

Evaluation of Quality of Life in Infertile Couples

Banerjee Kaberi¹, Singla Bhavana^{2*} and Gautam Sonum³

¹Medical Director, Advance Fertility and Gynaecology Centre, New Delhi, India.

²Senior Consultant, Advance Fertility and Gynaecology Centre, New Delhi, India.

³Clinical Fellow, Advance Fertility and Gynaecology Centre, New Delhi, India.

***Correspondence:**

Dr. Bhavana Singla, Consultant, Advance Fertility and Gynecology Centre 6, Ring road, Lajpatnagar 4, Moolchand Crossing New Delhi 110024, India, Tel:+91 9350005568; E-mail: drbhavanasingla@gmail.com.

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ABSTRACT

Rationale: Infertility is a medical condition, which is a stressful and unexpected experience by a couple attached with social dimension.

Objective: To evaluate the quality of life of the infertile couples.

Settings: Infertility outpatient clinic

Findings: Out of 600 female partners, in 240 females (40%), night sleep was affected and in 95 females (15.8%), day sleep was affected, 508 females (84.7%) were found to be stressed, 415 females (69.2%) were depressed and according to 109 females (18.2 %), their marital life was affected due to infertility. Out of 600 male partners, in 225 males (37.5%), night sleep was affected and in 113 males (18.8%), day sleep was affected, 375 males (62.5%) were found to be stressed, 313 males (52.2%) were depressed and according to 82 males (13.7 %), their marital life was affected due to infertility.

Conclusion: For many couples, infertility and its management was stressful and depressing condition. It had some effect on the sleep of couples during night time but not on sleep during daytime. In most of the couples, married life was not affected by the infertility.

Keywords

Infertility, Quality of life, Stress, Depression, Sleep.

Introduction

Infertility is a medical condition, which is a stressful and unexpected experience by a couple attached with social dimension. Infertility is estimated to affect 8 to 12 per cent of couples worldwide [1,2]. The WHO estimates the overall prevalence of primary infertility in India to be between 3.9 and 16.8 per cent [3]. For most of the couples that seek treatment for infertility, when told about the male or female factor problem, it is a shocking response for them. They experience low self-esteem, stigma, and depression.

In recent years, attention has been increased on the impact of infertility on the psychological well being of couples. It should

be accepted that for many couples, infertility and its treatment is a, deeply-distressing experience. Counseling had a positive effect on infertile women in reducing some aspects of self-perceived depression, anxiety and stress and also in increasing the pregnancy rate [4].

The aim of the present study was to evaluate the quality of life of the infertile couples.

Material and Method

During the period from 1st October 2015 till 31st December 2015, the 600 couples with fertility problems that visited our Centre for consultation or treatment received a well-structured questionnaire at first visit. Both female and male partners had filled the questionnaire separately.

The participants completed the questionnaires that contained questions about socio-demographic background, questions detecting emotional reactions by assessing sleeping hours, stress level, depression level and effect on marriage and social history. The quality of life (QoL) of the infertile couples was assessed according to the questionnaire's data.

Results

The demographic data for the participating couples was shown in Table 1.

	Parameters	No. of Females	No. of Males
Age	<30 years	116	102
	30 to 35 years	313	368
	>35 years	165	124
Education	Under Graduate	201	294
	Post Graduate	393	300
Occupation	Non working	251	0
	Working	343	594
Duration of Infertility	< 5 years	138	138
	> 5 years	456	456
BMI (kg/m ²)	< 25	359	387
	>25	235	207

Table 1: Demographic data for women and men participating in the study.

Table 2 showed the different factors that assessed the quality of life in infertile couples. Out of 600 female partners, in 240 females (40%), night sleep was affected and in 95 females (15.8%), day sleep was affected, 508 females (84.7%) were found to be stressed due to infertility and 551 females (91.9%) were stressed due to social pressure, 415 females (69.2%) were depressed and according to 109 females (18.2 %), their marital life was affected due to infertility.

Out of 600 male partners, in 225 males (37.5%), night sleep was affected and in 113 males (18.8%), day sleep was affected, 375 males (62.5%) were found to be stressed due to infertility and 219 males (36.5%) were stressed due to social pressure, 313 males (52.2%) were depressed and according to 82 males (13.7 %), their marital life was affected due to infertility.

	Parameters	Females (N = 600)	Males (N = 600)	P value
Sleep	Night	240 (40%)	225(37.5%)	0.401(NS)
	Day	95 (15.8%)	113 (18.8%)	0.195(NS)
Stress	Due to Infertility	508 (84.7%)	375 (62.5%)	<0.0001
	Due to Society	551 (91.9%)	219 (36.5%)	<0.0001
Depression		415 (69.2%)	313 (52.2%)	<0.0001
Affect on Marriage		109 (18.2%)	82 (13.7%)	0.41 (NS)

Table 2: Factors showing quality of life in infertile couples. NS – Not significant.

Discussion

Mental stress and depression, resulting from infertility are may

be due to various factors, including uncertainty of the cause of infertility, uncertain treatment duration, financial stress, and pressure from others who know the couple.

Though infertility causes a lot of grief, stress and sadness among men and women but it doesn't affect the sleep much especially of daytime as indicated in our study. But definitely females appear to have a higher rate of infertility- related stress and depression than male [5,6]. Many times it is mainly due to the social pressure instead of the infertility or its treatment. Family's approach, and that of people surrounding the couples, has a great effect on infertile couples' life. Their uncalled-for interventions and unnecessary sympathy cause couples' resentment, disturbing their peace and sometimes shaking their life foundations [7]. Evidence has shown that positive social interactions and socio-emotional support have a salutary effect on infertile couples' psycho-somatic health, ultimately leading to a decrease in the negative impacts of stress. In addition, they psychologically adapt better and take a proper action against infertility and accept the situation more easily [8,9].

As we know the spouse's support is one of the main sources of support for patients, especially for female infertile patients. Even when family and acquaintances fail to play a supportive and positive role, spouse's empathy, affection, loyalty and adequate support can provide the necessary emotional support for the partner to keep her/his hope alive and to be confidence in order to continue the treatment program [10]. In our study, the both female and male partner supported each other and so they had very less affect on their married life.

One study showed that in addition to treatment and medical needs, infertile couples encounter various challenges in different emotional, psychosocial, communicative, cognitive, spiritual, and economic aspects that can affect various areas of their life and lead to new concerns, problems, and demands. Thus, addressing infertile couples' needs and expectations alongside their medical treatments as well as provision of psychosocial services by development of patient-centered approaches and couple-based interventions can improve their quality of life and treatment results and also relieve their negative psychosocial consequences [10].

Conclusion

Infertility is a life crisis for couples, with many visible and invisible losses. According to this study, for many couples, infertility and its management was stressful and depressing condition. It had some effect on the sleep of couples during nighttime but not on the sleep during daytime. In most of the couples, married life was not affected by the infertility.

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