

Viljatus ja viljatusravi – sissejuhatus teemasse

Prof Helle Karro



Infertility

العربية

中文

Français

Русский

Español

VILJATUS e. infertiilsus

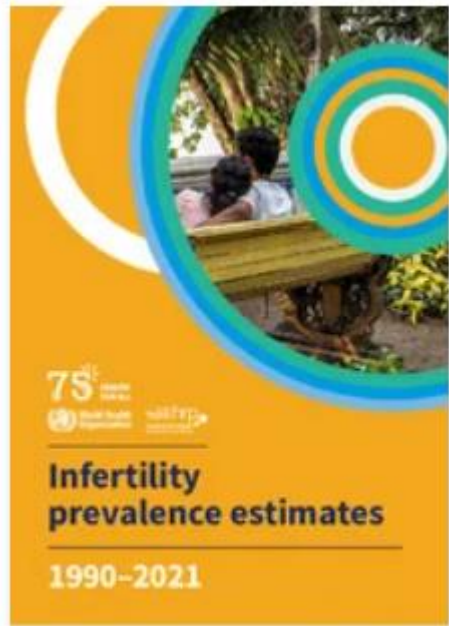
on naise või mehe reproduktiivsüsteemi haigus, mille korral esineb võimetus rasestuda pärast 12 kuu või pikemat regulaarse seksuaalelu perioodi, kuigi ei ole kasutatud rasestumisvastaseid meetodeid

WHO, 2018

- **VILJAKUS**, *fecunditas* (la), *fecundity* (i) – võime saada elavaid järglasi
- **VILJATUS**, Infertiilsus, *infertlitas* (la), *infertility* (i) – sigimatus, paljunemisvõimetus, võimetus rasestuda
- Infekunditeet , *infecunditas* (la), *infecundity* (i) – **võimetus saada elavaid järglasi**
- **LASTETUS** – vabatahtlik (omal soovil või tingituna teistest asjaoludest) või soovimatu (meditsiinilisel põhjusel)

Viljatus on seotud seksuaal- ja reproduktiivtervise ning õigustega –

..inimeste võimelisus saada lapsi ja olla vabad otsustama, kas, millal ja kui sageli lapsi saada



Addressing infertility is an important component of sexual and reproductive health and rights, and is central to achieving SDG 3 and SDG 5

It is central to achieving:



The highest attainable standard of physical and mental health



The ability to decide the number, timing and spacing of one's children

In turn meeting:



Sustainable Development Goal 3: Ensure healthy lives and promote well-being for all at all ages.



Sustainable Development Goal 5: Achieve gender equality and empower all women and girls.

Tailored support may reduce mental and relational impact of infertility on infertile patients and partners



BIOGRAPHY

Jacky Boivin is Professor of Health Psychology at the School of Psychology, Cardiff University. She leads the Cardiff Fertility Studies Research Group. Together with collaborators she has led pioneering research into the psychosocial aspects of fertility and produced many tools for patient support in fertility care.

Jacky Boivin^{1,*}, Rita Vassena², Mauro Costa³, Elena Vegni⁴, Marjorie Dixon⁵, Barbara Collura⁶, Marie Markert⁷, Carl Samuelsen⁷, Jillian Guiglotto⁸, Eva Roitmann⁹, Alice Domar^{10,11}



Viljatusel on oluline mõju vaimsele tervisele – esineb „kurbus“ diagnoosimisel ja „ärevus“ ravi ajal

60% arvas, et viljatus ja viljatusravi mõjutas nende vaimset tervist; 44% otsis nende probleemide tõttu abi

Üks kolmest vastanust leidis, et viljatuse diagnoos mõjutas nende suhet

Vajalik on individuaalselt sobitatud toetus ja abi

KEY MESSAGE

This study demonstrated that the impacts of the infertility journey varied across journey stages and by patient or partner experience, and that mental health, relational strain and daily activities probably have bidirectional effects. These findings strongly support the need for tailored patient care throughout the infertility journey targeted at differing patient and partner needs.

ABSTRACT

Research question: What is the psychological impact of infertility on infertile patients and partners of infertile patients?

Design: This online, international, quantitative survey assessed the impact of infertility on mental health, relationships and daily activities for 1944 respondents. Respondents were male or female infertile patients ($n = 1037$) or partners to infertile patients ($n = 907$; not necessarily partners of the patient sample) and were recruited at different stages of the treatment journey.

Results: The most common emotions were ‘sadness’ at infertility diagnosis and ‘anxiety’ during treatment. Emotions differed in nature and intensity throughout the journey. Envy of others who achieved pregnancy was frequently reported by women. More than half of respondents (60.4%; $n = 1174$) perceived the infertility journey to have impacted their mental health, and 44.1% ($n = 857$) of respondents sought mental health support. More patients reported mental health impacts (70.1%, $n = 727$) than partners (49.3%, $n = 447$). One in three respondents indicated that their relationship had suffered due to the infertility diagnosis. Of these respondents, 55.0% ($n = 409$) strongly agreed that infertility caused an emotional strain. Patients more often than partners

Viljatusse levimus

Viljatus, kuidas saame uurida?

