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Psychological sequelae of surgical reversal or of IVF after tubal ligation.

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Abstract

This study investigates the psychological concomitants and sequelae of surgical reversal (tubal reanastomosis) or of IVF after tubal ligation. We held semi-structured interviews and used the Giessen test and the Strauss-Appelt body image questionnaire. The sample comprised 25 women; a new partner was the leading reason for reversal in 16 cases ('New Partner'), while in 9 cases experiences of loss (of a child or of ideal values) prevailed ('Loss'). The two groups differed in a number of relevant demographic and psychological data. 'New Partner' patients showed a pattern of factors known to be associated with regret of sterilization. 'Loss' women were less satisfied with reversal than 'New Partner' subjects ($P < .01$). Satisfaction with reversal was independent of an achieved pregnancy. Patients considered surgical reversal to be preferable to IVF because of the "restoration of the mutilation." In the Giessen test, 'New Partner' women were more depressive ($P < .05$) and more submissive ($P < .05$) than 'Loss' subjects. Cluster analysis of the whole sample revealed four well distinguishable profiles. 'Loss' patients experienced less insecurity of their body image than both 'New Partner' women and the general female population. We conclude that reversal of sterilization helps to restore body-image and self-esteem, but it may counteract mourning. Consequences for pre-reversal counseling are discussed.

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MeSH Terms

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