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[Geburtshilfe Frauenheilkd.](#) 1995 Mar;55(3):130-4.**[Psychosocial prognostic factors for refertilization or IvF after tubal sterilization].**

[Article in German]

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Abstract

In a psychosomatic study we interviewed 33 women who had undergone tubal anastomosis or IvF after tubal ligation. As a control group we chose a randomised sample of 45 women after elective tubal ligation. We used a semi-structured interview and the Giessen-test as psychometric instruments. According to the leading indication for reanastomosis, we allocated women to one of 2 groups: 21 patients had found a new partner (R-partner), 12 mentioned experiences of loss (R-loss). The groups were well comparable in respect of sociodemographic items, but showed relevant differences in psychological variables, like motivation for and time for deliberation to sterilisation or age difference between partners. Women of the R-partner group were highly satisfied with tubal reanastomosis as compared to R-loss subjects. Satisfaction with the procedure was basically independent of an actual pregnancy. Women experienced the two methods in different, rather specific ways. Cluster analysis of the Giessen-test result confirmed group allocation. We conclude that experiences of loss as a leading reason for tubal reanastomosis are unfavourable prognostic factors. IvF has an unfavourable prognosis in women with the intention to restore the mutilated body image. Preoperative counselling by a psychotherapeutically trained counsellor seems mandatory.

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