- **Viljatuse levimus**, *lifetime prevalence of infertility* – osakaal rahvastikust, kel on **elu jooksul** esinenud viljatusperioode
 - ”Kas Teil on olnud elus perioode, mil Te olete soovinud rasestuda, kuid see pole regulaarse seksuaalelu korral õnnestunud ühe aasta jooksul?”
- **Viljatuse levimus**, *period prevalence of infertility* – osakaal rahvastikust, kellel mingil **kindlal ajahetkel või perioodil** (hetkel või minevikus) on esinenud viljatust

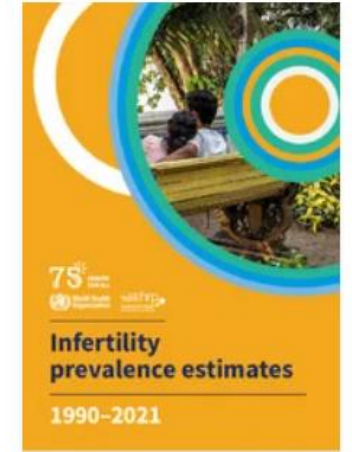
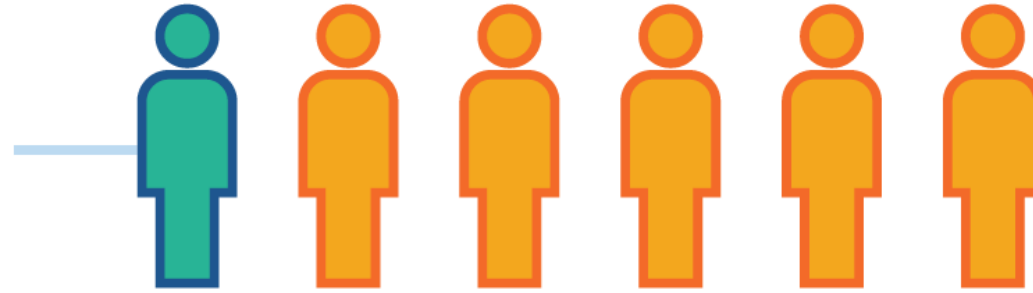
Viljatus, kuidas saame uurida?

- Viljatuse esinemine küsitluse ajal, *current infertility*
 - „kas te soovite rasedaks jääda ja see on edasilükkunud või ei õnnestu rasedust lõpuni kanda?“
- Aeg rasedumiseni, *time-to-pregnancy*
 - „mitu kuud (regulaarne seksuaalelu ja kaitsmata vahekord) kulus rasedumiseni?“
- Viljatusravile pöördumine, *help seeking behaviour*
 - „kas olete pöördunud arsti vastuvõtule/kas olete saanud ravi?“

Global infertility prevalence estimates

2022 global infertility prevalence estimates are:

Approximately **one in six** people have experienced infertility at some stage in their lives, globally.



17.5%

Estimated lifetime prevalence of infertility
(95% confidence interval: 15.0, 20.3).

Lifetime prevalence is defined as the proportion of a population who have ever experienced infertility in their life.










12.6%

Estimated period prevalence of infertility
(95% confidence interval: 10.7, 14.6).

Period prevalence is defined as the proportion of a population with infertility at a given point or interval in time, which may be current or in the past.

