Reproductive Health

Class 12 Biology · 24 NEET MCQs with answers & explanations

Reproductive Health is a short but scoring chapter. NEET questions test your knowledge of contraceptive methods (their mechanism, not just names), STIs, infertility treatments (IVF, GIFT, ZIFT, ICSI) and population control programmes. The chapter is mostly factual, so a quick revision table can lock in easy marks.

Contraceptive Methods & ART

Method / Technique	Key Fact
Barrier methods	Condoms, diaphragm, cervical cap — prevent sperm from meeting ovum
IUDs	Cu-T releases Cu ions (spermicidal); hormonal IUDs release progesterone
Oral pills	Progesterone-estrogen combos — inhibit ovulation and implantation
Surgical	Vasectomy (male), tubectomy (female) — permanent, high effectiveness
IVF	In vitro fertilisation — fertilisation outside body, embryo transferred to uterus
GIFT vs ZIFT	GIFT: gamete transfer to fallopian tube; ZIFT: zygote (≤8 cells) transferred

Questions

Q1. Which of the following correctly identifies the contraceptive method that is NOT a natural/traditional method?

(A) Lactational amenorrhoea
(B) Periodic abstinence
(C) Coitus interruptus
(D) Vault

Q2. A couple undergoes IVF and the resulting embryo has up to 8 blastomeres. According to ART terminology, into which site and by which technique should this embryo be transferred?

(A) GIFT into the fallopian tube
(B) ZIFT into the fallopian tube
(C) IUI into the uterus
(D) ICSI directly into the ovum

Q3. Which of the following correctly and completely identifies Saheli?

(A) It is a copper-releasing IUD inserted into the uterus
(B) It is a once-daily steroidal contraceptive pill
(C) It is a non-steroidal oral contraceptive developed at CDRI, Lucknow, taken once a week
(D) It is a barrier device placed over the cervix

Q4. Infertility is defined as inability to conceive even after

(A) One year of unprotected regular intercourse
(B) Three months of marriage
(C) Two months of treatment
(D) Single act of coitus

Q5. Which of the following is a cause of male infertility?

(A) Blocked fallopian tubes
(B) Low sperm count (oligospermia)
(C) Anovulation
(D) Endometriosis

Q6. Which condition is primarily associated with female infertility?

(A) Oligospermia
(B) Blockage of vas deferens
(C) Blocked fallopian tubes
(D) Low testosterone level

Q7. Which of the following is NOT a natural or traditional contraceptive method?

(A) Periodic abstinence
(B) Lactational amenorrhoea
(C) Vaults
(D) Coitus interruptus

Q8. Which option correctly distinguishes amniocentesis from Copper-T?

(A) Amniocentesis is prenatal diagnosis; Copper-T is an IUD
(B) Both are assisted reproduction techniques
(C) Amniocentesis is surgical sterilisation; Copper-T is an ART
(D) Both are methods of natural contraception

Q9. Which option correctly matches Saheli with its contraceptive category?

(A) Saheli — non-steroidal oral contraceptive
(B) Lippes loop — copper-releasing IUD
(C) Multiload 375 — hormone-releasing IUD
(D) Vault — natural method

Q10. Which of the following correctly distinguishes a barrier contraceptive from a hormonal contraceptive?

(A) Condom prevents sperm from entering the female reproductive tract, whereas oral pills primarily suppress ovulation
(B) Condom suppresses ovulation, whereas oral pills block sperm mechanically
(C) Both methods prevent conception only by blocking the fallopian tubes
(D) Both methods permanently inhibit gametogenesis

Q11. Which contraceptive method can simultaneously provide contraception and reduce the risk of transmission of several sexually transmitted infections?

(A) Copper-T, because it releases copper ions that destroy pathogens
(B) Condom, because it acts as a physical barrier that can prevent both pregnancy and transmission of several STIs
(C) Vasectomy, because it prevents sperm from entering the semen
(D) Oral contraceptive pill, because it suppresses ovulation and alters vaginal flora

Q12. Which of the following correctly identifies a non-medicated intrauterine contraceptive device?

(A) LNG-20
(B) Multiload 375
(C) Lippes loop
(D) Saheli

Q13. According to NCERT, population explosion in India occurred mainly due to

(A) Rapid decline in death rate, MMR and IMR
(B) Increased immigration from neighbouring countries
(C) Shortened female reproductive span
(D) Sudden increase in fertility rate alone

Q14. Which of the following correctly describes the ideal contraceptive as per NCERT?

