

I N T R O D U C T I O N

INTRODUCTION

The problem of population control is at its brim of explosion and it is causing concern to all countries in the world. India, unfortunately is the worst affected because of a very high birth rate.

India possibly is the first country which has taken family planning programme on a governmental level. The administrator, Social worker, Economist and the Medical man have all joined together to face the difficult task.

Conventional contraceptives have stood the test of time and yet have a limited place in the family planning programme. However they are too mechanical and cannot be utilized with ease so we must have more hope in tubectomy.

Mini laprotomy was an improvement and more welcoming as patients had to stay in the hospital for 48 hours.

More the advent of laproscopic ligation more and more women are now coming forward and accepting ligation.

It has been seen that after tubectomy some percentage of these women suffer from menstrual irregularities which may develop at variable interval after the operation.

A number of papers have been published pointing out the increased incidence of menorrhagia, polymenorrhoea, and dysmenorrhoea after tubal ligation.

Different workers have explained menstrual disturb-

ances after abdominal ligation by functional disturbances (Corix 1962), appearance of dysfunctional uterine bleeding at earlier age (Chakravarty 1966) and disturbances in ovarian blood supply (Pandit 1961) but it is still remains to be decided that how far tubectomy per se can be held responsible for the menstrual irregularities.

Most of the worker's are of the opinion that in the number of cases of tubal sterilization menstrual irregularities are of dysfunctional uterine bleeding type and disturbance of hypothalamic pituitary arises due to mental dissatisfaction of the patient towards the method adopted for ligation.

It is essential to study the incidence and type of menstrual disturbances after tubal sterilization by commonly used methods of mini laprotomy & laproscopic ligation.

HENCE THE PRESENT STUDY IS CARRIED OUT WITH THE FOLLOWING AIMS-

- To study the incidence of menstrual irregularities after tubal sterilization.
- To find out the correlation between the menstrual irregularities and different factors i.e. - age of patient, Number of living children, Psychological attitude towards sterilization. Time of appearance of menstrual irregularities after tubal sterilization of motivation etc.
- To study the menstrual pattern in women after tubal sterilization.

- To study histopathology of endometrium in patients having menstrual irregularities.
- To study the vaginal cytology in patients having menstrual irregularities.