# A CLINICAL FOLLOWUP STUDY OF 500 CASES OF Cu.T IN WESTERN RAJASTHAN

by

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After nearly two decades of use, the intrauterine devices remain a generally safe, effective and useful form of birth control. Despite the shortcomings, IUD has an important place in modern contraceptive practice and in national family welfare programme. The newly introduced IUD Cu.T has been proved as a effective and safe device. Therefore the present study was aimed to study the reactions and clinical followup of women who had accepted this device.

### Material and Methods

The study was conducted during January 1979 to September 1981 in the outpatient Department of Family Welfare, Umaid Hospital, Jodhpur attached to Obstetrics and Gynaecology department of Dr. S. N. Medical College.

The study consisted of 500 women who had Cu.T. inserted in the outdoor. These acceptors were followed up periodically

after 1 month, 3 months and 1 year after the insertion either in the centre or at their residence.

### Observations

A majority 432 (86.4 per cent) were Hindus, followed by 64 (12.8 per cent) Muslims. Only 4 (0.8 per cent) were reported to be Christian religion.

The average age of the women who had accepted Cu.T was 24.3 years. The maximum and minimum age was observed to be 58 and 17 years. A large number of women 305 (61 per cent) were in the age group of 20-25 years followed by 150 (30 per cent) in 26-30 years. It was evident that younger age group has more accepted this device.

As regards literacy status of acceptors 268 (53.6 per cent) had school education ranging from primary to matriculation. One hundred and seventeen (23.4 per cent) were graduates. Only 115 (23 per cent) women reported they were illiterate.

The educational status of their husbands was also observed. Two hundred and eighteen (43.6 per cent) reported having school education. 225 (45 per cent) had college education. Only 57 (11.4 per cent) were illiterates.

Two hundred and sixty (52 per cent)

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women belonged to business families, 247 (49.4 per cent) reported their husbands were serving either Central or State governments. As regards their own occupation only 63 women were working whereas remaining were housewives.

Table I shows that 195 (39 per cent)

sertions of Cu.T was a change in uterine bleeding pattern as shown in Table II. Nearly 77 (12.8 per cent) in the present study complained of excessive bleeding during periods and in between. In 8 women pregnancy occurred following Cu.T insertion accounting for 1.6 per cent

TABLE I

No. of Living Children		1	2	3	4	5 + Tota	7
No. of cases	-	150	195	95	18	25 500	)
Percentage		30	39	19	7	5	

women had two living children and reported the limitation of children as the reason for accepting it. One hundred and fifty (30 per cent) had only 1 child and accepted Cu.T for proper spacing. Remaining 155 (31 per cent) women had more than 3 children.

Out of 500, 170 (34 per cent) women got Cu.T inserted immediately after M.T.P and 130 (26 per cent) Cu.T were inserted in interval periods. Two hundred (40 per cent) had a post partum insertion.

One of the most frequent complication reported by the acceptors following the in-

failure. 64 wopen (12.8 per cent) and 71 (14.2 per cent) complained of pain in abdomen, backache and vaginal discharge respectively.

Out of 500 acceptors followed, 158 (31.6 per cent) women had removed Cu.T for various reasons. Of them 73 (46.2 per cent) removals were due to medical complications. It was observed that excessive bleeding accounted for the greatest number of women discontinuing the use of Cu.T, influences the use of effectiveness of the device. Fifty-eight (36.1 per cent) removed desired pregnancy as shown in Table III.

TABLE II Complications

Excessive bleeding       77       15.4         (a) Menorhagia       52       12.4         (b) Metrorhagia       15       3.0         Expulsion       12       2.4         Pelvic infection       64       12.8         Cervical erosion       22       4.4         Vaginitis       59       11.8	Types of Complications	No. of women	Percentage
(a) Menorhagia       52       12.4         (b) Metrorhagia       15       3.0         Expulsion       12       2.4         Pelvic infection       64       12.8         Cervical erosion       22       4.4         Vaginitis       59       11.8		and a second and a second and a second as a second	
(b) Metrorhagia       15       3.0         Expulsion       12       2.4         Pelvic infection       64       12.8         Cervical erosion       22       4.4         Vaginitis       59       11.8	Excessive bleeding	77	15.4
Expulsion         12         2.4           Pelvic infection         64         12.8           Cervical erosion         22         4.4           Vaginitis         59         11.8	(a) Menorhagia	52	12.4
Pelvic infection         64         12.8           Cervical erosion         22         4.4           Vaginitis         59         11.8	(b) Metrorhagia	15	3.0
Cervical erosion 22 4.4 Vaginitis 59 11.8	Expulsion	12	2.4
Vaginitis 59 11.8	Pelvic infection	64	12.8
	Cervical erosion	22	4.4
Total 500	Vaginitis	59	11.8
300	Total	500	

TABLE III
Reasons for Removals

ypes of Reasons	No. of women	Percentage
MEDICAL		·
Menorrhagia	17	3.4
Metrorrhagia	14	2.8
Pelvic infection	19	3.8
Pregnancy	12	2.4
Missed thread	8	1.6
Cervical erosion	3	8.6
B. NON-MEDICAL		
Wants Children	58	11.6
Change to other methods		
- Oral Contraceptives	6	1.2
<ul> <li>Steralisation</li> </ul>	7	1.6
Re-insertion	12	2.4
Menopause	2	0.4

## Discussion

From the preeceding observations, it can be inferred that Cu.T is safe and effective. Tatum (1972) reported better effectiveness with Cu.T device. Excessive uterine bleeding was the most common complaint and occurred in 77 (15.4 per cent) women. Deshmukh et al (1977) and Randhawa et al (1981) had low incidence of bleeding in Cu.T cases with Lippes Loop insertion. Sivin (1973), Alwani et al (1978) and Randhawa (1981) had 9.78 per cent, 4.1 per cent and 4.9 per cent respectively.

High incidence of bleeding can be explained that menstruation is usually heavy after M.T.P. or abortion. Landesman et al (1973) however reported that post insertion in M.T.P. cases has no influential effect due to abortion or M.T.P. Removal rate due to bleeding in this study was 6.2 per cent whereas Lewit (1973) and Randhawa (1981) observed 6.4 per cent and 6.51 per cent respectively.

In the present study, the explosion rate

was 2.4 per cent while Tatum (1972), Alwani (1978) and Randhawa *et al* (1981) had 7.2 per cent, 5.2 per cent and 3.25 per cent respectively.

Timon et al (1972) showed explusion rate of 7 per cent even in his post M.T.P. cases after one month and there was no difference in severity of pain or other complications in such cases.

The corrected removal rate was 14.6 per cent, Gulati and Majumdar (1975), Deshmukh *et al* (1977), Randhawa *et al* (1981) had removal rate of 12, 6.4 and 12.2 per cent respectively.

In the present study, pregnancy rate was 1.6 per cent coinciding with Randhawa et al (1981) who showed 1.54 per cent failure rate.

The other complications pelvic infection, veginitis and cervical erosion were 12.8, 11.8 and 9.4 per cent respectively.

Paps smear was taken in 62 per cent of cases, of which 30 per cent showed inflammatory change and remaining showed normal cytological pattern with no evidence of dysplasia. Tatum (1972) re-

ported 6000 women with Cu.T who were checked with papanicolau smear had no evidence of premalignant or malignant lesion in the cervix or endometrim.

### Summary

Five hundred cases of Cu.T insertion were studied. Complications and removal rate were observed to be less in comparison to other studies carried out by various workers in different parts of India. Bleeding was main complication found after M.T.P. and abortion.

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