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Infertility and depression

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Abstract

According to WHO in worldwide 60 to 80 million infertile couples are there, and also estimated in India 10 to 15% of couples were infertile. Researchers have also looked into the psychological impact of infertility and of the prolonged exposure to intrusive infertility treatments on mood and wellbeing. Infertile women feel anxious, irritable or low in self-esteem, and racing thoughts, worry constantly or go over things in her head. This quantitative descriptive research design aimed to assess the depression among infertile women. Total 250 infertile women were selected by purposive sampling technique with inclusion and exclusion criteria. Zung Self Rating Depression Scale (ZSRDS) was used to assess the level of depression. The results of the current study shows that, 112 (44.8%) of the total infertile women selected were not having the depression, while the remaining 55 (55%), 27 (27%) were having mild depression, 22 (22%) were reported with having moderate depression and the remaining 6 (6%) were reported with severe depression. There was significant association between the main difference in the level of depression among infertile women and Duration of marriage ($\chi^2 = 17.599$) and duration of treatment ($\chi^2 = 14.426$). The researcher should extend their knowledge to find out the precipitating factors, determinants and causes of depression also management of depression. The researcher recommended further experimental research and comparative research in the way to management of stress among the infertile couples.

Keywords: Depression, infertility, women

Introduction

“Pain during labor is tolerable but emotional pain due to Problem of Fertility is intolerable”

- Bethany Jane Andrews

To become a mother and father is one of life's greatest blessings. It changes their heart, thoughts, and actions. It is a lifelong event that forever changes the couples. Failure by both men and women to fulfill their need for a child is usually devastating, humiliating, and emotionally destructive. Thus it becomes a major life stressor, which can affect the well-adjusted couples. Even though tremendous strides have been made in treating this relatively common condition, Problem of Fertility is typically not openly discussed. Infertility (Problem of Fertility) is defined as failure to conceive within one or more years of regular unprotected coitus. Primary Problem of Fertility denotes those patients who have never conceived. Secondary Problem of Fertility indicates previous pregnancy but failure to conceive subsequently.

According to WHO in worldwide 60 to 80 million infertile couples are there, and also estimated in India 10 to 15% of couples were infertile. In recent years, the number of couples seeking treatment for infertility has dramatically increased due to factors such as postponement of childbearing in women, development of newer and more successful techniques for infertility treatment, and increasing awareness of available services. This increasing participation in fertility treatment has raised awareness and inspired investigation into the psychological ramifications of infertility.

Consideration has been given to the association between psychiatric illness and infertility. Researchers have also looked into the psychological impact of infertility and of the prolonged exposure to intrusive infertility treatments on mood and wellbeing. There is less information about effective psychiatric treatments for this population; however, there is some data to support the use of psychotherapeutic interventions. Infertile women feel anxious, irritable or low in self-esteem, and racing thoughts, worry constantly or go over things in her

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head. We may notice that more easily, drink more or act unreasonably, experience headaches, muscle tension or pain, they lose their temper or dizziness.

In almost all the major states, around 20 per cent of childless women are in the age group of 25-29 years. The prevalence of childlessness seems to decrease with the increase in age. Prevalence of childlessness is about 18 per cent among women whose husbands are in the age group of 30-34 and 35-39 years. The lowest percentage of childless women (2.9%) in India was found whose husbands are in the age groups of 4 50- 59 and 60+ years. High prevalence of childlessness has shown by women whose husbands were in the age-group of 25-49 years. In the states of Madhya Pradesh and Andhra Pradesh, above 25 per cent of the childless women have husbands belonging to the age group of 25-29 years.

Supportive study, the researcher attempted to identify the level of stress among infertile couple in a view to develop instructional module at selected infertility clinic at Puducherry.

Methodology

This quantitative descriptive research design was conducted among 250 infertile women who were attending outpatient department of an infertility clinic. The setting of the study was kept confidential in order to meet ethical guidelines. Two hundred and fifty samples were he samples were selected to purposive sampling technique with inclusion and exclusion criteria. The data collection instruments consist of two sections, section A is aimed to assess the demographic variables and section B consist of depression scale. Zung Self Rating Depression Scale (ZSRDS) was used to assess the level of depression among the samples. ZSRDS is short self-administered questions by means of 20 items that rate the affective, psychological and somatic symptoms associated with depression. Each question is scored on a scale of 1 through 4 (based on these replies: a little of the time, some of the time, good part of the time, most of the time). The data were collected after informed consent from the samples. The collected data tabulated and analysed by using descriptive and inferential statistics.

Results and Discussion

The analysis reports of the demographic variables shows that, majority 46% of the samples were 26 to 30 years of age, 30% of them were studied till SSC, 95% of them were unemployed and 51 % of their family income is Rs. 10,000 to 50,000 per month. Regarding habitat of living majority 58% of them were living in urban area, 92% of them were Hindus, 41% of them were married before 2 to 5 years. In the view of duration of treatment among 250 samples, majority 53 % of them were on treatment 1 to 3 years, 59% of them were non any abnormal previous obstetrical history and 43% of them were aware about relaxation technique to relieve depression.

