CONCLUSION
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The present study was undertaken to evaluate the significance of antibodies against spermatozoal surface membrane antigens in female infertility.

A total of 106 women were studied. The study group comprised of 96 women having unexplained infertility, while 10 women with known fertility were taken as control group.

Out of 96 women, 11 (11.46%) showed the positive result in serum, while 26 women (27.28%) showed positive result in cervical mucus. Nine women showed sperm agglutinating activity in serum and cervical mucus both, 2 women had sperm agglutinating activity in sera only, while 17 women showed positive agglutination in cervical mucus only.

In brief it was concluded that -

1. Antisperm antibodies in serum or in cervical mucus had significant role in female infertility.

2. Cervix is definitely a local site for antibody production and a possible factor for infertility in women of unexplained etiology.
3. There is significant association between local and systemic immune reactions against spermatozoa in female infertility.

4. Local immune reaction persist for shorter time than systemic immune reactions, therefore the antibodies in cervical mucus may subsequently disappear whereas the antibodies in serum persist for much longer period.

5. Presence of antibodies had definite correlation with duration of infertility. Increasing duration of infertility had higher prevalence of positive cases.

6. Poor P.C.T. is a significant criteria for evaluating the immunological cause for infertility and significantly associated with sperm antibodies in cervical mucus.