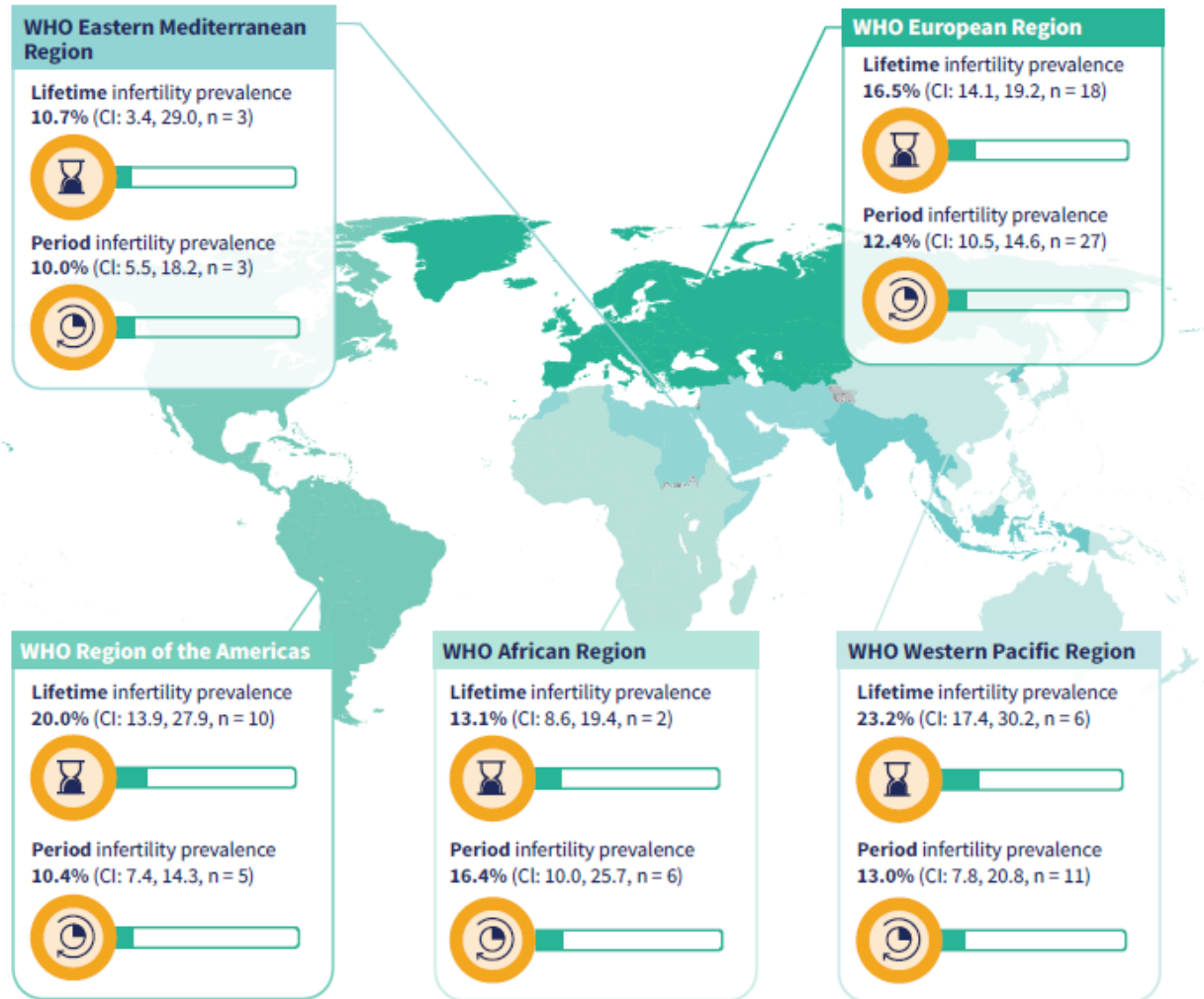
Infertility prevalence and the methods of estimation from 1990 to 2021: a systematic review and meta-analysis

C.M. Cox ^{1,*}, M.E. Thoma ², N. Tchangalova ³, G. Mburu ⁴,
M.J. Bornstein ⁵, C.L. Johnson ⁶, and J. Kiarie ⁴

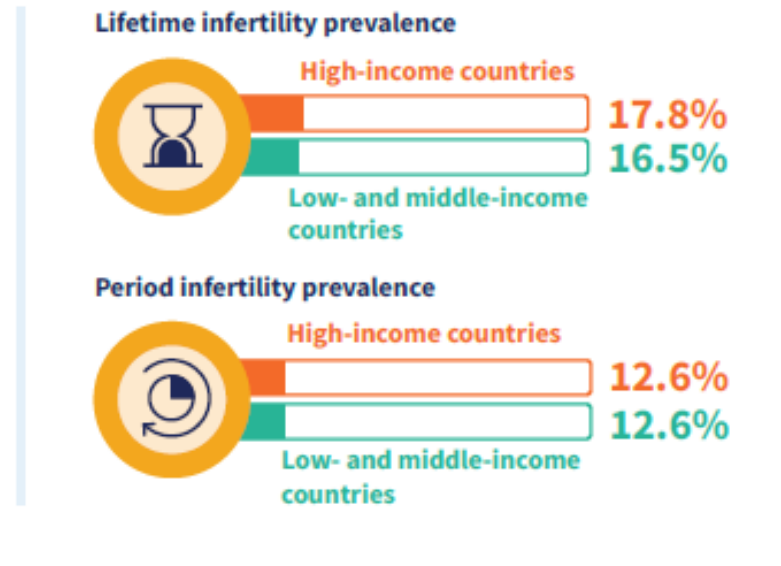
MAIN RESULTS AND THE ROLE OF CHANCE: The search yielded 12 241 unique records of which 133 studies met the criteria for the systematic review. There were 65 and 69 studies that provided data for lifetime and period prevalence of 12-month infertility, respectively. Five methodological approaches were identified: prospective time-to-pregnancy (TTP) design, current duration design, retrospective TTP design, self-reported infertility measure and constructed infertility measure. Ranges for lifetime (3.3–39.7%) and period estimates (1.6–34.0%) were similar and wide even after accounting for methodological and study characteristics. Pooled estimates of lifetime and period prevalence were 17.5% (95% CI: 15.0, 20.3, $n=37$ studies, $I^2 = 99.5\%$) and 12.6% (95% CI: 10.7, 14.6, $n=43$ studies, $I^2 = 99.8\%$), respectively, with some variation in magnitude by region and methodological approach, but with most CIs overlapping.

WIDER IMPLICATIONS OF THE FINDINGS: While findings show a high prevalence of infertility globally and regionally, it also reveals variation in measures to ascertain and compare infertility prevalence. More systematic and comprehensive collection of data using a consistent definition is needed to improve infertility prevalence estimates at global, regional and country-levels.