These results were similar to a case control study conducted by Yusuf L. (2016) [5]. Most of the subjects included in the study were between 20-30 years of age (63.5%) and 31-40 years being the second most common age group (31.5%). The frequency of educated subjects was high in both control and study groups with 39% and 23% having 10 or less years of education and 23% and 40% having 12-14 years of education. The number of uneducated participants was 38 and 19 in control and study groups respectively. Only 18 respondents out of 200 had 16 years or higher education (n

= 200). Percentage of house wives was higher (71% and 80%), employed being second in number (21% and 18%) and self-employed being the least common (8% and 2%). There was high prevalence of depression, anxiety and stress among females suffering from infertility compared to females in control group ($p < 0.05$).

Table 1: Frequency and percentage level of depression.

Level of depression	Frequency	Percentage
Normal	55	22 %
Mild	68	27.2 %
Moderate	112	44.8 %
Severe	15	6 %

The above table reveals that 112 (44.8%) of the total infertile women selected were not having the depression, while the remaining 55 (55%), 27 (27%) were having mild depression, 22(22%) were reported with having moderate depression and the remaining 6 (6%) were reported with severe depression.

A study conducted by Popkova D *et al.*, (2024) [4] to evaluate the presence of anxiety and depression among infertile couples undergoing infertility treatment in Latvia. In this cross-sectional study we compared anxiety and depression symptoms in couples diagnosed with primary infertility (111 women and 55 male), evaluating male and female symptoms separately and together. The level of anxiety and depression were measured using Generalized Anxiety Disorder Scale (GAD-7) and Patient Health Questionnaire-9 (PHQ-9). Upon assessing anxiety and depression level scores mild anxiety is predominantly observed in couples undergoing ART cycles for the first time, accounting for 44.6%, compared to those undergoing it for the 2nd and 3rd time, where the prevalence is equal and stands at 40.7%. Conversely, a noteworthy trend is discerned in patients undergoing ART multiple times, revealing a higher prevalence of moderate and severe anxiety, at 18.6% and 9.3%, respectively. The highest prevalence of depression symptoms is observed in individuals undergoing their second ART cycle and beyond. Particularly noteworthy is the substantial proportion of these patients, with 36.0% experiencing mild and 17.7% experiencing moderate depression symptoms.

There was significant association between the main difference in the level of depression among infertile women and Duration of marriage ($\chi^2 = 17.599$) and duration of treatment ($\chi^2 = 14.426$) There was no significant association between the main difference in the level of depression among infertile women other demographic data such as Age, Education, Occupation, Family Income, Locality, Religion, Previous obstetrical status, previous treatment for infertility and Previous knowledge about infertility and depression.

Another study conducted by Al-Homaidan H. T. (2011) [6] to determining the prevalence and predisposing factors of depressive disorders among the infertile compared to fertile women. This study showed that 49 (53.8%) of the infertile women and 35 (37.2%) of the fertile women had depression. Mean BDI score between infertile and fertile women was significantly different ($p < 0.001$). Infertile women were found to be more severely depressed ($p = 0.014$). Among the infertile women, those who had pressure from family

members for not getting pregnant were more depressed than those with no such pressure ($P=0.001$).

Conclusion

This present study discussed about the level of depression among the infertility couple. The researchers should not stop search until this assessment. The researcher should extent their knowledge to find out the precipitating factors, determinants and causes of depression also management of depression. The researcher recommended further experimental research and comparative research in the way to management of stress among the infertile couples.

Reference

1. Infertility and depression: Symptoms, treatment, and support (Medicalnewstoday.com)
2. Simionescu G, Doroftei B, Maftei R, Obreja BE, Anton E, Grab D, *et al.* The complex relationship between infertility and psychological distress (Review). *Experimental and therapeutic medicine*. 2021;21(4):306.
3. Yang T, Wongpakaran N, Wongpakaran T, Saeng-Anan U, Singhapreecha C, Jenraumjit R, *et al.* Factors Associated with Anxiety and Depression in Infertile Couples-Study Protocol. *Healthcare (Basel, Switzerland)*. 2022;10(7):1352.
4. Popkova D, Bukova Zideluna A, Erenpreiss J, Fodina V. Anxiety and Depression Symptoms among Infertile Couples Undergoing ART in Latvia: A Cross-Sectional Non-Randomized Single-Centre Study. *J Community Med Public Health*. 2024;8:405.
5. Yusuf L. Depression, anxiety and stress among female patients of infertility; A case control study. *Pakistan journal of medical sciences*. 2016;32(6):1340-1343.
6. Al-Homaidan HT. Depression among Women with Primary Infertility attending an Infertility Clinic in Riyadh, Kingdom of Saudi Arabia: Rate, Severity, and Contributing Factors. *International journal of health sciences*. 2011;5(2):108-115.
7. Rooney KL, Domar AD. The relationship between stress and infertility. *Dialogues in clinical neuroscience*. 2018;20(1):41-47.
8. Masoumi SZ, Poorolajal J, Keramat A, Moosavi SA. Prevalence of Depression among Infertile Couples in Iran: A Meta-Analysis Study. *Iranian journal of public health*. 2013;42(5):458-466.