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## A Study on Socio Demographic Profile and Obstetric Profile among MTP Seekers from a Tertiary Care Hospital in South India

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### **Abstract**

Background: In India Medical termination of pregnancy (MTP) legalised in 1971, India is one of the countries that legalized abortion on moderately liberal grounds for women to access safe abortion services. The higher fertility in India is attributed to early marriage, low level of literacy, poor level of living, limited use of contraceptives and traditional ways of life. Family planning plays a key role in deciding the desired family size and effective limitation of fertility. Though MTP is a safe procedure and legalised, its use is limited due complications to lack of awareness and it is dangerous to use it for spacing. Therefore, the present study was undertaken to understand the factors influencing MTPs & the subsequent adoption of contraceptive methods following it. The objectives of the study were to study the socio-demographic and obstetric profile of women undergoing termination of pregnancy and to study the reasons for termination of pregnancy and the concurrent contraceptive methods adopted by these women.

Methods: A cross-sectional study was conducted among women who underwent MTP at SUT hospital during the study period. The details regarding their socio demographic profile, previous obstetric history, reason for undertaking MTP and acceptance of post abortal contraception were taken.

**Results:** Among the 168, MTP seekers 26.19% of women were below the age of 26 to 29 years, 80.3% of women resided in urban area and 45.2% of the women were either had primary education. Humanitarian grounds (54.7%) were the main reason for current termination of pregnancy. Majority (70%) opted for IUDs as post abortion contraception and (30%) opted for permanent sterilisation as a method for contraception.

**Conclusions:** Eligible couples have to be educated regarding the various methods of family planning to avoid unwanted pregnancy.

Keywords: MTP, Post abortal Contraception.

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### Introduction

The term induced abortion is defined as the medical or surgical termination of pregnancy before the time of viability. Although abortion has been legalized for more than four decades in India, still a major proportion of abortions are conducted by untrained persons at unauthorised place. This practice of unsafe abortion continues to be a major contributor to maternal mortality and morbidity in the country, accounting for 15-20% of maternal deaths. Unsafe abortion remains one of the most neglected reproductive and sexual health problems in the world today<sup>1</sup>. It is estimated that 21.6million women experience an unsafe abortion worldwide each year. Of this 18.5 million occur in developing countries. Deaths due to unsafe abortion remain close to13% of all maternal deaths<sup>2</sup>.WHO defines unsafe abortion as the procedure for terminating an unintended pregnancy either by individuals without the necessary skills or in an environment lacking the minimal medical standards or both. The most common reason for terminating the pregnancy includes, unplanned pregnancy, pregnancy due to contraceptive failure, previous child too young and other indications like foetal anomaly, rape, unmarried status and medical illness causing serious injury to the health of the mother<sup>1</sup>.Data on abortion are scarce and inevitably unreliable because of legal, ethical, and moral constraints that hinder data collection. Underreporting and misreporting are common because women may be reluctant to admit an induced abortion<sup>2</sup>.

### Aims

To determine the socio demographic and obstetric profile of women undergoing medical termination of pregnancy (MTP) at SUT Academy of Medical Science.

### Methodology

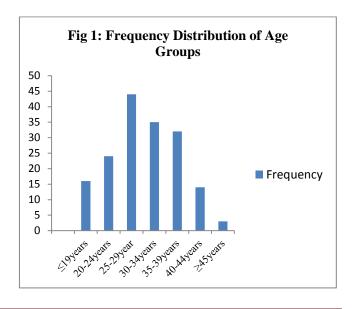
A cross-sectional study was conducted on the women seeking abortion services at RSRM hospital, SUT academy of medical sciences, Trivandrum from January 2017 to November 2017. After obtaining permission from necessary authorities, all women admitted for termination of pregnancy during the study period were included. After obtaining informed consent, data was collected using a pre tested and pre structured questionnaire which include questions regarding the socio- demographic profile, parity, gestational age, and reasons for current termination of pregnancy. The pregnancies were confirmed by urine pregnancy test and the gestation age was confirmed by doing per vaginal examination and Ultrasonography. Data collected was analysed statistically as proportions.

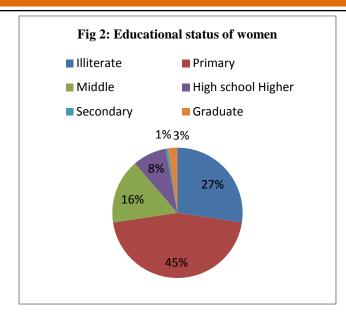
### Results

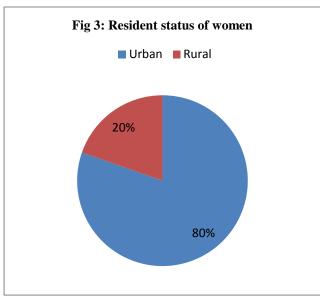
Among the 168 who sought MTP (26.1%) belonged to the age group of 25 to 29 years of age. Majority of the subjects belonged class V socio economic status according to modified BG Prasad and 80.3% of the subjects resided in the urban area (table 1&2, Fig 1-4). The educational profile of the subjects is given in table 2.

