Harsukh Educational Charitable Society International Journal of Community Health and Medical Research

Journal home page:www.ijchmr.com doi: 10.21276/ijchmr

ISSN E: 2457-0117 ISSN P:2581-5040

Index Copernicus ICV 2017=57.10

Original Research

Determination of causes of abortion in cases reported to department- A retrospective study

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ABSTRACT:

Background: Miscarriage is defined as spontaneous loss of pregnancy before period of viability. The present study was conducted to assess various causes of abortion in females. **Materials & Methods:** The present study was conducted on 130 cases of abortion. Information such as types of abortions, type of contraceptive used after abortion done, types of procedure, reason for termination of pregnancy for safe abortion etc. were recorded. **Results:** Age group 18-22 years had 65 patients, 23-26 years had 45, 26-29 years had 12 and >30 years had 8. The difference was significant (P< 0.05). The common reason for abortion was medical illness in 70, economical reason in 48, mental illness in 2 and fetus congenital anomaly in 10. The difference was significant (P< 0.05). **Conclusion:** Common reason for abortion was medical illness, economical reason, mental illness and fetus congenital anomaly.

Key words: Abortion & Miscarriage

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This article may be cited as: Unnati R. Determination of causes of abortion in cases reported to department- A retrospective study. HECS Int J Comm Health Med Res 2019; 5(1):58-60.

INTRODUCTION

Abortion is expulsion of fetus/products of conception from uterus before period of viability i.e: 24 week of gestation.¹

Miscarriageis defined as spontaneous loss of pregnancy before viability. It was stated that it is the expulsion of the fetus before the 24th week of pregnancy, i.e. before the fetus is viable. The two definitions above seem to agree onthe meaning of miscarriage. They all agree that it is the loss of pregnancy, though they usedifferent terms to describe. Therefore, researcher defines miscarriage as a loss of pregnancy before 24thweek gestation when the fetus has not yet achieved its viability.

Worldwide, the most commonly reported reason women cite for having an abortion is to postpone or stop childbearing. The second most common reason—socioeconomic concerns—includes disruption of education or employment; lack of support from the father; desire to provide schooling for existing children; and poverty, unemployment or inability to afford additional

children. Women's characteristics are associated with their reasons for having an abortion.⁵ The present study was conducted to assess various causes of abortion in females.

MATERIALS & METHODS

The present retrospective study was conducted in the department of Gynaecology. It comprised of 130 cases of abortion which reported to the department in one year. All were informed regarding the study and written consent was obtained. Ethical clearance was obtained prior to the study.

General information such as name, age, gender etc. was recorded. Information such as types of abortions, type of contraceptive used, types of procedure, reason for termination of pregnancy for safe abortion etc. were recorded. Results thus obtained were subjected to statistical analysis. P value less than 0.05 was considered significant.

RESULTS

| Age group (years) | Number | P value |
|-------------------|--------|---------|
| 18-22 | 65 | 0.01 |
| 23-26 | 45 | |
| 26-29 | 12 | |
| >30 | 8 | |

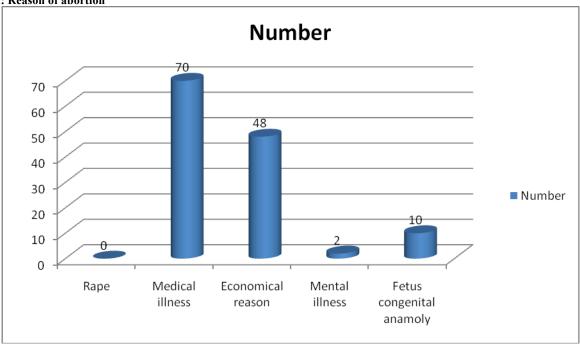
Table I shows that age group 18-22 years had 65 patients, 23-26 years had 45, 26-29 years had 12 and >30 years had 8. The difference was significant (P< 0.05).

Table II Reason of abortion

| Reason | Number | P value |
|--------------------------|--------|---------|
| Rape | 0 | 0.01 |
| Medical illness | 70 | |
| Economical reason | 48 | |
| Mental illness | 2 | |
| Fetus congenital anamoly | 10 | |

Table II, graph I shows that common reason for abortion were medical illness in 70, economical reason in 48, mental illness in 2 and fetus congenital anomaly in 10. The difference was significant (P< 0.05).

Graph I: Reason of abortion



DISCUSSION

The possibility that abortion might have mental consequences has been widely investigated in the last few years. The same concerns apply also to miscarriage; therefore psychological support has been advocated for women who experience a fetal loss, either induced or involuntary. The psychological drawbacks of abortion have been studied in order to offer complete information to the women who hesitate when facing a difficult pregnancy. In the last few years, these studies have become more and more frequent, and a constant update of research evidence in this field is needed.⁶ Reasons for procuring induced abortions are typically characterized as either therapeutic or elective. An abortion is medically referred to as at therapeutic abortion when it is performed to save the life of the pregnant woman; prevent harm to the woman's physical or mental health; terminate a pregnancy where indications are that the child will have a significantly increased chance of premature morbidity or mortality or be otherwise disabled; or to selectively reduce the number of fetuses to lessen health risks associated with multiple pregnancy. The present study was conducted to assess various causes of abortion in females.

In present study, age group 18-22 years had 65 patients, 23-26 years had 45, 26-29 years had 12 and >30 years had 8. Reardon et al⁸ found that 13 studies showed a clear risk for at least one of the

reported mental problems in the abortion group versus childbirth, five papers showed no difference, in particular if women do not consider their experience of fetal loss to be difficult, or if after a fetal reduction the desired fetus survives. Only one paper reported a worse mental outcome for child bearing. Abortion versus unplanned pregnancies ending with childbirth: four studies found a higher risk in the abortion groups and three, no difference. Abortion versus miscarriage: three studies showed a greater risk of mental disorders due to abortion, four found no difference and two found that short-term anxiety and depression were higher in the miscarriage group, while long-term anxiety and depression were present only in the abortion group.

We found that common reason for abortion were medical illness in 70, economical reason in 48, mental illness in 2 and fetus congenital anomaly in 10.

Even miscarriage is a risk factor for subsequent mental illness, although the evidence for this risk has not been investigated so widely and seems lower than for abortion. Some consequences can be drawn. The first is that fetal loss is traumatic. It is a risk factor for mental illness – both in the case of abortion and in miscarriage – and its impact on a woman's life can erroneously be underestimated. Most studies show that abortion has a greater impact on women's mental health than childbearing; all remaining studies show similar mental consequences and only.

CONCLUSION

Authors found that common reason for abortion were medical illness, economical reason, mental illness and fetus congenital anomaly.

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