

## INFERTILITY DOES NOT LEAD TO HIGHER DEPRESSION SCORES OR QUALITY OF LIFE IMPAIRMENT.

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**OBJECTIVE:**The aim of this study was to explore psychosocial effects of infertility using the SF-36 Health Survey and Beck's Depression Inventory.

**DESIGN:**Prospective clinical study

**MATERIALS AND METHODS:** From March 2012 to March 2013, one hundred and eight patients were seen at an infertility clinic in Sao Paulo. Control group was composed of one hundred and five women seen at a regular gynecology clinic not facing reproductive problems. A total of 213 subjects were invited to complete a survey while waiting for their medical appointment in either service. All patients were informed about the objectives of the study and signed consent forms and completed the Short-form 36 Health Survey (SF-36) and the Beck's Depression Inventory (BDI).

**RESULTS:** Most subjects in both groups had a high educational level (>11 years) with similar income. The age of both groups was significantly different (mean age of infertility group  $35.3 \pm 4.21$  vs control group  $32.9 \pm 5.98$ ;  $p=0.002$ ). BDI scores indicated that both groups are predominantly non-depressed. Although the infertility group had a higher score, it was not significantly different than the control group (infertility group score  $8.9 \pm 7.9$  vs  $7.8 \pm 6.8$  for the control group). Quality of life (QOL) was assessed using the SF-36 Health Survey. Comparing our healthy controls to women facing fertility issues, no significant difference was observed in any of the domains analyzed. In addition, we analyzed within the infertility group if BDI score was correlated to the number of previous In Vitro Fertilization (IVF) attempts and no correlation was found (Pearson's correlation = 0.049).

**CONCLUSION:** The results of our study show that women facing reproductive difficulties were not depressed, since their results for the BDI score were similar to the control group and below 10 points. In addition, our service also did not identify significant impairment in quality of life in the infertile group. It is important to note that the use of a non-infertile control group is extremely important in understanding the psychological distress experienced by infertile patients and further investigation will take place in order to assess the level of anxiety of these women.

**SUPPORT:**None