

CHAPTER → 4

REPRODUCTIVE HEALTH



* Reproductive Health → Total well being with respect to all aspects of reproduction like **physical, emotional, behavioral** and **Social**.

→ A society with people having **physically** and **functionally** normal reproductive organs as well as normal interactions with respect to behavior and emotion among them is **reproductively healthy**.

* Reproductive Health - Problems and Strategies →

→ India was amongst first countries → action plans, programs to attain **reproductive health as social goal**.

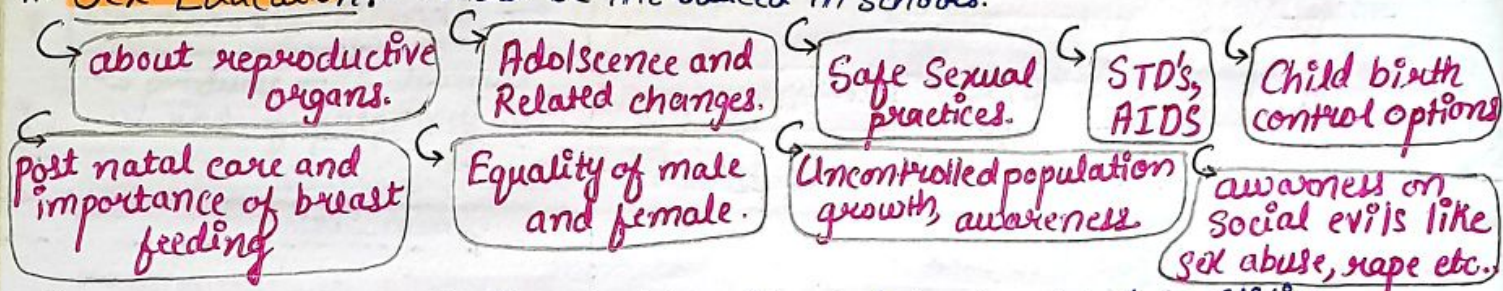
→ **Family Planning → 1951**

→ Reproductive and Child Health Care (RCH) programmes → creating awareness among people, supporting, providing facilities for bringing reproductive healthy society.

→ They took help of **audio visual** and **print media**.

→ Parents, Relatives, teachers, friends had a major role.

* Sex Education → must be introduced in schools.



→ To attain reproductive Health → Strong infrastructural facilities, professional expertise, material support.

→ Essential for reproduction related problems like pregnancy, delivery, STD's, abortions, contraceptions, menstrual problems, infertility etc..

* Amniocentesis → ① (Statutory Ban) for sex determination.

(↑↑ menace of female foeticide).

② Amniocentesis → Amniotic fluid of developing foetus is taken to analyze foetal cells and dissolved substances.

③ Various genetic disorders (Down Syndrome, Haemophilia, Sickle Cell Anaemia etc..)

* All these helped in →

① ↓↓ Maternal and infant mortality rate.

② ↑↑ couples with small families.

③ Better detection and cure of STD's.

④ ↑↑ medical facilities for all sex related issues.

**NEET
SLAYER**

* Birth Control

* World Population.

2 Billion → 6 Billion → 7.2 Billion
(1900) (2000) (2011)

* In India.

350 Million → approx 1 Billion → 1.2 Billion
(1947) (2000) (May 2011)

Due to ↓ in death rate, maternal and infant mortality rate and ↑ in people of reproductive ages.



* Reproductive Child Health (RCH)

→ Help to decrease population growth rate (only marginal)

* 2011 Census Report :-

→ population growth rate ($< 2\%$)

→ Motivate families to use contraceptives. → Hum do, Humare do.

→ One child Norm, Small families.

→ 18 yrs (female) 21 yrs (Male).

* Natural/Traditional * Contraceptive Methods *

- Barrier
- IUD's
- Oral Contraceptives
- Injectables
- Implants
- Surgical Methods.

- User Friendly
- Easily Available
- No/less Side effects
- No interference in sexual desire
- Effective
- Reversible.

* Natural Methods :-

- Chances of failure ↑.
- No side effects
- avoid chances of Ovum and sperm meeting.

① Periodic Abstinence :-

Avoid Coitus from 10-17 day of cycle.
Ovulation is expected.

② Withdrawal / Coitus Interruptus

Penis is withdrawn just before ejaculation.

③ Lactational Amenorrhoea :-

During lactation → No cycle
↓
No Ovulation.

Effective upto 6 months at max.

* Intra Uterine Devices.

- Ideal and most accepted.
- ↑ phagocytosis of sperms.
- Inserted in uterus by Dr/Nurse.

① Non-Medicated IUD's → Lippes Loop.

② Copper Releasing IUD's → CuT, Cu7, Multiload 375.

* Barriers :- physical meeting of sperm and ovum prevented.

① Condoms :- Thin rubber/latex sheath. Covers penis, Vagina, Cervix.

