

A CLINICAL FOLLOW UP STUDY OF CU-T AS I-U-DEVICE

by
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SUMMARY

It is a retrospective study of 1020 Cu-T insertions of which 350 cases could be followed up.

Menstrual irregularity is the main common complaint among Cu-T users.

Besides the common complications like abnormal bleeding, whitish discharge, backache, pain in lower abdomen and pregnancy, there were 2 cases of ectopic pregnancy and 1 case of allergic rash in our series.

Introduction

Intrauterine device is still considered to be safe, cheap and effective method of birth control. Lippes loop has fallen in its reputation now due to so many reasons, so our women show much interest if they hear of a new device like Cu-T, and accept it easily. Besides, due to the presence of copper, this device has increased antifertility effect. Here we have studied clinically the cases of Cu-T users in our hospital.

Material and Methods

It is a retrospective study of 1020 patients accepting Cu-T as contraceptive measure in our family Welfare Centre, VSS Medical College Hospital, Burla, Orissa. All the Cu-T inserted from the year 1974 to 1984, for a period of 11 years are included in the study. But follow-up could be made only in 350 cases. Such

patients were those who attended the Outdoor on their own accord, some were brought by our family planning staff and some indoor patients of our Obstetrics Ward were also included. Patients were followed up by house to house visit also.

Observations

In the early years of our series very few women accepted Cu-T which might be due to the ignorance and lack of publicity of the new device. After 1976, there was increased acceptance of Cu-T (Fig. 1). The hospital is mainly a referral hospital, so the yearly insertion of Cu-T is low from other hospitals of the country.

The age of women accepting Cu-T varied from 18 to 40 years. Maximum number of patients i.e. 780 (77 per cent), were of age group 21 to 30 years.

Out of 1020 Cu-T inserted (Table III) maximum insertions were interval insertions, i.e. 2 months after delivery and before the next pregnancy. It varied from more than 2 months to 7 years of

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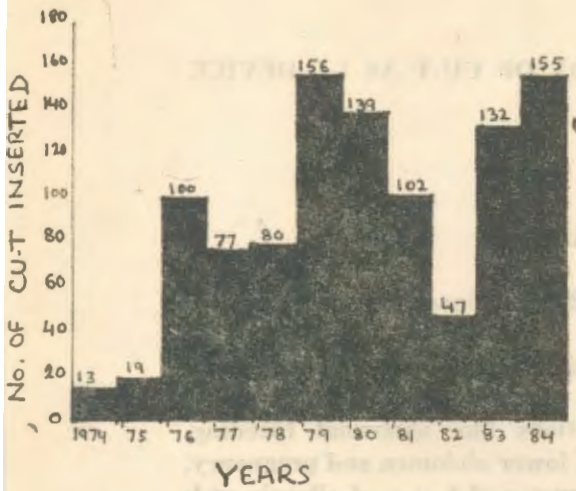


Fig. 1

last child birth. Eight hundred fifty (83.2 per cent) insertions were made during this period. Immediate after delivery 10 (1 per cent) cases accepted Cu-T and within 2 months of delivery 72 (7 per cent) women were inserted with

Cu-T. After M.T.P. mainly suction evacuation 60 (6 per cent) women were motivated to accept Cu-T. 20 (2 per cent) cases of newly married women preferred Cu-T to prevent pregnancy and 8 (0.8 per cent) insertions were exchange insertions.

In the present study, out of 350 cases 105 (30 per cent) cases (Table I) had no complaints. Among the complaining group maximum number of patients i.e. 39 (11.1 per cent) cases came for of menstrual irregularity. They were in the form of menorrhagia, metrorrhagia, continuous bleeding, spotting dysmenorrhoea and amenorrhoea. Menorrhagia was common with patients after M.T.P. and puerperal insertion of Cu-T. In interval insertion spotting type of bleeding were more common. One case developed amenorrhoea with atrophic endometrium for 1½ years and it responded to sequential hormone therapy. Whitish discharge was noticed in 60 (17 per cent) women. Backache

TABLE I
Common Complaints
Total number of cases 350

Type of complaints	Number	Percentage
1. No complaint	105	30
2. Menstrual abnormality	39	11.1
(a) Menorrhagia	16	
(b) Metrorrhagia	7	
(c) Continuous bleeding	2	
(d) Spotting	10	
(e) Dysmenorrhoea	3	
(f) Amenorrhoea	1	
3. Whitish discharge	60	17
4. Backache	100	28.6
5. Pain in lower abdomen	35	10
6. Pregnancy	8	2.3
(a) Uterine	6	
(b) Extrauterine	2	
7. Allergic rashes	1	0.3
8. Expulsion	6	1.7

Note—Some women had more than one complaint.

was a common complaint in 100 (28.6 per cent) cases. Pregnancy with Cu-T either uterine or extra-uterine was noticed in 8 cases. In 1 case allergic rash with pruritus of whole body occurred. In 6 cases (1.7 per cent) there was spontaneous expulsion of Cu-T. More than one complaints were observed in some of the women.

Discussion

Cu-T is a good effective and safe contraceptive device. Its maximum side effect as observed from our study is abnormal bleeding, which is also the opinion of other workers like Mathur *et al* (1984), Randhawa (1981). The incidence of heavy bleeding was more after M.T.P. and post-delivery insertion of Cu-T. Besides, the following causes enumerated by Revathi (1980) like abrasion of endometrium, increased vascularity of endometrium, foreign body reaction, capillary fragility pre-existing uterine pathology like adenomyosis etc. may contribute for abnormal bleeding. Treatment with styptics, vitamin C, antibiotics etc. are advised before removal.

Table II shows the cause of removal of Cu-T. The main reason for removal of Cu-T was abnormal bleeding in 21 (6.8 per cent) cases. Two cases had severe vaginitis. In 8 cases (2.3 per cent) failure occurred. Of the 8 pregnancies due to failure, one continued till term with Cu-T, and in 5 cases suction evacuation was done. Two cases were ectopic pregnancy, where laparotomy was done. Eight patients removed Cu-T to have pregnancy. Though backache was a common complaint in 100 patients only 2 cases insisted for removal of Cu-T and rest continued. Among the 5 cases of displaced Cu-T, 2 were perforations needing laparotomy and others were removed vaginally. One case of allergic rash was relieved after removal of Cu-T. Two cases removed Cu-T and underwent tubal ligation. Eight insertions were exchange of Cu-T after completion of 2½ to 3 years.

In this series, 49 Cu-T out of 350 cases (14 per cent) were removed which is quite higher than Randhawa's (1981) 9.43 per cent removal. The main cause of removal is bleeding where some of the women insisted for its removal before taking any treatment or waiting for some months. The pregnancy rate in our series is 2.3% which is slightly higher than that of Randhawa (1981) and Mathur (1984), i.e. 1.54% and 1.6% respectively.

TABLE II
Cause of Removal of Cu-T (Out of 350)

Causes	No. of cases	Percentage
1. Abnormal bleeding	21	6.8
2. Infection	2	0.6
3. Failure	8	2.3
4. Wanted pregnancy	8	2.3
5. Backache	2	0.6
6. Displacement	5	1.4
7. To adopt other method	2	0.6
8. Allergic rash	1	0.3
9. Exchange of Cu-T.	8	2.3
Total	57	16.3

