

## Infertility: Agony in Developing Countries

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Infertility is one of the neglected public health problems around the world. Infertility is defined as the inability of establishing a pregnancy after trying for at least 6 months or one year having normal sexual intercourse without contraception.

The WHO estimates that 8 - 12% of couples and one out of every ten couples; roughly 60 to 80 million men and women globally experience difficulty conceiving a child. Countries and regions have different rates of infertility. They do, however, reside primarily in developing nations like Nepal where women's status frequently depends on their ability to conceive a child. The consequences of infertility in these countries range from economic hardship to social isolation, violence and denial of proper death rites. Couples experience tragedy when they are unable to have children, feeling abandoned, incompetent and excluded. Negative consequences of childlessness are experienced to a greater degree in developing countries when compared with western societies. Psychological consequences of infertility are directly associated with duration of marital life. Some individuals may adopt corrective behaviours and retain fertility as a result of being aware of the potential concerns. However, infertility is a common problem in Nepal that many individuals must deal with.

In both men and women, there are several causes of infertility. Apart from anatomical, genetic, endocrinological, and immunological issues, a significant proportion of women suffer from menstrual disorders, health issues (STI, obesity, thyroid diseases, and diabetes), postpartum and post-abortion infection, tubal damage, pelvic inflammatory diseases (PIDs) and ovulation dysfunction, all of which are reported causes of infertility in women. Male infertility is caused by abnormalities in sperm fluid, sexual dysfunction, vascular anomalies and anti-spermatogenesis factors.

Treatments for infertility can range from pharmaceuticals to embryo implantation through assisted reproductive technologies (ART). There are treatments designed exclusively for men or women, as well as treatments that require both couples. In 85% to 90% of cases, infertility is treated with traditional medical procedures such as medication or surgery.

If fertility treatments fail, it is acceptable to use donated eggs or sperm or to have another woman carry a fetus through a procedure known as *In vitro* fertilisation (IVF).

Although health services are accessible in Nepal, they are only provided in private hospitals, are restricted to urban areas, and are exceedingly expensive. Furthermore, its affordability and accessibility have been almost limited to people from upper socioeconomic groups, and it cannot be afforded by people from poor and intermediate socioeconomic strata. There is extremely few skilled health care practitioners in the case of infertility.

Individuals and couples living in low-income areas are also unable to receive these services. Aside from that, a lack of awareness of treatment options in resource-limited settings adds to infertility.

Infertility is a growing problem in Nepal that requires exposure. Despite the fact that infertility is not a life-threatening issue, it has significant negative effects on community health, including depression, anxiety, domestic violence, marital stress, intimate partner violence and social isolation. Even so, there hasn't been a successful program put in place in Nepal to address the numerous reasons of infertility and reduce their impact. Because it is not a condition that poses a threat to life or causes invisible losses, the issue of infertility has not received the attention it deserves, despite having numerous negative effects.

Significant adverse psychological effects linked to infertility are also reported by infertile couples. As a result, infertility must be addressed as a public health issue rather than just a medical condition. Therefore, a campaign to raise awareness and advocate for reforms can improve the affected people's circumstances. In addition, Government should take steps and allocate resources to low-cost IVF and infertility treatment services so that everyone, especially those in lower socioeconomic groups, can access and afford them. The national policy guidelines and service standards for sexual and reproductive health and rights should encompass the management of infertility.

Infertility is a result of a complex interaction of biological, environmental, and cultural factors that must be understood at the local community level in order to provide complete reproductive health care services to address the problem.

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