E-Poster

Aetiology of subfertility among couples seeking treatment at a rural hospital in Sri Lanka

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Objective: This study aimed to describe the aetiology of subfertility among couples seeking treatment at DGH Mullaithivu

Design: It is a descriptive cross-sectional study conducted from June 2019 to June 2020 among couples who are seeking subfertility treatment at DGH Mullaithivu, Sri Lanka.

Method: Around 68 participants who came to the fertility clinic with a history of primary or secondary subfertility within the data collection period were recruited voluntarily for this study. An interviewer-administered questionnaire was used as a study instrument.

Results: In 68 couples 55.9% of them were primary subfertile and 44.1% of them were secondary subfertile with a history of subfertility ranging from 1 - 16 years. Among 68 couples 58.8% were new patients and 41.2% of them were follow-up patients. The age of females ranges from 20-47 years and the mean age is 31 years the age of males ranges from 22-55 years and the mean age is 33 years. This study revealed that most of them (82.4%) had ovulatory disorders as a cause for their subfertility and among them, 51.8% and 42.9% of couples were diagnosed with their clinical history and ultrasound scan respectively. Also, tubal (10.3%) and uterine (8.8%) causes were having less impact on subfertility. Only 13.2% of couples were having SFA abnormalities, especially with oligospermia. Among ovulatory disorders women 46.5% underwent only medical ovulation induction treatment and 46.4% underwent medical ovulation induction and laparoscopy drilling. 89.3% of the couple underwent Intra Uterine Insemination treatment.

Conclusion: This study revealed that ovulatory causes are the main reason to have subfertility and medical ovulation induction is the first line of treatment to overcome this issue. Hence awareness program needs to be arranged regarding subfertility and its causes and treatment modalities among health staff as well as among eligible couples to overcome the fertility problem in advanced for a better outcome.