Regional infertility prevalence estimates



CI = Confidence interval
 n = number of studies
 WHO = World Health Organization
 No studies were available for the WHO South-East Asia Region

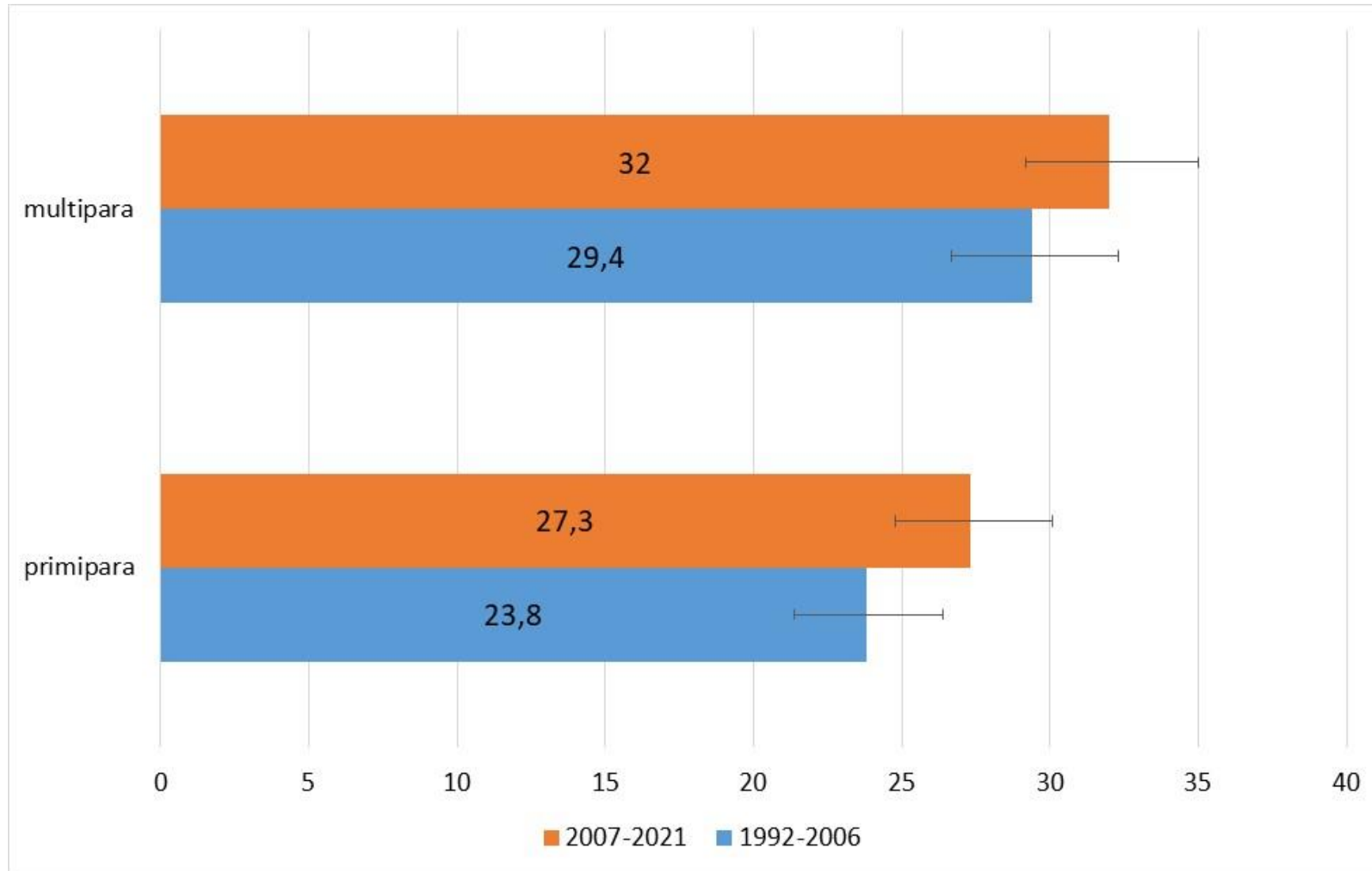


Olukord Eestis

Viljatusravi Eestis

- Kuni 40-aastaste (k.a.) ravikindlustatud naiste **viljatusravi** protseduure (kehavälise viljastamise e. IVF ja embrüosiirdamise teenuseid) ning ravimeid rahastab täielikult Tervisekassa
- Lisaks rahastab tervisekassa **viljakust säilitavaid** protseduure:
 - Munarakkude külmutamise kuni 35-aastastelt naistelt enne viljakust kahjustava ravi alustamist või viljakust kahjustava seisundi esinemise korral
 - Seemnerakkude külmutamise kuni 40-aastaselt mehelt enne viljakust kahjustava ravi alustamist või viljakust kahjustava seisundi esinemise korral
- Kunstlikku viljastamist reguleerib Kunstliku viljastamise ja embrüokaitse seadus <https://www.riigiteataja.ee/akt/1048155>

Sünnitajate keskmine vanus Eestis, 1992–2006 ja 2007–2021



Esmasünnitajate keskmine vanus
1992.a. 22,7
2021.a. 29,4

Korduvsünnitajate keskmine vanus
1992.a. 28,3
2021.a. 33,1

Viljatuse levimus Eestis, 20–44-aastased seksuaalelu kogemusega naised

(% ja 95 % usaldusvahemik, CI)

