

WHEN SHE IS BURDENED

With Unwanted Pregnancy



She  Needs The **SAFETY & SECURITY** Of...

N.T.T.

The NATURAL TERMINATOR of PREGNANCY



N.T.T.

The Natural Terminator
Relieves The Burden Of Unwanted Pregnancy



The original and unique herbal product



Simple & safe way for MTP



Available in various sizes according to the size of uteri



Requires no extra skill/equipment/surgical theatre

N.T.T.

The Natural Terminator

Relieves The Burden Of Unwanted Pregnancy

N.T.T. is the original research product of **SYNTHOCHEM** which has revolutionised the concept of M.T.P. The simplicity and safety of the method has made it unique.

Description :

N.T.T. resembles in size and shape with Laminaria Tent but it is coated with herbal extracts which are responsible for its action. N.T.T. is available in various thicknesses owing to variable size of each OS. The doctor has vast choice of selection of size of N.T.T. according to age and physique of the woman, period of gestation and parity.

Composition :

Every tent contains

Ext. Danti (B. Axillare)	5%
Ext. Pippli (P. Longum)	5%
Ext. Aloe	37%
Ext. Abroma	25%
Ext Plambago Rosea	20%
Art Kshir	q.s.

Mode of Action :

The ingredients of outer coating of N.T.T. gets dissolved in the mucous present in endometrium within few minutes of its insertion into the uterus via OS. These ingredients produce pains resembling to labour pains. The uterus undergoes rhythmic contractions and relaxations. This action leads to dilatation of cervix, detachment of embryo and finally expulsion of the contents of uterus.

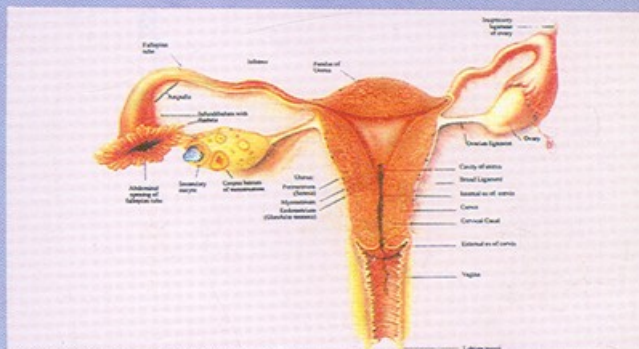
Sterilization :

Although ingredients of N.T.T. mainly plumbagin present in P. rosea is antiseptic and supposed to keep the device sterile but for 100% surety immersing of N.T.T. for about 6-8 hours in alcohol, anaesthetic ether or chloroform is advised. The ingredients of outer coating of N.T.T. do not dissolve in these disinfectants although these are solvents by nature.

A. Tripathy et. al. in their study of 100 cases of M.T.P. used N.T.T. without sterilisation with 100% success rate and no complication. N.S. Shivamurthy also used N.T.T. without further sterilization with the same success rate and no complications attributable to sepsis by induced insertion. Vaginal swabs were taken before insertion of N.T.T. and after M.T.P. for bacteriological examination. The culture did not show any extra-bacterial growth attributable to N.T.T. insertion.

Method Of Insertion :

The patient is kept in lithotomy position and the cervix is exposed by Sim's vaginal speculum. The anterior lip of the cervix is held with a sponge holder and the tent (Tents) are inserted into the uterus via cervical OS. As the length of the non-gravid uterus is 7.5 cm, and N.T.T. measures of 6.3 cms. there is no risk of perforation of uterus if properly inserted. A dried sterile guage is tied between the threads of the tent to make sure that the tent will not slip into the uterine cavity. the N.T.T. in Situ is shown in the following fig.



Post-Insertion Precautions :

A course of suitable antibiotic and/or sulphonamides along with A.T.S. must be given routinely as done during other surgical operations.

Indications :

1. Medical Termination Of Pregnancy
2. Induction of labour-Safety of the foetus has not been studied. So it should be done only in intra-uterine foetal death.

Contra-Indications :

Carcinoma of cervix, ectopic gestation, severe anaemia, bleeding tendency during active stage of infection, cervicitis due to pelvic infection/physical/chemical agents.

