normal levels of male hormones. The doctors may also have blood test to check the cholestrol, insuline and triglyceride level to evaluate the risk related conditions like heart disease and diabetes. The ultrasound uses sound waves to look for abnormal follicles and other problems with the ovaries and uterus.

F) Surgical methods for diagnosis of pcos: [16]

Surgery can be the other option for the treatment of PCOS or to improve infertility if other treatment don't work. Ovarian drilling is a procedure that makes tiny holes in the ovary with a laser or thin heated needles to restore the normal ovulation. The another technique is Laproscopy technique. In this technique the 3 incision is made on the abdomen. The laproscop (type of rod like device, which is thin in size) is used to insert in the abdomen to see the cyst on the ovaries. It breaks the cyst into small.

G) Drugs Or medicaments used in the treatment of pcos: [18]

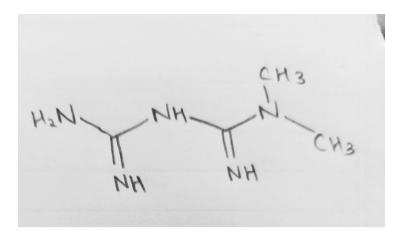
Birth control pills and other medicaments can help to regulate the menstrual cycle and treat the pcos symptoms like acne, and hair growth.

a) Birth control pills:

Taking progestin daily can restore a normal hormone balance. It can also regulate ovulation. It can also relevie the symptoms like excess hair growth. The main function of birth control pills is it protects against endometrial cancer. These harmone comes in pills, patches or vaginal ring.

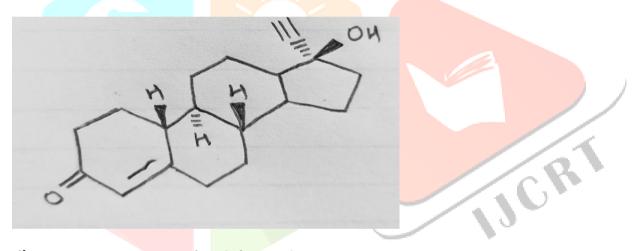
b) Metformin: N- nitrosodimethylamine(NDMA)

Metformin is a drug used to treat type 2 diabetes. It also treats pcos by improving insuline levels. It is also used to treat pcos.



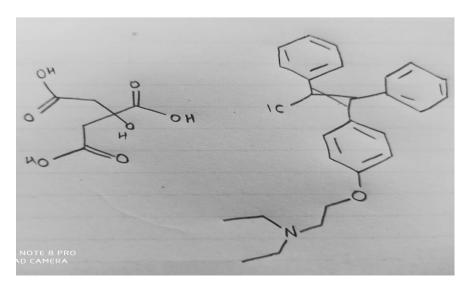
c) TAB GYNASET: Norethisterone

Gynaset is used to restore the hormone levels in body and regulates the growth and shedding of womb lining and helps to treat menstrual problems or disorder.



d) TAB CLOMIPHEHE: Clomiphene citrate

Its works by stimulating the release of eggs from ovary. Clomid is used for some type of infertility, in women who are not ovulating properly.



IVF(In-vitro fertilization):[17]

Invitro fertilization is a complex series of procedures used to help with fertility or to prevent genetic problems and assist with the conception of a child. IVF is the most trust worthy form of assisted reproductive technology. The procedure of IVF can be done using the persons own sperm and a egg. During IVF the mature eggs are collected from ovaries and they are fertilized by the sperm in a lab. After this the fertilized egg or an embryos are trasferred to the uterus. One full cycle of IVF time period is about 3 weeks. The chances of having health baby using IVF depends upon many factors such as the age of both mother and father, and other is the cause of infertility in that women. IVF can be time consuming, expensive, and invasive. If more than one embryo is transferred to the uterus, IVF can be resulted into multiple pregnancy.

A) Why the procedure of IVF is carried out:

IVF is offered as a primary treatment for infertility women over the age of 40. IVF can also be done if the person has certain health issues:

Fallopian tube damage or Blockage:

Fallopian tube damage or blockage can make the egg to fertilize or to travell the embryo from ovaries to uterus.

b) **Ovulation Disorder:**

If the ovulation is absent or infrequent, the fewer eggs are available for fertilization.

c) Endometriosis: Endometriosis can occur when the tissue lining of uterus implants and grows outside of the uterus often affecting the function ovaries uterus and fallopian tube.

d) Uteriene Fibroids:

Fibroids are tumors uterus. Fibroids can interfere with implantation of the fertilized egg.

e) Previous tubul sterilization or removal:

Tubul ligation is a type of sterilization process in which the fallopian tubes are cut or blocked to permanentaly prevent pregnancy. If a couple wish to concieve after tubul ligation, IVF may be the alternative to reverse the tubul surgery.

f) A Genetic disorder:

If a couple is risk of passing on a genetic disorder to their child, may be candidates for preimplantation genetic testing. After the eggs are collected and fertilized, they are checked with some genetic problem, although not all genetic problems are found . Embryos that don't contain identified problems can be transferred to uterus.

B) Risk of IVF:

- a) Multiple pregnancy
- b) Premature delivery and low birth weight.
- c) Ovarian hyperhyperstimulation syndrome Miscarriage
- d) Egg retrival procedure complication
- e) Ectopic pregnancy
- f) Birth defect cancer
- g) Stress

Conclusion:

Infertility is a health problem of considerable socio cultural and economic impact. It should be alleviated by several measures including health education, prevention, early diagnosis etc. History and physical examination and other specific diagnostic test will help to identify the cause of infertility.

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