SOCIAL ISSUES: CHANGES AND CHALLENGES

(Interdisciplinary View)

Edited by
Dr. M. MEENAKUMARI
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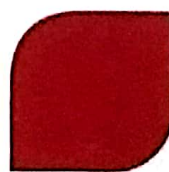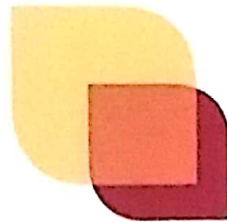**Dr. S. BALAKRISHNAN**

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SISTERS OF ST. JOSEPH OF LYONS INSTITUTION
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Re-Accredited with 'A' Grade by NAAC, 27th Rank in India Ranking 2017 (NIRF)
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CONTENT

PREDISPOSING FACTORS OF INFERTILTIY AMONG WOMEN

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Abstract

Infertility is a universal barrier affecting approximately 8-10% of married couples. It is a multidimensional problem with social, economic and cultural implications, which can take threatening proportions in countries with strong demographic problems. The present study investigates the predisposing factors of infertility in women of reproductive age and to give awareness on life style modifications. A total of 50 infertile females from an infertile center who are taking treatments were included. A validated questionnaire has been administered to collect the data pertaining to their socioeconomic profile, the causes of infertility, period of infertility, education, occupation and life styles modifications. Findings revealed that majority of the females (60%) belonged to reproductive age group. As to occupation status, 46% of the participants were household workers, 26% were employees in the private sector, 10% were employees in the public sector and 18% were selfemployee. Regarding educational status, 14% had finished primary school, 30% had finished high school, 16% were University graduates and 40% were illiterates. Most of the females belonged to low economic status (56%). Concerning the causes of infertility, 44% of the problems were due to polycystic ovarian syndrome, followed thyroid problems in 36% of the cases and 16% were due to disorders of menstruation. The causes of female infertility are problems in the fallopian tubes and the uterus, disorders of menstruation, sexual disorders, age and ovarian failure. Female infertility is a complex problem that should be considered carefully by the government and stakeholders in each country and especially by those countries with demographic problems, in order to find effective interventions and solutions. In conclusion it is stated that female infertility is a complex problem that should be treated early that can help to control long term problems.

Introduction

Our culture demands that, for a woman to be socially acceptable, she should have at least one biological child. Many infertile women in the developing countries who are without children, their lives are without hope. Infertility is becoming a health challenge in our country. It is estimated that globally 60-80 million couples suffer from infertility every year, of which probably between 15-20 millions (25%) are in India alone (Sharath KC et al, 2013). As per study, published by WHO, one in every four couples in developing countries had been found to be affected by infertility (Mascarenhas MN et al, 2012). According to the literature, infertility is not only due to health problems related to the fallopian tubes, the ovaries, and the endometrium, but it may also be a result of the choices imposed by the modern lifestyle, like the higher average age of people who get married, stress, non-conducive legal framework for assisted reproduction, etc (Gnoth C et al, 2005).

Infertility is on the rise in Tamil Nadu compared to other states in the country. The infertility rate in Tamil Nadu is higher than Bihar or Orissa as the people here spend more time on work, thus resulting in physiological imbalances and ovulation disorders, claims director of medical education. It is the right time to give awareness and they are the source to spread. Early diagnosis and treatment can help to control the symptoms and prevent long term problems. The magnitude of the problem calls for urgent action, particularly when in the majority of cases the infertility is avoidable. The purpose of this study was to investigate the causes of infertility in women of reproductive age and to give awareness on life style modifications.

Materials and Methods

The study population consisted of 50 infertile females who sought medical help and were selected by random sampling method. For data collection, a specially designed questionnaire for the purpose was used. A validated questionnaire has been administered to collect the data pertaining to their socioeconomic profile, the causes of infertility, period of infertility, education, occupation and life styles modifications. Medical history such as menstrual disorders and chronic diseases were also recorded. Awareness on life modifications was given to the selected infertile women.