

A Study of Tubal Ligation in Teaching Institute.

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KEY WORDS : ·Abdominal tubal ligation, Laparoscopic tubal ligation, PPTL, Spinal Anaesthesia, General Anaesthesia.

ABSTRACT:

BACKGROUND: The objective of study was to study age profile of patients and reason for seeking sterilization , morbidity and complication of tubal ligation procedure **METHODS AND MATERIALS :** A study of 200 cases(100 cases of abdominal TL and 100 cases of Lap TL) of tubal ligation was conducted at tertiary care centre in 2 year duration. All patients were selected on basis of relevant antenatal history and operative procedure(modified pomerooy method) and operative time, post operative complication,type were recorded in preformed proforma. Maternal characteristic, reason for sterilization, type of anaesthesia, post op complication were analyzed. **RESULT :** In present study of 200 cases of Tubal Ligation, maximum number of patients come between 26-30 year with average age 29 year. In present study,most common reason for tubal ligation is desire for no more children and economic. Out of 60 PPTL 38 PPTL done after delivery of male child and 22 PPTL after female child. Mostly all abdominal tubal ligation done under spinal anaesthesia and laparoscopic tubal ligation done under general anaesthesia. In present study, nausea,spinal headache,backache,menstrual disturbance(22% in abdominal TL and 11% in laparoscopic TL) common in abdominal TL than laparoscopic TL. **CONCLUSION :** Female sterilization,typically accomplished by means of tubal ligation is widely used method of contraception that is highly effective at preventing unintended pregnancy. In all developed countries sterilization is generally performed by laparoscopic equipment,minilaparotomy may still be the most common approach. Though both methods are widely used,the advantages and disadvantages of laparoscopic sterilization compared to minilaparotomy have not seen systematically evaluated. Sterilization has 67.3% share of birth control methods used by India significantly higher proportion than other countries.

INTRODUCTION

Increasing population is burning problem of our country and world. India represent almost 17.85% of world's population.

- Current population 1.34 billion of India in 2017.
- Total no. of male population -69.7 crore in India.
- Total no. of female population -65.2 crore in India.
- Sex ratio 946 per 1000 males.

Some of reasons for India's rapidly growing populations are: Poverty, illiteracy, high fertility rate,rapid decline in death rates. India was 1st country in world to launch an official family panning program in 1952 primarily to reduce population growth. Female sterilization is the most widely used contraceptive method in the world. Trend of female sterilization has increased due to relaxation of age,parity and other requirement,special program run by government ,interest of physician,

development of new technique-minilaparotomy and laparoscopy.

AIMS

To study age profile of patients undergoing sterilization and to study reason for seeking sterilization, morbidity and complications of tubal ligation procedure.

METHODS AND MATERIALS

A study of 200 cases of tubal ligation was conducted at tertiary care centre in 2 year duration. All patients were selected on basis of relevant antenatal history and operative time,post operative complication,type of incision,associated procedure,post operative examination were recorded in preformed proforma. All delivered patients were thoroughly reviewed of criteria of sterilization,patients were speculated accordingly. Eligible candidates were counseled for permanent sterilization.

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RESULTS

1.AGE

AGE IN YEARS	ABDOMINAL TL		LAPAROSCOPIC TL	
	NO. OF PATIENT	PERCENTAGE (%)	NO. OF PATIENT	PERCENTAGE (%)
20-25	15	15	15	15
26-30	45	45	53	53
31-35	33	33	31	31
36-40	7	7	1	1
>40	0	0	0	0
TOTAL	100	-	100	-

Most of sterilization done between age group of 20-40 years. Maximum no. of patients come between 26-30 years-out of 100 cases of abdo TL 45 cases and out of 100 cases of lapTL 53 cases.

2. REASON FOR SEEKING STERILIZATION

REASON	ABDOMINAL TL	LAPAROSCOPIC TL
DESIRE NO MORE CHILDREN	78	72
ECONOMIC	8	7
BOTH ABOVE	10	8
CONTRACEPTIVE FAILURE	4	13
TOTAL	100	100

Most of patients desired sterilization because of 2 reason: 1. Desire for no more children 2.Economic 3 .Contraceptive failure.