	2004	2014
20-44-aastased naised	17,4% (CI 15,8-19,1)	18,3 % (CI 16,2-20,5)
Standarditud viljatuse levimus*	19,4%	19,9%

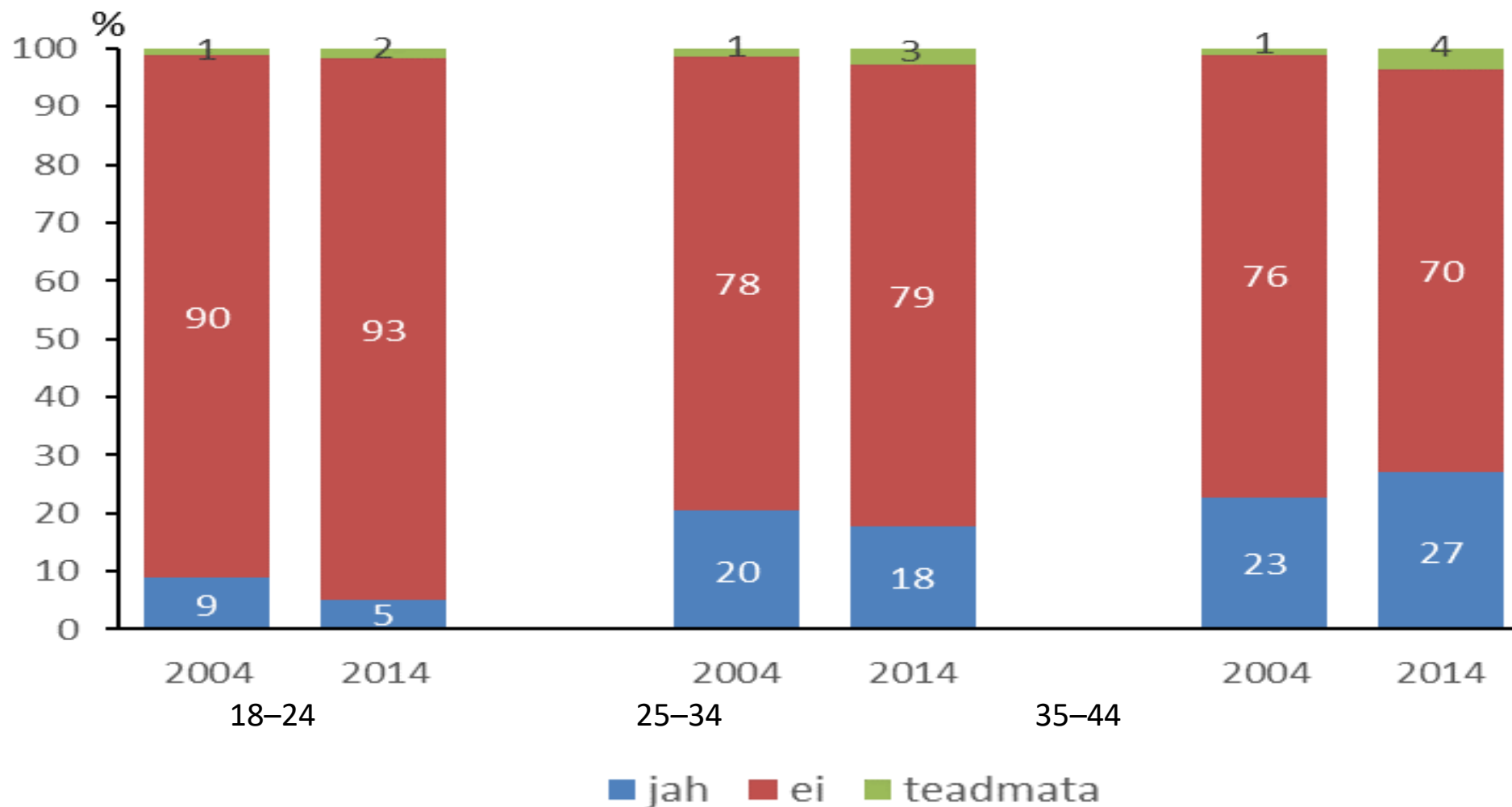
* Standardrahvastik 2014.a. 01.01 seisuga 20–44-aastane Eesti naisrahvastik

”Kas Teil on olnud elus perioode, mil Te olete soovinud rasestuda, kuid see pole regulaarse seksuaalelu korral õnnestunud ühe aasta jooksul?”

Viljatuse esinemine elu jooksul (%)

”Kas Teil on olnud elus perioode, mil Te olete soovinud rasestuda, kuid see pole regulaarse seksuaalelu korral õnnestunud 1 aasta jooksul?”

