

Use of Different Clinical Contraceptives among Women in Model Family Planning Clinic (MFPC), Dhaka Medical College Hospital (DMCH)

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ABSTRACT

Introduction: Bangladesh is a overly populated country, and though now a days contraceptive methods use has increased,¹ yet there is need of its more planned and efficient action. Dhaka Medical College Hospital is a very suitable place for a study surveying the preferred methods of clinical contraceptives among women. **Aims and Objectives:** This study was to survey the preferred methods of contraceptives among women, age ranging from 19 to 48 yrs in MFPC, DMCH. **Methods and materials:** Total 823 outpatients were randomly selected who opted for clinical contraceptives during the period of January, 2019 to December, 2019. Patients with incomplete data were excluded. **Results:** Among 823 women, 419 (50.91%) preferred implants, 332 (40.34%) preferred Inj. Depot medroxy progesterone acetate, 42(5.1%) preferred intrauterine contraceptive device, and 30 (3.65%) women went for tubectomy. **Conclusion:** Implants are the most preferred methods of clinical contraceptives, followed by Inj. DMPA, IUCD, and tubectomy.

Keywords: Implants, Inj. DMPA, IUCD, Tubectomy.

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INTRODUCTION:

The use of contraceptives among women has increased since the era of new generation contraception has begun.¹ Women now have a broader range of choice in this case. But still there is contraception failure and we need to research the favorable methods of contraceptives for them to use, and Dhaka Medical College

being a tertiary medical centre is very suitable for such studies. And henceforth we decided to study the preferred mode of contraception among women who came to our Model Family Planning Clinic, DMCH. To increase the efficiency of use of contraceptives among Bangladeshi women. Clinical contraceptive methods here is used to indicate the methods that require administration by a person with clinical

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expertise. Wives' perceptions about family planning affected theirs as well as their husbands' knowledge and use of contraceptive methods' But husbands' perception of family planning didn't influence their knowledge and use of their contraceptive methods.⁵ So we preferred to focus on women and the contraceptive method they use. Special awareness creation with the help of health education interventions should be employed in the community.⁶

This study was aimed to survey the preferred methods of clinical contraceptives among women,

METHODS AND MATERIALS:

This descriptive cross-sectional study has been conducted on a sample of 823 female

patients in Model Family Planning Clinic, Dhaka Medical College Hospital. Duration of the study period was from January 2019 to December 2019. After taking informed written consent from the respondents, the data were collected from pretested questionnaire filled up by the respondents. Incomplete patient-data were excluded. Data were then tabulated manually.

RESULT:

Of 823 respondents, majority (60.99%) belonged to age group 19-28 years followed by 29-38 years (32.44%), then 39-48 years (6.56%). Among them, majority of respondents (50.91%) preferred implants, followed by inj. DMPA (40.34%), IUCD (5.1%), and tubectomy (3.65%) (Table I).

Table I. Distribution of use of contraceptives by age

contraception	19-28 yrs (%)	29-38 yrs (%)	39-48 yrs (%)	Total (%)
IUCD	15 (1.82) (2.99)	25 (3.04) (9.36)	2(0.24) (3.70)	42 (5.10)
Depot Inj.	177 (21.50) (35.26)	129(15.67) (48.31)	26(3.16) (48.15)	332(40.34)
Implants	301 (36.57) (59.96)	98(11.91) (36.70)	20 (2.43) (37.04)	419 (50.91)
Tubectomy	9 (1.09) (1.79)	15(1.82) (5.62)	6 (0.73) (11.11)	30 (3.65)
Total	502(61.00) (100)	267(32.44) (100)	54 (6.56) (100)	823 (100)

Among women of 19 to 28 yrs, 2.99% preferred IUCD, 35.26% preferred Inj. DMPA, 59.96% preferred Implants, 1.79 preferred tubectomy. Among women of 29 to 38 yrs 9.36% preferred IUCD, 48.31% depot Inj., 36.70% implants, 5.62% tubectomy. Among women of 39 to 48 yrs 3.70% preferred IUCD, 48.15% Depot Inj., 37.04% implants, 11.11% tubectomy.

DISCUSSION:

Here we can see that Tubectomy is 3.645% only, IUCD (intrauterine contraceptive device) is 5.1%, Inj. Depot (depot- medroxy progesterone acetate) is 40.34%, Implants (Etonogestrel) is 50.91%. And within it ,among IUCD users 19 to 28 yrs age women 35.71%, 29 to 38 yrs age women 59.52%, 39 to 48 yrs women 4.76%. Among Inj. Depot users 19 to 28 yrs old 53.31%, 29 to 38 yrs 38.85%, 39 to 48 yrs 7.83%. Among implant users 19 to 28 yrs old 71.84%, 29 to 38 yrs old 23.39%, 39 to 48 yrs old 4.773%. Among tubectomy recipients 19 to 28 yrs old 30%, 29 to 38 yrs old 50%, 39 to 48 yrs old 20%.

So the most preferred method of clinical contraceptives is implants. And the least preferred is tubectomy. And among 19 to 28 yrs old young women preferred methods are implants and depot injections. Among 29 to 38 yrs old, IUCD and tubectomy are relatively common than their younger counterparts.³ And in women aged 39 to 48 yrs old, all the methods are less common, ie,they choose clinical contraceptive methods less.²

Since etonogestrel containing implants are the least side effect causing and easier to be reversed,⁷ women of all ages and especially those who want to complete family, prefer it. And intrauterine contraceptive device or IUCD causes pelvic inflammatory disease and leukorrhoea, pain: so it is also relatively less popular. And though depot injection of medroxy progesterone acetate can cause spotting, obesity and late return of normal menstrual cycle; it's less invasive nature, well known use and effective contraception

has made it relatively popular too. And for tubectomy, it is both invasive and irreversible,⁴ so women nowadays do not prefer it, in the presence of other easy to tolerate but effective contraceptive methods.

CONCLUSION:

Majority of women coming to MFPC, DMCH prefer implants and depot injection than intrauterine contraceptive device and tubectomy (least preferred). Women are becoming more enthusiastic towards new and less difficult method of contraception due to better knowledge.³ We now understand their preferences and are willing to help and counsel them of most suited methods of contraception as well as improve the quality of preferred and relatively less preferred clinical contraceptive methods. And also use them with better indications .

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Ethical committee approval: Ethical approval was sought from Hospital Review Committee (HRC) prior to data acquaintance.

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