Warnings :

If there is no response within 12 hours of insertion, second N.T.T. may be tried. Diagnosis of pregnancy must be confirmed by urine test routinely in trimester of gestation. In cases of misdiagnosis of false pregnancy N.T.T. may not produce contractions in the uterus, labour like pains and consequently no bleeding. In 1st trimester of pregnancy diagnosis must be confirmed by radiological or ultrasonographical techniques, to avoid misdiagnosis for ectopic gestation and pelvic/abdominal tumours/growth. If profuse bleeding occurs prior to clearance of product of conception (p.o.c.) curettage must be performed without further waiting for outcome. If severe bleeding occurs after clearance of p.o.c. this is indication of retention of a part or in full of placenta. In such cases after manual examination in completely sterile conditions curettage must be performed. I.V. fluids with Calcium Gluconate such as injection Calcium Sandoz be given along with other haemostatic injections and tablets. If after 72 hours of insertion, there is no clearance of p.o.c. curettage must be performed to avoid sepsis and related complications.

Complications :

No major complications such as cervical tear, profuse bleeding p.v., pelvic sepsis, shock and mortality has been reported. Rise of mild temperature has been reported by Tripathy et. al in 12%, Gangwal and Singh in 6%, Tresa Philomena in 16.67% and K.P. Sharma in 14% of cases which subsided either on clearance of p.o.c. or by giving analgesics. Vomiting of mild degree has been reported by Shivamurthy in 8%, Tripathy et. al in 5%, Gangwal in 2% of cases. Pain requiring no treatment has been reported in 36% and 10% by Shivamurthy and K.P. Sharma respectively. No perforation of uterus by insertion of N.T.T. has been reported.

N.T.T.

Highly Effective Natural Terminator With Proven Safety Record

Efficacy and Safety :

Dr. A. Tripathy et al (1985-86). Department of Obstetrics and Gynaecology, M.K.C.G. Medical College Berhampur, Orissa, in their study of 100 cases of M.T.P., observed that "in all the cases expulsion was spontaneous. The success rate was 100% more of them had major complications like severe bleeding or pelvic infection. Dr. Rama Krishna Raju, MD., D.G.O., Professor & Head of the Dept. of Obst. & Gynae., Andhra Medical College, Visakhapatnam reported satisfactory results. Dr. N.S. Shivamurthy, D.G.O., M.D., (1986), Research Scholar, Mysore Medical College, Mysore, in his research work noted success rate of N.T.T. as 100% as all the cases were complete abortions without any major complication except tolerable nausea and vomiting in 8% and pain in 4% of cases relievable with analgesics. Dr. G. Meenaksi, M.D., D.G.O. (1988), Professor Obst. and Gynae. Andhra Medical College and Obstetrician & Gynaecologist, King George Hospital, Vishakhapatnam, found N.T.T. effective in 97.6% cases without any major complication. Dr. K.P. Sharma, M.D., M.R.S.H. (1988), Referral Hospital, Kutumba, Aurangabad, in his study of 100 cases with N.T.T. of women of varying age, marital status and gestational age observed complete abortion in cent-percent cases taking, induction abortion interval ranging between 12 to 48 hours in most of the cases, two cases taking 72 hours and without any major complication. Dr. C.S. Dawn, M.D., F.R.C.O.G (London), Secretary General, National Association for Voluntary Sterilization of India

(NAVSI), Dr. Jeyanti Dutta and Dr. Anima Mukherjee (1987), B.R. Singh Hospital Centre for Medical Education & Research, Calcutta in their study of 48 cases of M.T.P., they observed expulsion of foetus within 24 hours in most of the cases, one case did not abort up to 48 hours and reported as failed. If they had waited for 72 hours there were chances of abortion of this case too.

Dr. G.M. Poonima, M.D., D.G.O., in her Comparative Study (1991) of N.T.T. with other methods such as extra-amniotic 0.1% Ethacrydin Lactate and Intra-Amniotic 20% Hypertonic Saline, observed that N.T.T. proved better method as it is safer, more effective and cheaper as compared to above two methods.

Dr. Miss Indira Mulage, M.D., D.G.O (1992), reported success rate 98% with advantages like spontaneous expulsion, minimal complication rate compared to other (methods), ease and simplicity of technique of insertion and low cost of device. This (N.T.T.) method is not only a safest procedure for abortion seekers but can turn as an asset for the country.

Period Of Gestation For Safe Termination Of Pregnancy:

It is possible to terminate pregnancy of any length with N.T.T. but we warn that a doctor must observe strictly the norms laid down by the Medical termination of Pregnancy Act 1971, and Rules 1975 with Regulation.

Presentation :

N.T.T. is supplied in packets of 10 tents each.

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7-B Shahjahanpur Road, Bareilly - 243 005