(A) Permanent, hormonal and surgeon-administered
(B) User-friendly, reversible, minimal side effects
(C) Prevents STIs and fertilisation simultaneously
(D) Effective only when used with barrier method

Q15. Which of the following is a natural method of contraception?

(A) Tubectomy
(B) Vasectomy
(C) Periodic abstinence
(D) Intrauterine device

Q16. Gonorrhoea is caused by

(A) Chlamydia trachomatis
(B) Neisseria gonorrhoeae
(C) Treponema pallidum
(D) Trichomonas vaginalis

Q17. AIDS develops due to infection with

(A) Hepatitis B virus
(B) Human papillomavirus
(C) Herpes simplex virus
(D) Human immunodeficiency virus

Q18. Which of the following is a protozoan sexually transmitted infection?

(A) Syphilis
(B) Gonorrhoea
(C) Trichomoniasis
(D) Genital herpes

Q19. According to NCERT, reproductive health refers to

(A) Total well-being in all aspects of reproduction
(B) Absence of reproductive diseases only
(C) Ability to reproduce at will
(D) Successful childbirth without complications

Q20. India initiated a national family planning programme in 1951 primarily to

(A) Promote assisted reproductive technologies
(B) Check population growth through planned parenthood
(C) Increase birth rate for economic growth
(D) Provide compulsory sterilisation for all couples

Q21. Which indicator most directly reflects improvement in reproductive health services?

(A) Increase in crude birth rate
(B) Rise in total registered pregnancies
(C) Reduction in maternal mortality rate
(D) Rise in population density

Q22. The Medical Termination of Pregnancy Act was implemented in India in

(A) 1971
(B) 1961
(C) 1981
(D) 1991

Q23. MTP is considered relatively safe when performed during

(A) Late second trimester
(B) First trimester up to 12 weeks
(C) Third trimester only
(D) Beyond 20 weeks gestation

Q24. Under the MTP Act, termination with approval of two registered practitioners is permitted up to

(A) 8 weeks
(B) 12 weeks
(C) 24 weeks
(D) 28 weeks

Answer key

1-D	**2-B**	**3-C**	**4-A**	**5-B**	**6-C**	**7-C**	**8-A**
9-A	**10-A**	**11-B**	**12-C**	**13-A**	**14-B**	**15-C**	**16-B**
17-D	**18-C**	**19-A**	**20-B**	**21-C**	**22-A**	**23-B**	**24-C**

Answers with explanations

Q1 — Answer: (D) Vault
Vaults are barrier contraceptives that physically cover the cervix to prevent sperm entry; they belong to the barrier category, not the natural/traditional category. Lactational amenorrhoea, periodic abstinence, and coitus interruptus are all classified as natural/traditional methods in NCERT.

Q2 — Answer: (B) ZIFT into the fallopian tube
ZIFT stands for zygote intrafallopian transfer and involves transfer of a zygote or early embryo of up to 8 blastomeres into the fallopian tube. GIFT transfers gametes rather than an already-formed embryo. IUI places semen into the uterus and ICSI involves direct sperm injection into an ovum.

Q3 — Answer: (C) It is a non-steroidal oral contraceptive developed at CDRI, Lucknow, taken once a week
Saheli is a non-steroidal oral contraceptive developed at the Central Drug Research Institute, Lucknow. It is taken once a week and has minimal side effects. It is neither an IUD nor a barrier method. The trap is confusing its weekly dosage schedule with IUD mechanisms or misclassifying it as steroidal.

Q4 — Answer: (A) One year of unprotected regular intercourse
NCERT defines infertility as failure to conceive after one year of regular unprotected coitus. Duration and regularity both matter; three months or a single act are insufficient diagnostic thresholds.

Q5 — Answer: (B) Low sperm count (oligospermia)
Low sperm count or poor sperm motility are primary male infertility causes. Blocked fallopian tubes, anovulation, and endometriosis are exclusively female reproductive tract conditions.

Q6 — Answer: (C) Blocked fallopian tubes
Blocked fallopian tubes physically prevent sperm from reaching the ovum. Oligospermia, vas deferens blockage, and low testosterone are male-factor infertility conditions.

Q7 — Answer: (C) Vaults
Natural/traditional methods include periodic abstinence, lactational amenorrhoea and coitus interruptus. Vaults are physical barrier devices, not a natural or traditional method, making them the odd one out.

Q8 — Answer: (A) Amniocentesis is prenatal diagnosis; Copper-T is an IUD
Amniocentesis is a prenatal diagnostic procedure used to detect chromosomal or genetic abnormalities in the foetus. Copper-T is an intrauterine contraceptive device that impairs sperm function. The two serve entirely different purposes.

