COMPARATIVE STUDY OF M.T.P. WITH IMMEDIATE CU-T 200 INSERTION AT THE TIME OF M.T.P. AND INTERVAL CU-T 200 INSERTION

By

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SUMMARY

100 patients were studied from the out patient department of Dayanand Medical College and Hospital, Ludhiana. These were divided into two groups of 50 patients each namely M.T.P. with immediate post abortal insertion of Cu-T and interval Cu-T. Patients were followed for 3 months and complications were compared in each group. No case had any serious side effect. Menorrhagia and backache were the main complaints. The results were statistically insignificant. As the accepability of IUCD is higher in the immediate post abortal period it was concluded that IUCD should be advocated alongwith M.T.P. whenever spacing is desired.

Introduction

Volunteers for M.T.P. are already in a better state of self-motivation for use of some contraceptive method. There are few reports in the literature on the immediate post abortal insertion of IUCD as the fear of infection, greater risk of perforation and expulsion prevented its more frequent use. Keeping this in mind complications in two groups of patients comprising of M.T.P. with immediate post abortal Cu-T insertion and interval Cu-T are compared.

Material and Methods

100 patients were taken from the patients attending the Gynaec. & Obstet. O.P.D. of D.M.C. & Hospital, Ludhiana.

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Accepted for publication on 18-3-87.

There were divided into two groups of 50 patients each. Group A comprised of patients in whom Cu-T was inserted immediately after completion of M.T.P. Group B were cases of interval Cu-T insertion. Patients in each group were asked to report after 1 week, one month and three months of procedure. There were asked about ony complications like vaginal bleeding, backache, pain abdomen, vaginal discharge, expulsion, conception, need for removal of Cu-T and perforation of uterus.

Observations

Table I shows distribution of cases according to number of living children. This shows that the maximum number of cases in each group were with 1 or 2 living children.

Table II shows event rates after 1 week in each group. This shows that abnormal

TABLE I

Distribution of Cases According to No. of Living

Children

	Chi	MITEL		
No. of Living Children	Group No.	A %	Group No.	р В %
0	2	4	0	0
1	13	26	17	34
2	27	54	23	46
3	6	12	5	10
4	2	4	5	10
5	0	0	0	0
6	0	0	0	0
Total	50	100	50	100

bleeding per vaginum and backache were the main complications in each group. No patient expelled the Cu-T and there was no case of perforation of uterus noticed during this period.

Table III shows event rates after 1 month. It shows that abnormal uterine bleeding especially in the form of menorrhagia was present in 36% cases of Group A and 28% of Group B.

Table IV shows the event rates after 3 the end of the 6 monhs was present in months. It shows that the incidence of 14.8% cases of post abortal IUCD group

menorrhagia decreased significantly in each group at the end of 3 months.

Discussion

Patients in each group were similar in their age distribution, rural and urban ratio, religion, education, occupation, parity and socio-economic status.

Menstrual disorders and backache were the main complications in both the groups. Their incidence decreased with passage of time. Menstrual disorders were found to be present in 36% cases of group A, as compared to 28% of Group B after 1 month while its incidence decreased to 6% in Group A and 2% in Group B after 3 months. The results were statistically insignificant. Our findings were in accordance with those of Nag and Eduljee (1978), Shanta Jha and Manju Bala (1983). Nag and Eduljee studied 620 cases of immediate post abortal IUCD insertion and concluded that there were no serious side-effects of IUCD insertion in immediate post abortal period. Menorrhagia at the end of the 6 monhs was present in

TABLE II Event Rates After One Week

BYo		Group	Group A		B
. No.		No.	%	No.	%
1.	Bleeding				
	Spotting	9	18	3 -	6
	Moderate	9	18	4	8
	Severe	7	14	4	8
2.	Backache	15	30	11	22
3.	Infection		_	lead to the same	-
4.	Pain in abdomen	9	18	6	12
5.	Vaginal Discharge	3	6	1	2
6.	Expulsion		_	THE OF THE PARTY	_
7.	Removal				
	Medical	1	2	2	4
	Social	0	0	0	0
8.	Perforation	0	0	0	0
9.	Conception	0	0	0	0

TABLE III
Event Rates After One Month

r. No.	Event	_	Group A		Group B	
		No.	%	7,100	- 170	
1.	Bleeding					
	Spotting	0	0	0	0	
	Moderate	7	14	5	10	
	Severe	11	22	9	18	
2.	Backache	10	20	6	12	
3.	Infection	2	4	1	2	
4.	Pain in abdomen	10	20	3	6	
5.	Vaginal Discharge	2	4	5	16	
6.	Expulsion	2	4	0	0	
7.	Removal					
	Medical	2	4	2	4	
	Social	0	0	0	0	
8.	Perforation	0	0	0	0	
9.	Conception	- 0	0	0	0	

TABLE IV
Event Rates After 3 Months

Sr. No.	Event	Group A	Group B
		No. %	No. %
1.	Bleeding	[
	Spotting	0 0	0 0
	Moderate	2 4	0 0
	Severe	1 2	1 2
2.	Backache	4 8	5 10
3.	Infection	2 4	2 4
4.	Pain abdomen	5 10	3 6
5.	Vaginal Discharge	0 0	4 8
6.	Expulsion	1 2	2 4
7.	Removal		
	Medical	4 8	1 2
	Social	1 2	0 0
8.	Perforation	0 0	0 0
9.	Conception	0 0	0 0

in comparison to 27.6% cases of interval IUCD group. Shanta Jha and Manju Bala found menstrual disorders as a side-effect of Cu-T in 3.6% cases of post abortal Cu-T group in comparison to 2.7% cases of interval Cu-T group.

Backache was present in 20% cases of Group A, 12% of Group B at one month follow up reports. After 3 months its incidence was 8% in group A and 10% in Group B. Here also results were statistically insignificant. Backache was the chief complaint of 10.13% of IUCD users in a study of Purandare and Kulkarni (1975) and of 1.6% of cases studied by Ravathi (1980).

In this study expulsion of IUCD occurred in 6% cases of Group A (4% expelled

TABLE V
Comparison of Expulsions and Remarks

	Expulsion MTP with Cu-T	Interval Cu-T	MTP with Cu-T	Interval Cu-T
Nag & Eduljee (1978)	10.1%	8.5%	10.8%	18.5%
Shanta Jha & Manju Bala (1983)	6.9%	5.1%	10.5%	9.0%
Present study	6.0%	4.0%	16.0%	10%

their Cu-T in first month and 2% in next month) and in 4% of cases with interval Cu-T, Goldsmith et al (1972) have shown the expulsion rate in post abortal group as 7.5%. Cu-T 200 had to be removed in 16% cases of immediate post abortal Cu-T group as compared to 10% cases of Group B. Major cause for removal in all cases were excessive bleeding except in 1 patient of group A who wanted removal due to social reasons after one month of insertion. Similar results of expulsion and removal have been reported by Nag and Eduljee (1978) and Shanta Jha and Manju Bala (1983)

(Table V). There was no case of perforation of uterus and none of the cases got pregnant while having Cu-T 200 in place.

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