SUMMARY AND CONCLUSION

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Polycystic ovarian disease (PCOD) is a common gynaecological endocrine disorder. Gross sclerocystic change in the human ovary were clearly described by chereau in 1845, but more interest was aroused in 1935, when this anatomical abnormality was related by stein and leventhal to a clinical syndrome consisting of menstrual irregularity featuring amenorrhoea or oligomenorrhoea, hirsutism and obesity together with demonstration of enlarged polycystic ovaries.

Sixty patients with PCOD were selected for this work, but ten patients escaped from our study and were not included in the statistical study.

Forty one patients were suffering from primary infertility and 9 patients were suffering from secondary infertility. The mean duration of infertility of fifty patients were 3.92 ± 1.42 with a range 2-7 years and the mean duration of age was 28.67 ± 3.04 years. Patients were divided into 3 groups, in the first group (17 patients), ovulation was induced by clomiphene citrate in a dose of 100 mg daily for 5 days starting from fifth day of the menstrual cycle. The second group (17 patients), ovulation was induced by 50 mg of clomiphine citrate and 20 mg of tamoxifen citrate from the fifth day of cycle for 5 days and the third group were

given combined oral contraceptive pills (gynera) for 3 months before starting induction of ovulation to be followed by the same induction protocol of the second group immediately. The ovulation response in the first group was 70.59%, while in the second group 82.35% and 68.75% in the third group. While, the occurance of pregnancy in the first group 17.6%, 11.8% in the second group and 12.5% in the third group.

The present study showed that clomiphene citrate/tamoxifen citrate combination was not effective in ovulation induction than clomiphene citrate alone. Also, pretreatment with oral contraceptive pills followed by ovarian induction with clomiphene citrate and tamoxifen citrate was not effective than clomiphene citrate alone or combined clomiphene citrate and tamoxifen citrate.

The rate of pregnancy in the present study (11.8%, 12.5%) is not that miserable. The clomiphene citrate and tamoxifen combination therapy is safe and all the patients completed the treatment protocols without any major complaints. All pregnancies were normal and single.

So, from this study, we conclude that there is no statistical signifcant difference between the three groups regarding number mature follicles, time of HCG administration, ovulation response and pregnancy rate.