INTISARI

Belum banyak masyarakat yang mengetahui efek Depo Provera pada siklus menstruasi. Perlu kiranya melaporkan hal-hal yang berhubungan dengan efek samping penggunaan metode kontrasepsi ini terhadap siklus menstruasi. Tujuan penulisan karya tulis ini adalah untuk mengetahui hubungan Depo Provera dengan gangguan siklus menstruasi.

Pemberian suntikan Depo Provera intra muskular menyebabkan perubahan endometrium ke fase sekresi diikuti dengan inhibisi (supresi atau atrofi) dan akhirnya kembali normal pada fase proliferatif. Pada atrofi, endometrium menjadi tipis dan inaktif. Peristiwa tersebut berkaitan dengan kejadian amenorrhoea. Spotting kerap ditemukan pada akseptor Depo Provera. Arteriola spiral, arteriola besar serta arteri dapat tersupresi. Venula berdinding tipis terdilatasi dan berakibat bocornya dinding pembuluh darah. Spotting berkaitan dengan fluktuasi kadar progesteron sirkulasi dalam jangka waktu tertentu. Bio aktivitas progestogen terhadap pengaturan kesuburan ditentukan oleh reseptor progesteron pada endometrium yang telah disiapkan oleh estrogen. Progesteron menyebabkan labilisasi membran lisosom dan bocornya enzim lisosom sehingga merusak endometrium ataupun pembuluh darah lokal maupun general.

Gangguan lain yang ditimbulkan adalah menorrhagia. Dipustulasikan bahwa terdapat penurunan komponen membran basal pembuluh darah endometrium yang mempengaruhi kekuatan membran basal. Pengaruh fluktuasi konsentrasi progesteron dan estrogen, sensitifitas serta jumlah reseptor progesteron juga turut berperan dalam terjadinya gangguan ini. Kemungkinan terjadi kenaikan aktifitas fibrinolitik, turunnya aktifitas agregasi platelet dan vasodilatasi mempengaruhi volume dan durasi perdarahan. Kejadian diatas tidak membahayakan dan dapat kembali normal setelah penghentian penggunaan Depo-Provera. Diharapkan setelah mengetahuinya tidak lagi didapatkan keraguan dalam menggunakan metode kontrasepsi ini.

ABSTRACT

The effect of DMPA on menstrual cycle is remain a mystery for some of us. Due to that condition, it is necessary to report any adverse effect of the DMPA administration toward menstrual cycle. The goal of this thesis is to inform the effect of DMPA administration on menstrual cycle.

Administration of DMPA intra muscularly injection leads to endometrial thickens similar with the secretion appearances and followed by inhibition (suppression or atrophy) and finally recovery to normal in proliferate appearances. Endometrial suppression is recognized by decreased endometrial thickness, low cubical glandular epithelium, size, frequency, and complexity of intracellular organelles and in endometrial atrophy, the endometrium becomes thin and inactive. This may be associated with the increasing incidence of amenorrhoea in long term DMPA user. Spotting is commonly occurring among DMPA user. Suppression of coiled arteriole, arteriole, and artery are also being found. A number of dilated thin wall venule were found and causing blood vessel to leak. Spotting was related to circulating progesterone fluctuation in some period of time. Progesterone bioactivity towards fertility regulation is determined by its receptor in endometrium that has been prepared by estrogen. Progesterone could cause lysosome membrane instability and release of its enzyme and cause defect of endometrium and blood vessel locally or generally.

Another adverse effect of using DMPA is menorrhagia. It was postulated that there is a decrease in the amount of basement membrane component present around endometrial vessels may influence basement membrane strength. Fluctuation of progesterone and estrogen concentration, the amount and the sensitivity of progesterone receptor may have important role in the making of this disturbance. It is possible that increased fibrinolytic activity or decreased platelet aggregation may contribute to the volume and duration of the bleeding.

It is important to realize that all of those will not endangered their health and could return to normal after discontinuing the use of DMPA. Hopefully after knowing this, there will be no more doubt in using this method.