Q9 — Answer: (A) Saheli — non-steroidal oral contraceptive
Saheli is a non-steroidal oral contraceptive pill. Lippes loop is a non-medicated IUD, not copper-releasing. Multiload 375 is a copper-releasing IUD, not hormone-releasing. Vaults are barrier devices, not natural methods. Only Saheli is correctly matched.

Q10 — Answer: (A) Condom prevents sperm from entering the female reproductive tract, whereas oral pills primarily suppress ovulation
A condom acts as a physical barrier that prevents sperm from entering the female reproductive tract. Oral contraceptive pills contain hormones that suppress gonadotropin secretion and thereby prevent ovulation. The classic trap is reversing the mechanisms of these two distinct contraceptive categories.

Q11 — Answer: (B) Condom, because it acts as a physical barrier that can prevent both pregnancy and transmission of several STIs
Condoms provide dual protection: as a barrier, they can prevent sperm from reaching the ovum and can also reduce transmission of several STIs including HIV. Copper-T and oral pills are contraceptive but do not provide barrier protection against pathogens. Vasectomy is surgical sterilisation with no STI-protective mechanism.

Q12 — Answer: (C) Lippes loop
Lippes loop is a non-medicated IUD that carries no drug or metal coating. LNG-20 is a hormone-releasing IUD, Multiload 375 is a copper-releasing IUD, and Saheli is a non-steroidal oral contraceptive pill, not an IUD.

Q13 — Answer: (A) Rapid decline in death rate, MMR and IMR
NCERT attributes population explosion to rapid decline in death rate, MMR and IMR — not immigration or sudden fertility surge, which are common wrong assumptions.

Q14 — Answer: (B) User-friendly, reversible, minimal side effects
NCERT lists ideal contraceptive properties as user-friendliness, easy availability, minimal side effects and reversibility — none of which require surgery or STI protection.

Q15 — Answer: (C) Periodic abstinence
Periodic abstinence avoids coitus during the fertile window and requires no device or surgery; tubectomy and vasectomy are surgical, IUD is a device-based method.

Q16 — Answer: (B) Neisseria gonorrhoeae
Gonorrhoea is a bacterial STI caused by Neisseria gonorrhoeae. Chlamydia trachomatis causes chlamydiasis — the most common distractor since both are gram-negative bacterial STIs.

Q17 — Answer: (D) Human immunodeficiency virus
AIDS is caused by HIV, which selectively destroys CD4+ T helper cells, progressively collapsing cell-mediated immunity. Hepatitis B and HPV are viral STIs but do not cause AIDS.

Q18 — Answer: (C) Trichomoniasis
Trichomoniasis is caused by the protozoan Trichomonas vaginalis. Syphilis and gonorrhoea are bacterial; genital herpes is viral — all four are STIs but differ in causative organism type.

Q19 — Answer: (A) Total well-being in all aspects of reproduction
NCERT defines reproductive health as total well-being in physical, emotional, behavioural and social aspects of reproduction — not merely absence of disease or ability to deliver successfully.

Q20 — Answer: (B) Check population growth through planned parenthood
The 1951 programme aimed to check population growth through voluntary family planning; compulsory sterilisation was never the intent, and ART did not exist then.

Q21 — Answer: (C) Reduction in maternal mortality rate
Reduction in MMR directly reflects quality of antenatal, natal and postnatal care. Crude birth rate and density measure population size, not healthcare quality.

Q22 — Answer: (A) 1971
The MTP Act was passed in 1971 to provide legal and safe abortion services, primarily to reduce maternal mortality caused by unsafe illegal abortions.

Q23 — Answer: (B) First trimester up to 12 weeks
First trimester MTP (up to 12 weeks) carries significantly lower risk; complications increase progressively with gestational age, making second and third trimester procedures more hazardous.

Q24 — Answer: (C) 24 weeks
Under the MTP (Amendment) Act, 2021, a pregnancy can be terminated up to 12 weeks on the opinion of one registered medical practitioner, and between 12 and 24 weeks on the opinion of two registered medical practitioners on specified grounds. (The older 1971 Act set the upper limit at 20 weeks.)

Practise all 389 questions on Reproductive Health
RankUp app — 45,000+ NEET questions, 30,000+ flashcards, mock tests. Built by Dr. Deepak Sahu, MBBS Gold Medalist.
Download free on Google Play · Practise online

Questions based on NCERT. RankUp is not affiliated with NTA.