INVESTIGATION CORRELATES OF CHLAMYDIA ANTIBODY TESTING AND HYSTEROSALPINGOGRAPHY AMONG WOMEN WITH TUBAL INFERTILITY

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Background: Chlamydia trachomatis infection an important preventable cause of infertility. In women, up to 70% of genital infection with Chlamydia trachomatis are asymptomatic. In the management of infertility patients, a lot of clinicians or centres do not routinely screen for Chlamydia trachomatis infection. Hence all patients being managed for infertility may potentially be at risk of tubal blockage in addition to non-tubal factor aetiology. Those with primary tubal blockage also are at risk of worsening of the blockage.

Objective: To determine if there is a relationship between IgG and IgM Chlamydia antibody testing (CAT) and causative factors of infertility.

Design: A cross sectional descriptive study of 400 consecutive old and new infertile women presenting at the gynaecological clinic of the Ahmadu Bello University Teaching Hospital, Zaria.

Results: Up to 264 (66%) of the patients had tubal factor, 64 (16%) had uterine, 56 (14%) had ovarian, 50 (12.5%) had male while 40 (10%) had others. The causative factors were not mutually exclusive.

The sero-prevalence of IgG and IgM chlamydia trachomatis amongst patients with tubal infertility were 35.6% and 35.6% respectively. There was a stronger significant relation (P = 0.008) between IgM sero-positivity which suggests recent infection and tubal infertility. The relation between IgG sero-positivity which suggest chronic infection and tubal infertility was also significant (P = 0.036) but relatively lower.

Conclusion: The sero-prevalence of chlamydia trachomatis infection, IgG and IgM was significantly higher among the sub-population with tubal infertility. Chlamydia antibody testing (CAT) has predictive value for tubal infertility.