Efficacy, Acceptability, and Satisfaction Rate for Immediate Post placental insertion of intrauterine contraceptive device.

Prof. Tayyiba Wasim
Gynaecology Deptt
SIMS/ Services Hospital , Lahore
Pakistan
tayyibawasim@yahoo.com
Declaration of interest

- None
BACKGROUND:

- WHO recommends spacing of at least 3 years between births.
- High MMR, NMR, Anemia in LMIC is related to lack of birth spacing
  - Large unmet need for family planning among postpartum women in LMIC
- Current focus…. new opportunity to provide women for Healthy Spacing in the Post Partum period.
Contraceptive Prevalence Rate (aged 15-49 yrs) : 35%

Reference: 2012-13 PDHS
Insertion times include immediate postpartum (postplacental, intracesarean) and early (<48 hours) postpartum—in immediate
Advantages:

- Effective
- Long Acting Reversible method of Contraception (LARC)
- Safe, convenient and no increased risk perforation or infection
- Does not interfere with breast feeding.
- Does not affect sexual intercourse.
- Greater coverage of population
- Can be provided before the woman leaves the birthing facility
Limitations

- Changes in monthly bleeding pattern
- Training

- Expulsion rates (slightly higher 8 – 14%) are related to provider skill
OBJECTIVE: To evaluate the efficacy and acceptability of immediate postpartum IUCD insertion in women delivering vaginally or by caesarean section.
Reinvigorating the Postpartum IUD
Using a Low-Cost Simulation Model Project
Technical Group Orientation & Standardization Meeting
10-14th December 2012
Karachi & Lahore, Pakistan
METHODS

- PLACE & DURATION: Gynaecology deptt SIMS/Services hospital, Lahore
  - 2 years: July 2014 - June 2016
METHODS:

- **INCLUSION CRITERIA:** All pregnant patients coming to OPD & labour room were included.

- **EXCLUSION CRITERIA:**
  - Active lower genital tract infection
  - Membranes ruptured >18 hours
  - Known Uterine abnormality
  - Pt having PPH
Patients were counselled during antenatal period, during early labour & prior to elective caesarean section.

IUCD placed within 10 minutes of placenta removal.

Follow up done at week 01, 06 week & 6 months.
OUTCOMES:

- NO COMPLICATION
- MENSTRUAL IRREGULARITY
- VAGINAL DISCHARGE
- PELVIC PAIN
- EXPULSION
- REMOVAL
- SATISFACTION / CONTINUATION
RESULTS

COPYRIGHT OF SPEAKER
<table>
<thead>
<tr>
<th>2014-JUN 2016</th>
<th>TOTAL BIRTHS</th>
<th>TOTAL INSERTIONS</th>
<th>FOLLOW UP</th>
</tr>
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<tbody>
<tr>
<td></td>
<td>8040</td>
<td>2500</td>
<td>1300 (52%)</td>
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</table>
Socioeconomic Status:

Education:
- Masters
- Intermediate
- Matric
- ≤ Matric
<table>
<thead>
<tr>
<th>Condition</th>
<th>Frequency</th>
<th>Percentage</th>
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<tbody>
<tr>
<td>No complications</td>
<td>970</td>
<td>74.6%</td>
</tr>
<tr>
<td>Heavy/irregular menstrual bleeding</td>
<td>201</td>
<td>15%</td>
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<tr>
<td>Vaginal discharge</td>
<td>105</td>
<td>8.8%</td>
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<tr>
<td>Abdominal pain or discomfort</td>
<td>63</td>
<td>0.5%</td>
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<tr>
<td>Lost strings</td>
<td>20</td>
<td>1.5%</td>
</tr>
<tr>
<td>Spontaneous expulsion</td>
<td>12</td>
<td>0.9%</td>
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</tbody>
</table>
SATISFACTION

- SATISFIED/CONTINUATION: 1108 (85%)
- REMOVAL: 192 (15%)

Reasons for removal
- Bleeding PV: 102 (53%)
- Pressure from family: 80 (41%)
- Fear of complications: 22 (11%)
Reasons for Acceptance/Continuation

- Long term: 510 (46%)
- Non Hormonal: 482 (48.5%)
- Reversible: 245 (22%)
- Can be removed when desired: 312 (28%)
- Fertility will be immediately restored on removal: 351 (31%)
- Doesn't affect breastfeeding: 675 (61%)
CONCLUSION:
CONCLUSION

- PPIUCD is a safe & effective long acting reversible contraceptive method with a higher satisfaction rate & fewer side effects.
- It is excellent intervention in developing countries aiming to reduce maternal mortality.
- Motivation of providers & trainings are required to ensure continuation with fewer expulsions.
ACKNOWLEDGMENT

- NCMNH (National committee of maternal & neonatal Health)
- JHPIEGO
PPIUCD Data Jan 2012 to July 2016

- 10 intervention sites in Punjab & Karachi
- 82,514 clients counselled
- 40,817 PPIUCDs placed
- 68% follow up was achieved
- Trained 1734 SBAs

(Data courtesy Ncmnh, Pakistan)
SOGP 17th BIENNIAL CONFERENCE
23rd-25th February 2018, Karachi Pakistan
MATERNAL OUTCOMES