3. ANAESTHESIA

ANAESTHESIA	ABDOMINAL TL		LAPAROSCOPIC TL	
	NO. OF PATIENT	PERCENTAGE (%)	NO. OF PATIENT	PERCENTAGE (%)
SPINAL	100	100	0	0
GENERAL	0	0	100	100
OTHER	0	0	0	0
TOTAL	100	-	100	-

Abdominal sterilization in all patients operated under spinal anaesthesia and laparoscopic sterilization operated under general anaesthesia.

4. CURRENT SCENARIO OF PPTL STUDY ON LAST CHILD SEX

PPTL DONE AFTER	MALE	FEMALE
LSCS	6	4
NORMAL DELIVERY	32	18
TOTAL	38	22

Out of 60 PPTL 38 PPTL were done after delivery of male child and 22 PPTL were done after delivery of female child.remaining 40 abdominal TL is interval TL.

5. POST OPERATIVE MORBIDITY

MORBIDITY	ABDOMINAL TL		LAPAROSCOPIC TL	
	NO. OF PATIENT	PERCENTAGE (%)	NO. OF PATIENT	PERCENTAGE (%)
NAUSEA	11	11	6	6
DIARRHOEA	-	-	-	-
FEVER	6	6	3	3
HEADACHE	8	8	0	0
HAEMORRHAGE	-	-	-	-
ABDOMINAL DISTENSION	2	2	-	-
BACKACHE	10	10	3	3
OTHERS	-	-	-	-

Chances of nausea,spinal headache and backache is more common in abdominal TL as compared to lap TL.

6. LATE COMPLICATION

COMPLICATION	ABDOMINAL TL		LAPAROSCOPIC TL	
	NO. OF PATIENT	PERCENTAGE (%)	NO. OF PATIENT	PERCENTAGE (%)
BACKACHE	12	12	-	-
ABDOMINAL PAIN	5	5	2	2
SCAR PAIN	5	5	0	0
MENSTRUAL DISTURBANCES	22	22	11	11
PSYCHOLOGICAL SYMPTOM	2	2	3	3
NEUROLOGICAL SYMPTOM	-	-	-	-

Menstrual disturbances,backache,abdominal pain and scar pain common in abdominal TL than laparoscopic TL.

DISCUSSION

India was 1st country in the world to launch an official Family planning program in 1952 primarily to reduce population growth..Prior to 1960, tubal ligation was generally performed only for medical indications. In 1823, Blundell 1st suggested tubal ligation for sterilization before the medical society of London. Female sterilization is most widely used contraceptive method in world. Government has published standard for female and male sterilization services in October 2006. According to this standard, age and living status of spouse not required, upper age limit of client 45-49 year,

atleast 1 healthy live issue above 1 year of age required and criteria for selection of client is done under Accept, Delay, Caution and special criterion. The survey conducted in India indicate only 48% couple adopt any contraceptive method to plan their family and sterilization is most accepted method. In our study of tubal ligation of 200 cases, average age for TL is 29 year and common reason for TL is desire for no more children and economic. Maximum PPTL done after delivery of male child. Mostly all abdominal TL done under spinal anaesthesia by modified pomerooy method and laparoscopic TL done under general anaesthesia.

CONCLUSION

Female sterilization, typically accomplished by means of tubal ligation is widely used method of contraception that is highly effective at preventing unintended pregnancy. In all developed countries sterilization is generally performed by laparoscopic equipment, minilaparotomy by modified pomeroy method may still be the most common approach. Though both methods are widely used, the advantages and disadvantages of laparoscopic sterilization compared to minilaparotomy have not been systematically evaluated. Sterilization is safe, cost effective, permanent form of contraception that is more common among women than men and most popular method of contraception in India. Sterilization has 67.3% share of birth control methods used by India significantly higher proportion than other countries with similar demographics.

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