

RESEARCH BRIEF

Patterns of hysterectomy in India: A national and state-level analysis

The National Family Health Survey (NFHS) included questions about hysterectomy for the first time in 2015-2016 in response to demand for data to inform national and state-level policy. Understanding the prevalence of, indications for, and characteristics associated with undergoing a hysterectomy may help to identify critical issues in the public health response to gynecological morbidity in India. This study examined the national and state-level hysterectomy prevalence, with the aim of identifying individual- and household- level factors associated with undergoing the procedure.



RECOMMENDATIONS



Treatment for gynecological morbidities, such as excessive bleeding, must be prioritized to reduce the use of hysterectomy and ensuing premature menopause among women in their thirties.



More attention is needed for gynecological care for rural women and women who live in states with higher hysterectomy rates, who are likely presented with few alternatives to hysterectomy to treat benign morbidities.



Improved training to primary care providers on management of gynecological morbidity can ensure non-surgical treatment options and alternatives to hysterectomy, especially for young women.



Medical audits and quality monitoring may be used to assess and reduce the instances of unnecessary medical procedures.



Photo credit: Population Council

Hysterectomies are currently conducted in response to several types of gynecological morbidities, even in cases where it may not be clinically necessary. Evidence on the prevalence of hysterectomies in India can reveal how women's primary health-care needs are being addressed and identify opportunities to provide better health care.

FINDINGS

- The prevalence of hysterectomies was 0.36% among women aged 15-29 years, 3.6% (30-39 years), and 9.2% (40-49 years). Approximately two-thirds of hysterectomies were performed in private facilities.
- Excessive menstrual bleeding and pain, fibroids, uterine disorders and ruptures were the primary reasons reported for undergoing hysterectomies. A smaller proportion of women reported cancer, uterine prolapse and postpartum hemorrhage.
- Nationally, nearly half (46%) of all women with a hysterectomy had been sterilized for contraception, and 17.2% had a history of a caesarian delivery.
- Prevalence of hysterectomy was below 2% in all north-east Indian states. In contrast, prevalence was much higher in four states for women ages 40-49: Andhra Pradesh (22.4%), Bihar (14.5%), Gujarat (12.6%), and Telangana (20.1%).

METHOD

Multivariate logistic regression conducted using married women (aged 15-49 years) from NFHS-4 (2015-16) to examine prevalence of hysterectomy and identify associated factors.

RASTA

RASTA (Research and Analyses for Scientific Transformation and Advancement) is a multi-institutional research utilization initiative led by Population Council. For more information please contact: rasta@popcouncil.org

EVIDENCE

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