18–44-aastased naised,
kes olnud
seksuaalvahekorras
2004 (n=2295)
2014 (n=1516)

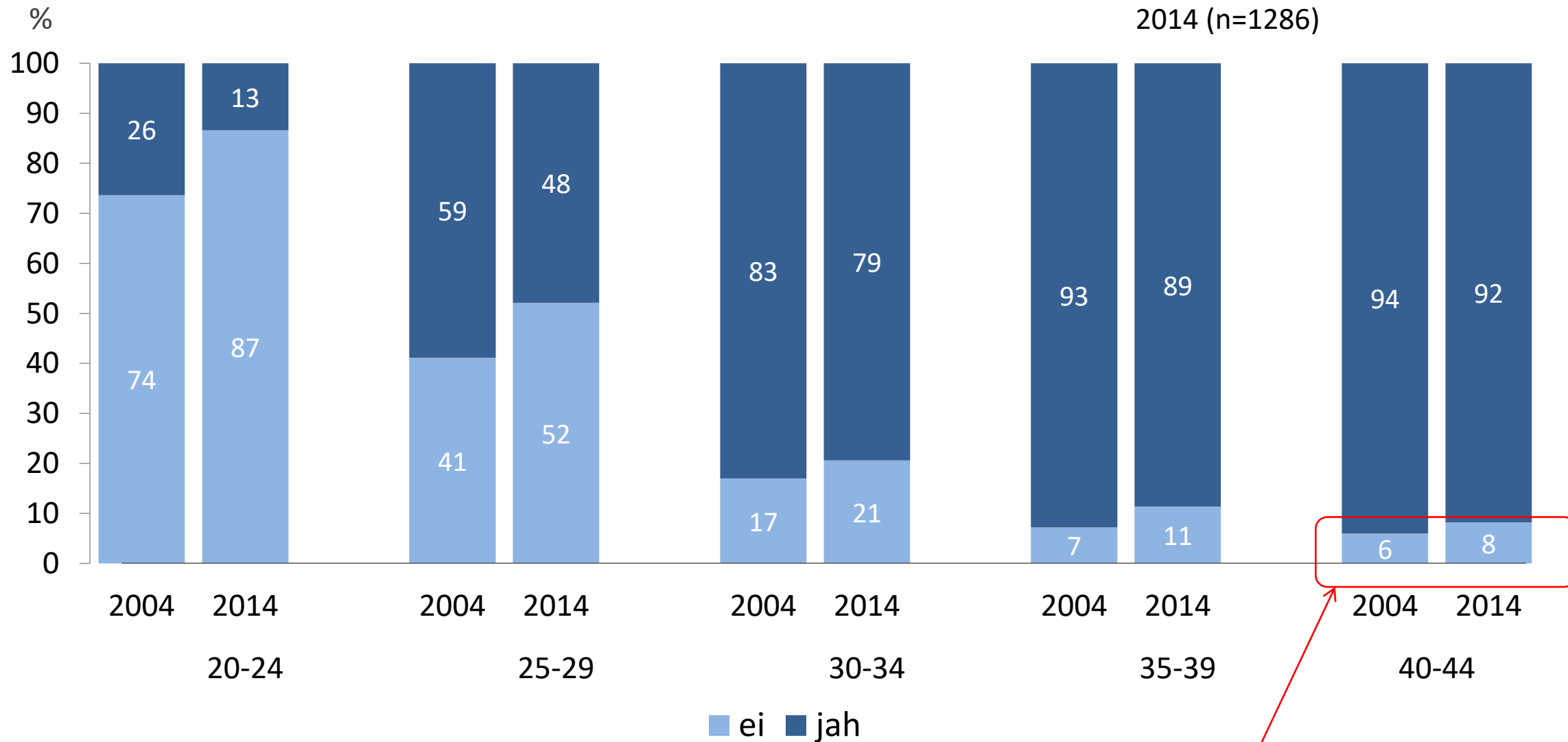


Elu jooksul olnud sünnitusi (%)

20–44-aastased, kes olnud
seksuaalvahekorras

2004 (n=2076)

2014 (n=1286)



