POST TUBAL LIGATION SYNDROME

*Pts, Ptls, Post Tubal Sterilization Syndrome*

A side effect, comprising menstrual pain, abnormal bleeding and changes in behavior, observed in some patients after tubal ligation.

♀ Symptom ♀ Female

**About Post tubal ligation syndrome**

Post-tubal ligation syndrome represents several symptoms, such as abnormal bleeding, menstrual pain and increased premenstrual distress, that have been reported in women who underwent tubal sterilization, also called tubal ligation. Tubal sterilization is the most commonly used method of family planning.

**Tubal ligation**

This is a surgical procedure for sterilization in which a woman’s Fallopian tubes (Pic. 1) are clamped and blocked or severed and sealed, either of which prevents eggs from reaching the uterus for implantation (Pic. 2).

It is considered a major surgery, typically requiring the patient to undergo local, general, or spinal anesthesia. After the anesthesia takes effect, a surgeon will make a small incision at each side of, but just below the navel in order to gain access to each of the two Fallopian tubes. With traditional tubal ligation, the surgeon severs the tubes, and then ties (ligates) them off thereby preventing the travel of eggs to the uterus. Other methods include using clips or rings to clamp them shut, or severing and cauterizing them. Tubal ligation is usually done in a hospital operating-room setting.

A tubal ligation is approximately 99% effective in the first year following the procedure. In the following years the effectiveness may be reduced slightly since the Fallopian tubes can, in some cases, reform or reconnect which can cause
unintended pregnancy. Method failure is difficult to detect, except by subsequent pregnancy.

Most patients who undergo tubal ligation experience little to no symptoms. However, there is evidence of a set of symptoms that are experienced by some of the patients. These symptoms have been summarily called post tubal ligation syndrome, and they may include increased premenstrual distress, heavier and more prolonged menstrual bleeding, increased dysmenorrhea (painful menstruation), changes in sexual behavior and emotional health, mood swings and depression.

The risk for women 20–29 years of age with pre-existing histories of menstrual dysfunction may be increased, "although they do not appear to undergo significant hormonal changes". Questions regarding the existence of a post tubal ligation syndrome of menstrual abnormalities continue.

The underlying cause of post-tubal ligation syndrome is still not fully understood. Some authors have attributed it to ovarian dysfunction due to decreased blood supply, with subsequent decrease in ovarian hormone levels. However, other studies have reported no deterioration of ovarian function after tubal ligation. Discontinuing hormonal birth control has its own side effects, many of which are also commonly attributed to post-tubal sterilization syndrome. The women who use oral contraceptive may have some menstrual changes after sterilization attributable solely to cessation of oral contraceptive use. Furthermore, sterilization related menstrual changes during the first years of sterilization may occur also due to some psychological reaction to tubal ligation.

Find more about related issues

**organs**

**Fallopian tubes**

Two very fine tubes that transport sperm toward the egg, and allow passage of the fertilized egg back to the uterus for implantation.

Learn more at: [www.fertilitypedia.org/edu/organs/fallopian-tubes](http://www.fertilitypedia.org/edu/organs/fallopian-tubes)

**Gallery**
The organs of the female reproductive tract. The Fallopian tubes lead from the ovaries into the uterus.

An illustration of the most common surgical procedures performed on the Fallopian tubes, including tubal ligation.

Sources


“The risk of menstrual abnormalities after tubal sterilization: a case control study (http://bmcwomenshealth.biomedcentral.com/articles/10.1186/1472-6874-5-5)” —by Shobeiri and AtashKhoii licensed under CC BY 2.0

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