# INTRODUCTION

In Egypt, as well as in other developing countries, the overpopulation problem is the main obstacle for socioeconomic and health development. Therefore, successful implementation of family planning programs is the only way to face the overpopulation problem. A new study about the population situation in Egypt conducted by "RAPID" (Resources for The Awareness of Population Impacts on Development), shows that if the rate of population growth in Egypt remains at the present level, the population will reach 69.5 million in the year of 2000 (Fahmy, 1983).

Contraception is the main principle of family planning. It can be achieved by pills, intrauterine contraceptive devices (IUCDs), injectable contraceptives and other methods. IUCDs constitute one of the main methods of contraception and the types of devices in common use include; non medicated plastic lippes loop and copper containing devices.

IUCDs act mainly by their local endometerial effect. However, it is possible that IUCDS exert other mechanism which may contribute to its contraceptive action (Horn et al., 1975). There is a possible role for prolactin in contraception with IUCDs. Fortuny

et al. (1973), reported that plasma prolactin increased immediately after the insertion of IUCDS in 6 women with apparently normal ovulatory cycles, but prolactin levels during the following two menstrual cycles were similar to these observed in normal menstrual cycles. Moreover, Horn et al. (1975), found that there was hyperpolactinemia and galactorrhoea in 2 women after application of IUCDS and that galactorrhoea ceased after removal of the devices.

In addition Meth et al. (1977), proved that serum level of prolactin increased in women using copper T IUCDS for different duration than in non users.

On the other hand, Spellacy et al. (1975), have reported that basal, and phenothiazine stimulated prolactin levesl did not change significantly in women on injectable contraceptive medroxy progesterone acetate compared to an inert IUCDS groups.

Recently, Hassan et al. (1984), suggested that one of the mecahnisms by which IUCD prevent pregnancy is that it interfers with ovulation by increasing of the serum prolactin levels.

The report of contraversy regarding the effect of IUCDs an serum prolacten level and the possibility that increased prolactin with IUCDs, reported by some authors, may be involved in the contraceptive effect of IUCDs stimulated to do this work.