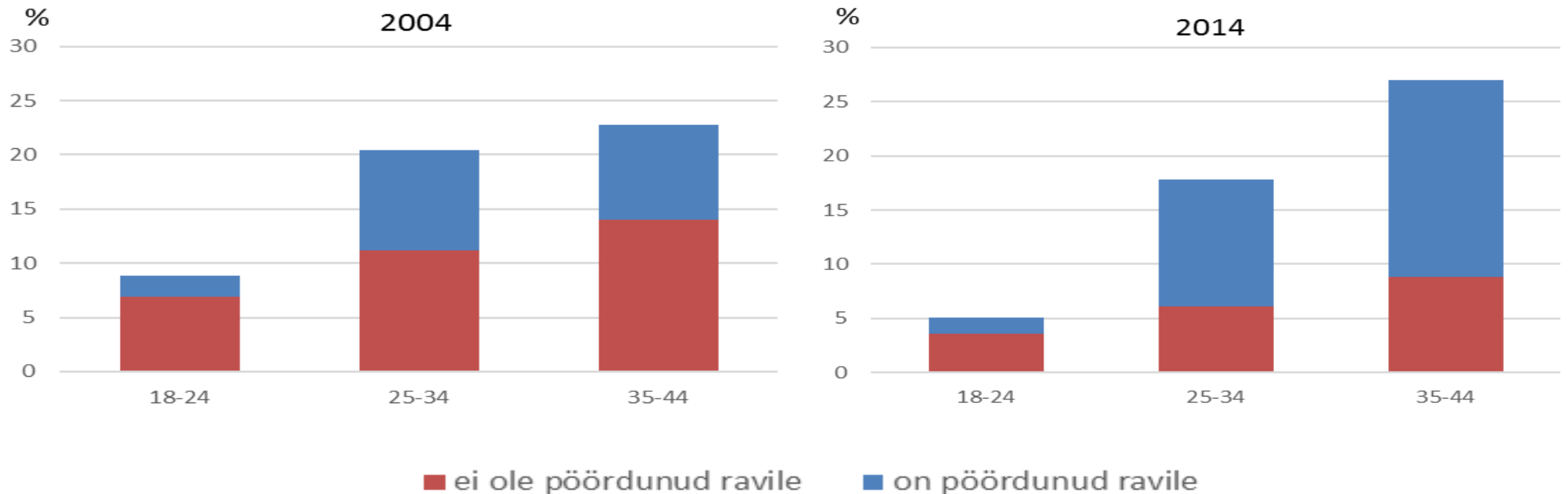
Lastetus

Viljatuse esinemine ning ravile pöördumine

18–44-aastased naised,
kes olnud
seksuaalvahekorras

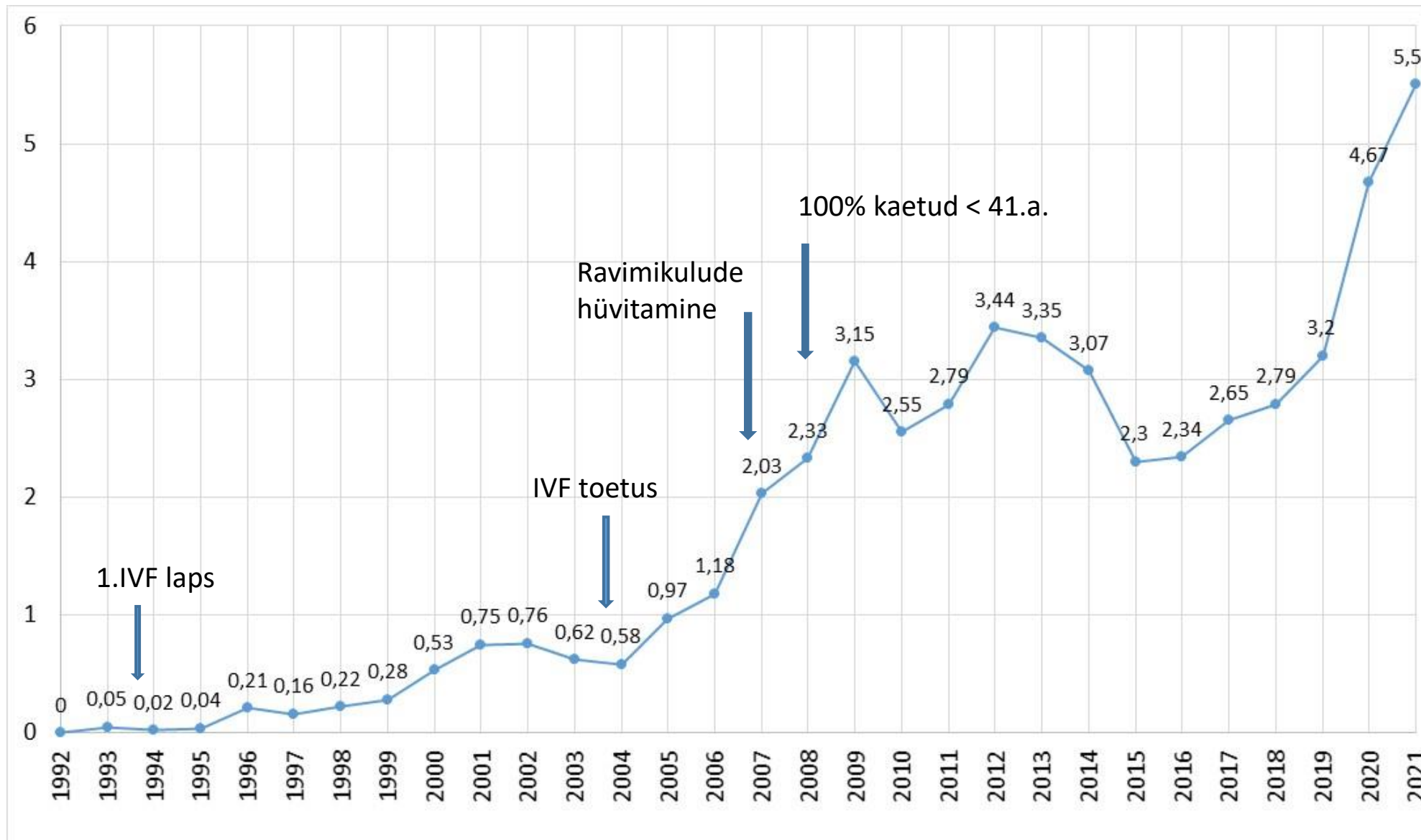
2004 – „Kas Teid on uuritud ja/või ravitud võimaliku viljatuse suhtes?“

