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The influence of an extended postnatal program on contraceptive use postpartum – a randomized controlled trial

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No conflict of interest to declare

Introduction

- Low use of contraception postpartum is associated with increased numbers of unplanned pregnancies.
- Most women intend to use contraception postpartum, but even if that is their intention many women tend to either use less effective contraception, or none.
- Offering newly delivered women contraception before the return of fertility is a means of adapting healthcare to women's needs.

The objective of this randomized controlled trial (RCT) was to investigate if earlier and repeated visits postpartum has an impact on women's choice of method and start of contraceptive use.

Method

- Non-blinded, two-armed multi-center RCT conducted in 6 maternity clinics in Gothenburg, Sweden (recruitment 11 January 2019 -1 June 2020).
- Written and oral information was given during the 37th pregnancy week visit by a midwife at the maternal clinic to eligible participants.
- Independent and fluent in English or Swedish and at age ≥ 18 .

Method

- The women (n=1159) were enrolled and randomized into an intervention (n= 554) or control group (n=605).
- The intervention group were given two pre-booked visits (3 and 7 weeks) and the control group received one visit (7 weeks) postpartum.
- The participants completed questionnaires about contraceptive use, method choice and reproductive health at each visit using a QR-code to fill in on the participants cell phone/or as a paper questionnaire.
- To ensure confidentiality all participants received an individual 4-digit code to use when answering the questionnaires.

Results

A total of 953 women completed the study: 442 women in the intervention and 511 women in the control group.

- Contraceptive use at 7 weeks postpartum was higher in the intervention 247/442 (55.9%) compared to the control group 248/511 (48.5%) (95% CI 0.8;13.9) ($p=0.028$).
- The use of long-acting reversible contraceptives (LARC); implants and intrauterine devices was more common in the intervention 142/247 (57.5%) compared to the control group 119/248 (48%) (95% CI 0.3;18.7) ($p=0.042$).

Results

- Use of condoms or other methods were higher in the control group 47/248 (19%) compared to the intervention group 30/247 (12.1%) (95% CI 0.0;13.6) ($p=0.049$).
- There was also a difference between groups in reporting declining or delaying contraceptive use, where this was expressed to a higher extent in the control group compared to the intervention group (51.4%) and (44.1%) respectively.
- We could also show that women born abroad need more support to increase their contraceptive use postpartum

Discussion

These results indicate the importance of earlier and additional postpartum care visits to increase early start-up of contraception and use of effective LARC methods to reduce unplanned pregnancies close to delivery.

Extended and early postpartum visits showed a high impact on the total contraceptive use, a higher use of LARC and a lower use of condoms among participants in the intervention group.



Many thanks for your attention!

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