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**ASSESSMENT OF SUB-CLINICAL
ABORTION AS A CAUSE OF
MENORRHAGIA IN IUCD_s USERS
AND NON-USERS**

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THESIS

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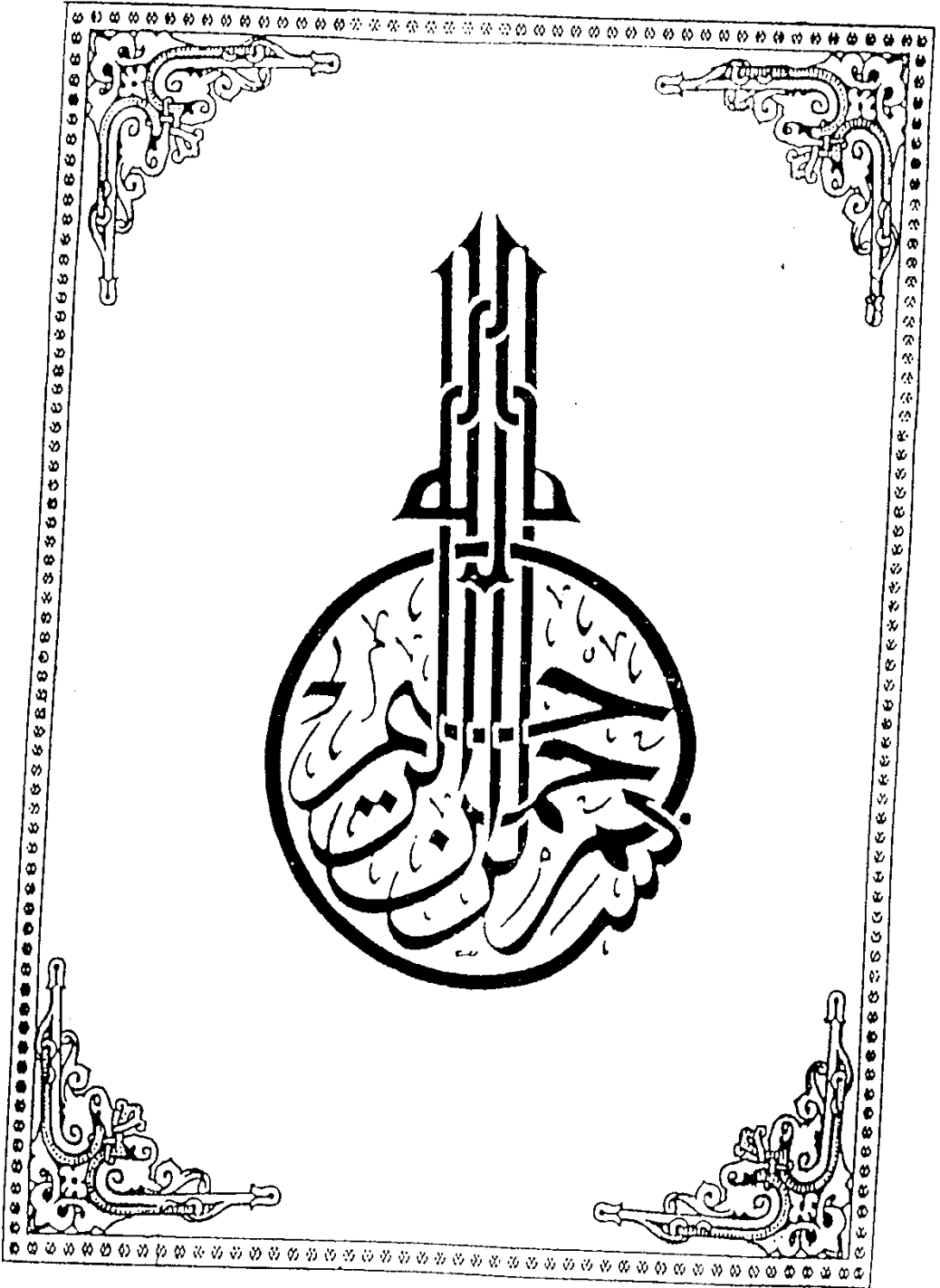
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List of Abbreviations

IUCD	Intrauterine contraceptive device
DUB	Dysfunction uterine bleeding
hCG	Human chorionic gonadotropin
EPF	Early pregnancy factor
Cu	Copper
SP1	Pregnancy specific B1-glycoprotein
+ve	Positive
-Ve	Negative

Introduction

INTRODUCTION

Menorrhagia is a symptom denoting excessive heavy menstrual bleeding. It is a complaint that is difficult to verify objectively in many cases even with a detailed case history (Fraser, 1994).

An increase in menstrual blood loss is one of the commonest side effects associated with the use of an intrauterine contraceptive device. The increase in menstrual blood loss has been shown to vary according to the type of IUCD used in particular the surface area of IUCD (Lippes, 1965).

Cases of IUCD-induced menorrhagia, may be associated with embedding of parts of the IUCD in endometrium, displacement of device or severe distortion of uterus (Pezarro et al., 1989).

The failure rate of copper-releasing IUCDs as other methods of fertility regulation is higher in young women and decreases with age (Luukkainen and Toivonen, 1995).

The rate of early subclinical pregnancy loss among women with no reported fertility problems was 21.2% of total pregnancies. These results suggest that a high rate of postimplantation subclinical pregnancy loss is a major component of clinical subfertility, regardless of treatment (Hakim et al., 1995).

