Reproductive Health Class 12 Key Points

CBSE Class 12 Biology · NCERT · for boards, NEET and JEE revision

ChapterNotes

What Reproductive Health Means

WHO: physical · emotional · behavioural · social well-being

Foundation concept for the whole chapter.

- Covers physical, emotional, behavioural and social health of reproduction
- Goal: a reproductively healthy society
- Built on awareness, facilities and counselling

Family Planning & RCH

1951 Family Planning → renamed RCH (Reproductive & Child Health Care)

RCH widened the original family-planning scope.

- Spread info via audio-visual & print media, schools (sex education), counselling
- Topics: adolescence, STIs, birth control, pregnancy & post-natal care
- Improvement shown by lower MMR & IMR and smaller families

Population Explosion

Cause: rapid fall in MMR & IMR + more people of reproducible age

Growth rate at the time was ~1.7% (17 per 1000 per year).

- Population ~350 million at independence (1947), >1 billion by 2000
- Better health and living conditions also drove growth
- Demands deliberate birth control to stabilise numbers

Checking Population Growth

Marriageable age: 18 yr females · 21 yr males · 'Hum Do Hamare Do'

Contraception = deliberate prevention of pregnancy.

- Incentives offered to couples with small families
- Ideal contraceptive: user-friendly, effective, reversible, least side-effects
- Must not interfere with sexual drive or the sexual act

Natural, Barrier & IUD Methods

Natural · Barrier (condoms) · IUDs (CuT, LNG-20, Progestasert)

Condoms also protect against STIs & HIV; IUDs are ideal for spacing/delaying.

- Natural: periodic abstinence (fertile days 10-17), withdrawal, lactational amenorrhea - high failure rate
- Copper IUDs increase phagocytosis of sperm; hormonal IUDs make uterus/cervix hostile
- Barrier caps and diaphragms block sperm at the cervix

Hormonal & Surgical Methods

Pills (Saheli, weekly) · Vasectomy (vas deferens) · Tubectomy (fallopian tubes)

Emergency contraception works within 72 hours of coitus.

- Oral pills inhibit ovulation & implantation and alter cervical mucus
- Saheli is a non-steroidal once-a-week pill
- Sterilisation is highly effective but poorly reversible

Medical Termination of Pregnancy

Legalised in India in 1971 · safe in first trimester (≤ 12 weeks)

Second-trimester abortions are much riskier.

- ~45-50 million MTPs worldwide each year (~1/5 of conceptions)
- Done for unwanted pregnancy, contraceptive failure, rape, or risk to mother/foetus
- Amniocentesis is banned for sex determination (checks female foeticide)

Sexually Transmitted Infections

Gonorrhoea · Syphilis · Genital herpes · Chlamydiasis · Hepatitis-B · HIV/AIDS

HIV/AIDS is the most dangerous STI.

- Bacterial STIs (gonorrhoea, syphilis, chlamydiasis) are curable if caught early
- Genital herpes, Hepatitis-B and HIV are not completely curable
- Untreated → PID, ectopic pregnancy, infertility, even cancer; prevent with condoms & one partner

Assisted Reproductive Technologies

IVF · ZIFT (≤8 blastomeres → fallopian tube) · IUT (>8 → uterus) · GIFT · ICSI · IUI

Infertility can lie in the male or female partner; adoption is also an option.

- IVF = fertilisation outside the body ('test-tube baby')
- ICSI injects a single sperm directly into the ovum
- GIFT transfers a donor ovum into the fallopian tube of a woman who can't produce ova

Quick revision

- Contraceptives: natural (abstinence, LAM), barrier (condom), IUD (CuT), hormonal (Saheli), surgical (vasectomy/tubectomy)
- Only condoms protect against STDs
- STDs: bacterial (gonorrhoea, syphilis) + viral (HIV, herpes, HPV, Hep B)
- ART: IVF-ET, ZIFT, GIFT, ICSI, AI/IUI
- IVF = fertilisation outside; GIFT = gamete transfer (fertilisation inside)
- MTP legal up to 20 weeks; PCPNDT Act bans sex determination
- Saheli: non-steroidal, once/week, CDRI Lucknow

Full chapter notes with solved examples and practice questions: https://chapternotes.in/cbse/class-12-biology/reproductive-health-class-12-notes/