LACTATION AND LACTATIONAL AMENORRHOEA WITH *POST-PARTUM* IUCD INSERTIONS

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The *post-partum* period is considered as an ideal period for propagating any birth control technique as women are highly motivated and a number of them are under some medical care. For the introduction of an intra-uterine contraceptive device (IUCD) the *post-partum* period was also found satisfactory (Hingorani, 1966; Hingorani & Uma Bai, 1968; Hingorani, Uma Bai & Kakkar, 1969a; Phatak, 1969) as insertion was found to be easy and painless owing to the patulous os; there were no complaints of post-insertional bleeding on account of the natural presence of the lochia. It was also felt that when the lochia stopped the patient would then go into lactational amenorrhoea and a significant side effect of bleeding present in non-puerperal insertions would be minimized. However, as the effects of *post-partum* IUCD insertions on lactational amenorrhoea and lactation were not known, this study was undertaken.

One hundred and eighty-five *post-partum* women were fitted with a 30-mm Lippes loop using a modified inserter (Hingorani, 1968) on the 3rd to 7th *post-partum* day and another 106 *post-partum* women (without an IUCD) were observed as control group. Haemoglobin estimation and bacteriological studies on the cervical swab were carried out initially and after 1, 3, 6, 9 and 12 months in both groups. In addition, details regarding the amount and duration of lochial discharge, lactation, establishment of period, menstrual pattern and any other symptoms in both groups were recorded and patients were followed up for 4 years. Observations on the results of cervical swab cultures (Uma Bai, Bhujwala, Prakash & Hingorani, 1970), lochia and menstrual patterns (Hingorani, 1970) and other symptomatology (Hingorani, Uma Bai & Kakkar, 1969b) have been reported elsewhere. This report records the observations on the duration of lactation and lactational amenorrhoea.

The duration of lactation in the study group varied between 0 and 36 months, the average being 10.86 months, with 82% of women lactating for more than 1 month. In the control group, the lactation period varied between 0 and 30 months, the average being 6.99 months with 84% of women lactating for more than 1 month. Detailed distribution of women in relation to duration of lactation is shown in Text-fig. 1. The difference in the duration of lactation in the two groups was not statistically significant ($P > 0.05$).

In the study group, menstruation recommenced 1 to 16 months (average 4.78 months) after the delivery, whereas in the control group, menstruation was resumed after 1 to 14 months (average 5.26 months). The difference in the period of lactational amenorrhoea between the two groups was not statistically significant ($P > 0.05$). The distribution of women in relation to the period of

TEXT-FIG. 1. Duration of lactation in study (open columns) and control (hatched columns) groups.

TEXT-FIG. 2. Period of lactational amenorrhoea in study (open columns) and control (hatched columns) groups.

lactational amenorrhoea is shown in Text-fig. 2. The average duration of lactational amenorrhoea as reported by Malkani & Mirchandani (1960) from the same city, was 5.25 months. This is comparable to the observations in the present study.

It is concluded that the *post-partum* IUCD insertions did not affect the duration of lactation or lactational amenorrhoea.

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