

Introduction

- Postpartum contraception can help couples achieve adequate interpregnancy intervals, as short interval pregnancies have been associated with low birth weight and preterm delivery (1).
- It is currently unclear exactly how contraceptive choices change during the prenatal, delivery, and postpartum recovery period. Better understanding of this process can improve counseling, remove external barriers that impact choice, and improve shared decision-making and provision of postpartum contraception (2).

Study Objective

- To evaluate the consistency of contraception plan identified at delivery hospitalization with reported contraception use over 6 months postpartum.

Methods:

- We conducted a secondary analysis of a prospective observational study assessing health outcomes through 6 months postpartum (3).
- We reviewed the electronic medical record for contraception plan at delivery hospitalization, and participants completed surveys on contraception use at 3 and 6 months postpartum.
- We evaluated consistency in contraception plan from delivery hospitalization through 6 months postpartum overall and by method effectiveness (i.e., highly, moderate, and least effective). We used chi-squared and Fisher's exact tests to compare consistency in contraceptive method use by method effectiveness.
- This study was deemed exempt (IRB#1913867).

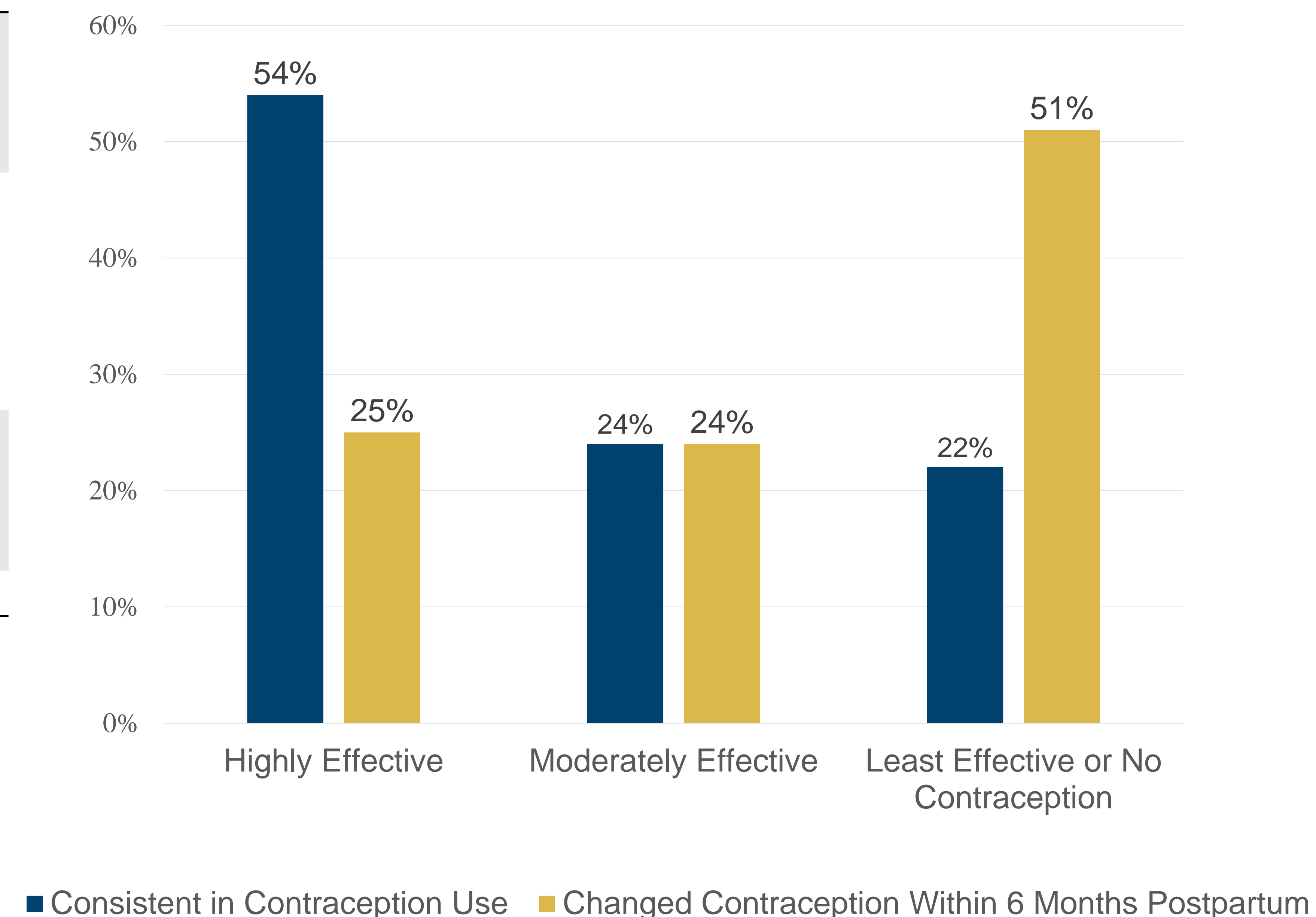
Results

- We included 347 participants with contraception data through 6 months postpartum.
- At hospital discharge, 136 (39%), 82 (24%), 129 (37%) planned to use a highly effective, moderately effective, and least effective or no contraceptive method, respectively.
- 170 (49%) of participants were consistent in their postpartum contraception use from hospital discharge to 6 months postpartum, of whom 92 (54%) were using highly effective, 40 (24%) moderately effective, and 38 (22%) least effective contraception methods.
- 177 (51%) of participants were inconsistent with their postpartum contraception use from hospital discharge to 6 months postpartum of whom 44 (25%) were using highly effective, 42(24%) moderately effective, and 91 (51%) least effective contraception methods.

Contraception method chosen at hospital discharge (N=347)

Contraception Method	n(%)
Highly Effective	136 (39.2)
Intrauterine device	100 (73.6)
Implant	27 (19.9)
Tubal surgery/vasectomy	9 (6.6)
Moderately Effective	82 (23.6)
Pills	67 (81.7)
Patch	0
Ring	4 (4.9)
Injectable	11 (13.4)
Lactational amenorrhea	0
Least Effective	61 (17.9)
Condoms	58 (95.2)
Withdrawal	1 (1.6)
Fertility awareness	2 (3.2)
None/Unsure	68 (19.3)

Consistent Contraception Use v. Changed Contraception Within 6 Months Postpartum



Summary

- Compared to those who changed contraceptive methods postpartum, participants who reported consistent contraception use were more likely to be using a highly effective contraceptive method (p<0.01).

Conclusions/Further Study

- Understanding whether and how contraceptive choices change through pregnancy, delivery, and postpartum can help providers improve contraceptive counseling and provision by encouraging flexibility in shared decision-making and awareness of potential barriers to contraceptive access and use.
- The next steps are to determine which factors are associated with contraceptive consistency over 6 months postpartum.

Acknowledgements

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References

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