

# Title: A CASE OF PRIMARY INFERTILITY

## Introduction:

- As per the WHO estimates prevalence of primary infertility is around 3.9% to 16.8%
- Infertility may be caused by a number of factors, in either the male or female reproductive systems. However, it is sometimes not possible to explain the causes of infertility.

## Aims and Objectives

- This case aimed to critically analyze the association between tubal blockage and fibroid with infertility.

## Materials and Methods

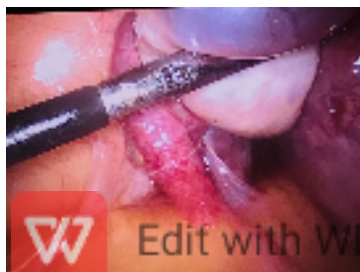
- This report discussed a case of primary infertility who came to CNMC&H. The patient was a 32 years old woman  $P_{0+0}$ , married for 5 years with history of unprotected sexual intercourse with regular menstrual cycle. She has no significant PMH, PSH and family history.
- On examination patient is of average built, normotensive, normoglycemic. After detailed history and examination blood work-up done. Hb – 11.20g/dl (LFT-WNL, KFT-WNL, PT- (18), INR – 1.1, TSH-1.05, prolactin – 10, FBS-82mg/dl.
- **Semen analysis done** which shows: semen vol – 1.5ml, sperm count  $40 \times 10^6$ , Sp. Conc-  $15 \times 10$ , Motility – 40%, morphology-N – 3-4.

### • USG shows –

- Uterus - A/V enlarge, 8.48 x 3.85 x 6.21 cm
- ET – 0.6cm
- 4.49 x 4.23 cm solid SOL seen in cervix
- 2.75 x 2.97 cm solid SOL seen in left side of fundus in posterior wall. Rt. Ovary – Normal, Left ovary - enlarged (2.79 x 3.79 cm)
- No free fluid seen.

- **HSG shows** – Bilateral fallopian tubes filled with contrast however no spillage seen. Blockage at both fimbrial ends. Uterine cavity appears normal.

- **Chest X-ray** – Normal



## Discussion

- After all these, decision for diagnostic hysteroscopy was taken
- **Hysteroscopy reveals**
  - No endometriosis or adhesion seen
  - 3 fibroids – fundal subserosal
  - Intramural
  - Broad ligament fibroid
  - No free spillage on both sides (on Dye test)
  - B/L ostia not visible
  - Uterine cavity – Normal
  - Hemorrhagic cyst (approx. 6x4 cm) in Left ovary – cystectomy done

HPE report shows secretory endometrium.

Patient was counselled about IVF and surrogacy

- Tubal factors account for 25-35% of infertility. Mechanism by which fibroid causes infertility is unknown, but may involve altered uterine contraction, impaired gamete transport or endometrial dysfunction.



## Conclusion:

With proper evaluation and treatment, majority of couples evaluated for infertility will achieve pregnancy. For those failing treatment IVF, gestational surrogate and adoption are realistic options.