- Ejaculated semen won't enter female reproductive tract.
- Disposable.
- Gives privacy to users.
- No side effects → For males
- Use ↑ in recent years.
- prevents from STI's, AIDS.

② Diaphragms, cervical Caps and Vaults :-

- Made of Rubber.
- Inserted in female reproductive tract to cover cervix during coitus.
- Prevent conception by blocking entry of sperms through cervix.
- Reusable.
- Spermicidal Creams, Jellies, foams additionally increases efficiency.



③ Hormone Releasing IUD's → progestasert, LNG-20

④ Cu ion → suppresses sperm motility and fertilizing capacity.

⑤ Hormone Releasing IUD's → make uterus unsuitable for implantation and cervix hostile.

* Oral Pills

- progesterone / progesterone-estrogen combination in tablet form.
- Taken daily for 21 days, starting within first 5 days of cycle.
- Break of 7 days, and then again.
- Inhibits Ovulation & Implantation.
- Alter cervical mucus to retard sperms.
- Very effective, less side effects.
- Saheli → CDRI Lucknow (non-steroidal)
- Once a week pill.

* Injections / Implants (under skin)

- progesterone alone or with estrogen.
- Mode of action similar to pills.
- Effective period is long.

* Emergency Contraceptives

- progesterone / progesterone-estrogen / IUD's within 72 hours very effective.

* Surgical Methods. (Sterilisation)

Vasectomy (Males)

Small part of Vas-deference is removed or tied up by small incision on scrotum.

Tubectomy (females)

Small part of fallopian tube removed or tied up by small incision in abdomen through vagina.

- Terminal Method.
- Blocks gamete transport.
- Highly effective.
- Poor Reversibility.

* Some ill effects:

- Nausea, abdominal pain, breakthrough, bleeding, irregular bleeding, breast cancer.
- Not very significant.

* Medical Termination of Pregnancy (MTP)

- ↳ Intentional / Voluntary termination. (Induced abortion)
- ↳ 45-50 million MTP's in Year (in world)
- ↳ 1/5th of total conceived pregnancies.
- ↳ MTP was allowed after considering emotional, ethical, religious and social issues.
- ↳ #1971 (India) → MTP legalised with strict condition. (as female foeticide ↑↑)

- ↳ Can be terminated within 12 weeks → 1 registered practitioner.
- ↳ More than 12 weeks-24 weeks → 2 registered practitioners.
- ↳ ① Woman → Life Risk.
- ↳ Injury to physical / Mental Health.

- ② Child born → Physical / Mental abnormalities.
- ↳ Seriously handicapped.

- ③ Get rid of Unwanted Pregnancies.
- ↳ Unprotected Intercourse
- Failure of Contraceptive.

* Sexually Transmitted Infections

- Diseases through Sexual Intercourse
- Venereal Diseases
- Reproductive Tract Infections.

① Gonorrhoea

② Syphilis

③ Genital herpes

④ Genital Warts

⑤ Chlamydis

⑥ Trichomoniasis

⑦ Hepatitis-B

⑧ AIDS

Due to sharing injection needles, Surgical instrument
Transfusion of blood from mother → child.

- Hepatitis-B
- Genital Herpes
- HIV

Not curable.

All others curable, if detected early.

- Early Symptoms → Itching, fluid Discharge, Slight pain, swelling in genital tract.

• Sometimes Undetected / Social Stigma for STD's can lead to pelvic inflammatory diseases, abortions, still brains, ectopic pregnancies, infertility, Cancer.

- 15-24 yrs (Most Vulnerable) → Avoid Sex with multiple partners.
- Use Condoms. → Go to qualified doctors.

- * Infertility: → Inability to conceive after 2 yrs of Unprotected Sexual Cohabitation.
- Can be due to physical, congenital diseases, drugs, immunological, even psychological.
 - Usually found more in male partners.
 - Corrective Treatments → Assisted Reproductive Technologies (ART)
 - By specialised professionals and expensive.
 - Only in very few centres of countries.
 - Only available to limited no. of people.
 - Go for legal adoption. (better for country and couple).

* Assisted Reproductive Technologies. (ART).

IN-VITRO

- Outside body, followed by embryo transfer.
- Test tube program.
- Ova + Sperm → Zygote (donated)

① ZIFT. (Zygote Intra Fallopian Tube)

Zygote upto 8 blastomeres → Fallopian Tube.

② IUT. (Intra Uterine Transfer).

Zygote more than 8 blastomeres → Uterus.

③ ICSI. (Intra Cytoplasmic Sperm Injection).

Sperm → Cytoplasm of Ova.

IN VIVO

- Inside body, for females who can't conceive.

① GIIFT (Gamete Intra fallopian transfer)

Ovum from donor → Recipient female who can't produce Ovum.

② AI (Artificial Insemination)

Semen from husband/donor → Vagina/ Uterus of healthy mother

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