

# Contraceptive study seeks to reduce unintended pregnancies

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A major four-year trial will offer GPs across Victoria specialised training on contraception to reduce the number of unintended pregnancies by increasing uptake of Long Acting Reversible Contraceptives (LARCs).

LARCs, which include intrauterine devices (IUDs) and implants, are the most effective form of [birth control](#). Unlike the pill, which can fail if doses are missed or forgotten, LARCs don't require strict user adherence for effectiveness once inserted by a clinician.

Lasting between 3-8 years, these birth control methods are more than 99 per cent effective at preventing pregnancy. Despite their effectiveness, LARC uptake in Australia remains low at less than ten per cent.

The Australian Contraceptive ChOice pRoject (ACCORD), funded by the NHMRC and led by Professor Danielle Mazza from Monash University, will train GPs to provide "LARC First" contraceptive counselling and provide rapid referral for LARC insertion when required.

Professor Mazza said ultimately they hope the trial will ensure that [women](#) are well informed about all their contraceptive options and that any barriers to having a LARC inserted are removed.

"In Australia, the uptake of LARCs, is very low even though there is substantial evidence indicating that this form of contraception is highly effective in preventing pregnancies. This study will seek to address the barriers to LARCs by training GPs to provide more effective counselling during patient consultations so that women will be able to make a fully informed decision about the best contraception for them," she said.

"This study will also address the problems that can arise when GPs are not trained to insert LARCs. Typically, patients are referred to a gynaecologist or a family planning clinic for insertion, but it often takes weeks to get an appointment and the inconvenience can put women off. We want to set up rapid referral pathways to make it quicker and easier for women," Professor Mazza said.

The first phase of the research will seek to recruit around 60 GPs from across Victoria to take part in the trial. An analysis of data from the Bettering the Evaluation and Care of Health (BEACH) survey indicated that only seven per cent of contraception consultations involved LARCs. With training provided, it is hoped that the study will address knowledge

gaps amongst both GPs and women regarding the most effective form of birth control.

As the trial progresses, the research team will monitor women in the intervention arm against a control group of women receiving usual care for over 12 months. The aim is to see if improved knowledge and rapid referrals to clinics for LARC insertion increases uptake and reduces unintended pregnancy rates.

Professor Mazza said they hoped the trial would reduce the number of unintended pregnancies, which is a significant public health issue in Australia.

"Promoting the use of LARC has the potential to reduce the high rate of [unintended pregnancies](#) in Australia. GPs are well-placed to promote LARC uptake as they are often the first point of contact for women who are seeking contraception," Professor Mazza said.

ACCORd is partly based on successful research in the US called the CHOICE study, which informed women of the contraception available to them with an emphasis on LARCs. At the time of the study, the rate of LARC uptake in the US was three per cent. As a result of the CHOICE study, around 67 per cent of women chose a LARC method, however [contraception](#) was provided to women at no cost.

Provided by Monash University

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