2014 – „Kas Te olete viljatuse tõttu pöördunud arsti vastuvõtule?“

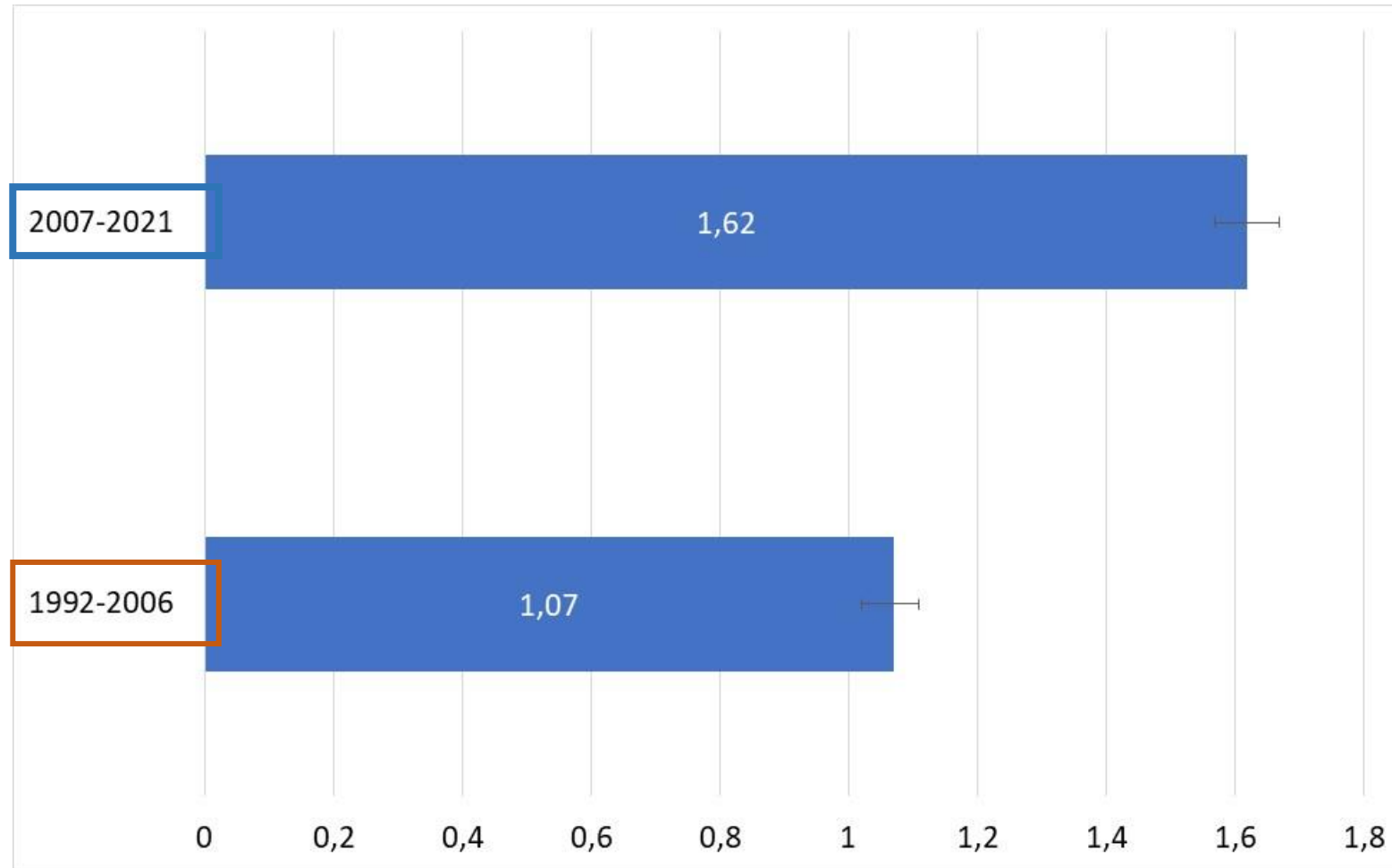


IVF sünnid (%) Eestis, 1992–2021

IVF – munaraku kehaväline viljastamine



Mitmiksünnituste osakaal (%), 1992–2006 ja 2007–2021



Period	Sünnitused	Mitmikud	Osakaal	Osakaalu 95% usaldusvahemik
1992-2006	204681	2183	1,07	(1,02-1,11)
2007-2021	213774	3459	1,62	(1,57-1,67)

Kokkuvõte

- Viljatusel on olulised tervisemõjud
- Maailmas on viljatuse perioode elu jooksul kogenud üks kuuest inimesest, Eestis ligi kaks kümnest 20–44-aastasest naisest
- Eestis on viljatusravi hästi kättesaadav, sagedamini pöörduakse viljatusravile, märkimisväärselt on suurenenud IVF ravi saanute osamäär
- Viljatuse diagnostika ja viljatusravi võimalused on läbi teinud märkimisväärse arengu
- Viljakuse säilitamine ja viljatusravi pakub uusi väljakutseid



TÄNAN!