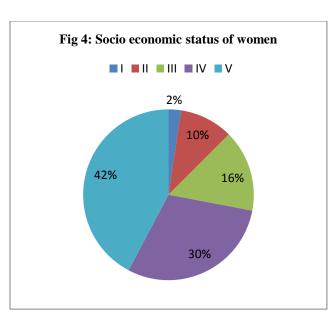
**Table1:** Distribution of study subjects according to age distribution

Age group	Frequency	Percentage
≤19years	16	9.52
20-24years	24	14.28
25-29year	44	26.19
30-34years	35	20.83
35-39years	32	19.04
40-44years	14	8.33
≥45years	3	1.78
Total	168	100



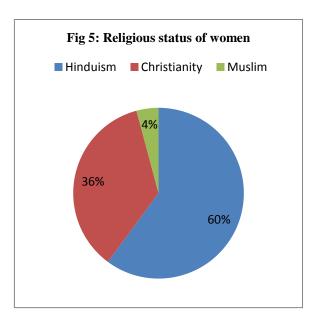






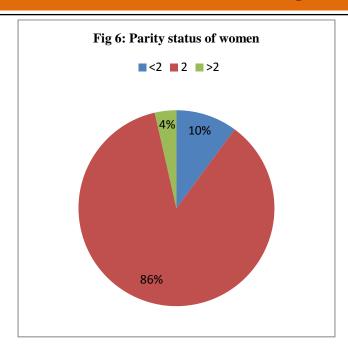
**Table 2:** Distribution of subjects according to educational status

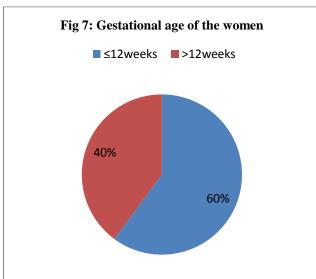
<b>Education of women</b>	Number	Percentages		
Illiterate	46	27.3		
Primary	76	45.2		
Middle	27	16		
High school Higher	14	8.3		
Secondary	1	0.59		
Graduate	4	2.3		
Residence				
Urban	135	80.3		
Rural	33	19.6		
Socio economic class (Modified B. G. Prasad				
classification)				
I	4	2.3		
II	17	10.1		
III	26	15.4		
IV	50	30		
V	71	42.2		



**Table 3:** Distribution of study subjects according to religion

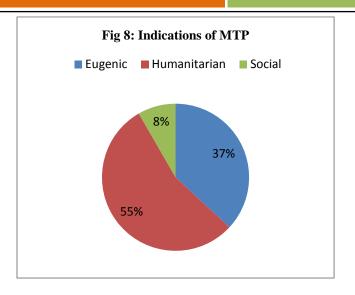
Religion	Frequency	Percentage
Hinduism	101	60.1
Christianity	60	35.7
Muslim	7	4.1
Total	168	100





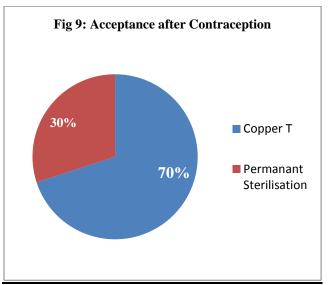
**Table 4:** Obstetric history of women seeking termination of pregnancy

Variables	Number	Percentages
Parity		
<2	17	10.1
=2	145	86.3
>2	6	3.5
Total	168	100
Gestational age		
≤12weeks	101	60.1
>12weeks	67	39.8
Total	168	100



**Table 5:** Distribution of according to reasons for MTP

Indication	Frequency	Percentage
Eugenic	62	36.9
Humanitarian	92	54.7
Social	14	8.3
Total	168	100



Majority of the subjects belonged to Hindu by religion (60.1%) (table 3, Fig 5). As shown in table 4& Fig 6 of the 168 subjects (86.3%) were having a gravid status of 2 and (60.1%) of them had gestational age of less than 12 weeks. Majority of the subjects utilised the MTP for humanitarian grounds (54.7%) and (36.9%) used MTP for Eugenic (table 5, Fig 8). Among 168 subjects (70%) opted for Copper T (IUDs) as post abortion contraception and (30%) opted for permanent sterilisation method as a for contraception (Fig 9).

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### **Discussion**

In the current study majority of MTP seekers were below 30 years of age, about 26.19% were in the age group of 25 to 29 years of age. The results were consistent with that of a study done in a tertiary hospital in Chennai<sup>3</sup>. When compared to a study done in Jamnagar majority of the MTP seeker were in the age group of 25 to 30 years of age<sup>4</sup>. This shows majority of the MTP seekers were in the younger age group. This may be attributed to poor decision making, failure in contraceptives and lack of education.

Majority of the study subjects in our study belonged to urban area 80.3% which was comparable to studies done by Uma Maheswari R. et al<sup>3</sup> where 75% of subjects resided in urban area. Mehra R, Goel et al reported <sup>5</sup> 70% of subjects seeking abortion were of urban background and 30% were from rural set up. Likewise studies done in Jamnagar showed 46.05% of subjects resided in urban area<sup>4</sup>. The results of our study were not comparable with another study done in Kerala where 79.1% of abortion seekers resided in rural area.

In this study 45.2% had education up to primary school and 27.3% were illiterate another study done in a tertiary care hospital in Chennai showed 72.3% majority of the subjects illiterate<sup>3</sup>. The findings suggest lack of education and poor socio economic status was attributed to unwanted pregnancy.

In this study about 54.7% of the study subjects did MTP on humanitarian Likewise, study done in Jamnagar showed 84.21% of the women were having 2 or more living children which shows that there is a need for awareness regarding various family planning services<sup>4</sup>. Similarly studies done by Uma Mahaeshwari et al showed 85.9% of the subjects did MTP having completed family<sup>3</sup>. The results were not consistent with our findings.

In the study 70% of the study subjects opted for IUDs and the rest chose permanent sterilisation None of the subjects had awareness regarding emergency contraceptive pills. Similarly Mukhopadhyay et al in their study on fertility

regulation at Kolkata found that 35.8% accepted Copper T and 30% accepted permanent sterilization after MTP mode as a contraception<sup>6</sup>. The reason for poor acceptance for permanent sterilisation may be attributed to lack of family support and poor knowledge regarding the contraceptive measures. This study shows the importance of creating awareness of different methods of contraception in order to avoid unwanted pregnancy.

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