

# Psychological Problems Associated with Failed Assisted Reproductive Technologies among Sudanese Couples in Khartoum State: A Short Communication

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**Introduction:** Assisted reproductive technologies (ART) are medical methods used primarily to address infertility and become an important option for couples with fertility problems to have a baby. It has captured the attention of the public since its sensational introduction in 1978, when Louise Brown the first IVF child was born; practice is largely different from that used early.

In Sudan, where the prevalence of infertility estimated to be 11.5%, IVF provided in 11 fertility centres in different Khartoum localities. Regardless of the cause IVF failure has negative psychological impact and it is associated with a deterioration of the emotional wellbeing. In a study by Verhaak et al. in 2005, showed that over 20% of the women who did not achieve pregnancy showed depression and/or anxiety up to 6 months after treatment termination. Regarding the psychological impact of IVF/ICSI failure in Sudan is even worse due to the cultural and social norms. It is important that infertile couples attend IVF clinic should receive appropriate counselling with regard to coping with treatment failure to prevent further psychological effect. Along with the realization of couples about their reproductive potential and having children is seen as a key lifetime achievement, having a lovely family is the meaningful life. It is therefore not surprising that infertility has a profound psychological stressful effect on couples. Most look for therapeutic and medical intervention and many, including those in low resources settings are prepared to face catastrophic financial hardship in order to pay for ART and visiting fertility centres. The dream of having biologically related baby, when the result isn't positive, may turn to become a source of frustration, hopelessness, depression, anxiety and tension.

**Results:** 102 women (67.1%) and 50 (32.9%) men participated in the study (response rate= 93%). The majority (44.1) between 35 - 45 years old. According to HADS the prevalence

of Depression was found to be conclusion, although it's lower than expected (lower than global statistics 17.0% for depression & 23.2% for anxiety) still it is significant to address more care & interests to those couples. Reasons include the fact the couples have strong religious faith & effective selfcounselling as well as family support. According to our finding that highlights the prevalence of anxiety & depression it's relatively high among couples who had ART failure. Also, there were no active counselling efforts structured in the candidate's pathway. Recommendations Psychological & emotional needs should be addressed by the presence of psychiatrist or specialized social worker to provide a constrictive counselling effort. We also recommend monitoring and evaluation the psychological status of candidates throughout the process.

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