Adolescent Adherence to Long-Acting Reversible Contraception

CAMILLE JACKSON, BA

Objectives

Discuss current state of contraceptive healthcare and why LARCs are recommended as first-line contraceptives

Outline what impacts adolescent initiation and adherence of LARCs, including findings from People’s Community Clinic

Discuss methods for improving LARC initiation and adherence among adolescents

Summarize key takeaways

Recent Years/Trends

• Teen birth rate has declined to record low in recent year¹
• Unintended pregnancies remain high for teens²
• ACOG, AAP, SAHM advocate for LARCs as first line contraceptives³⁴⁵
• CDC states teen pregnancy is a winnable battle; LARCs part of this⁶
• Contraceptive Choice Project and CFPI have demonstrated potential of LARCs⁷⁸
• Overall uptake of LARCs has been low though⁹

What Are LARCs and Why Are they Great?

• LARCs include all IUDs and contraceptive implant
• LARCs:
  • Are highly effective in preventing pregnancy
  • Are long lasting (3-10 years)¹⁰
  • Are cost-effective in the long-term¹¹
  • Don’t require regular habits like OCPs¹²
  • Have high patient satisfaction ratings¹³

The Implant

- Device that releases progestin hormones\(^1\)
- Inserted in the upper arm\(^2\)
- Prevents egg release and thickens mucus in cervix\(^3\)
- More than 99% effective\(^4\)
- Can be kept in for 3 years\(^5\)

Image: https://www.plannedparenthood.org/learn/birth-control/birth-control-implant-insertion

Myths about LARCs

- Are not appropriate for adolescents\(^6\)
- Are not appropriate for nulliparous women\(^7\)
- Can cause infertility\(^8\)
- Adolescents aren’t interested in LARC methods\(^9\)

What Impacts Initiation?

- Education\(^1\)
- Cost\(^2\)
- Adequate training among medical staff\(^3\)
- Risk perception\(^4\)
- Norms of family and friends\(^5\)
- Partner opposition\(^6\)
- Perceptions that IUDs are unsafe\(^7\)

Image source: https://panet.ahrq.gov/webmm/case/124/insert-omission

The IUD

- Can either be hormonal or copper\(^8\)
- Copper IUD lasts 10 years\(^9\)
- Hormonal IUDs last 3-5 years\(^1\)
- Inserted in uterus\(^2\)
- IUDs prevent egg fertilization either through the release of copper ions or progestin\(^3\)
- More than 99% effective\(^4\)
What Impacts Adherence?

- Expulsion
- Partner opposition
- Side effects attributed to LARC methods
  - Irregular bleeding
  - Pain and cramping
  - Mood swings
  - Weight gain
  - Acne
  - Headaches
  - Thinning Hair

Findings from People’s Community Clinic

- Most adolescent patients chose implants
- More patients chose LARCs over time, 2009-2014
- Reasons for removal: desiring pregnancy, expulsion, weight gain, bleeding irregularities, other side effects; some patients said they would remain abstinent
- Bleeding irregularities, desiring pregnancy, and experiencing any side effects are significant determinants of adherence

About PCC Adolescent Population

- Patients are predominantly white Hispanic (75.2%)
- Majority of patients are aged 16-21, some are as young as 11
- Language Barrier for 18.3% of female patients seeking family planning services
- PCC provided 727 LARCs from 2009 to January 2015, removed 115 (15.8%)
  - 22.5% of these were due for removal
  - Removal rate is comparable to that of Contraceptive Choice one-year follow-up
  - Different from study populations with regard to race, education, and age

Findings from Interviews

- Implants are preferred method for teens because they do not include a pelvic exam, which adolescents experience differently from adults
- PCC Tandem Program maintains repeat teen pregnancy rate of 4.4 percent compared with the national average of 17 percent, low rate attributed to LARCs
- Patients often do not show if multiple appointments are required for LARCs
- Some women do not tolerate pelvic exams and IUD insertion well
- PCC tries to improve adherence through counseling, prescribing doxycycline, birth control pills, NSAIDs, and DMPA to treat excessive bleeding
- PCC abides by patient-centered mission and respects requests to remove LARCs

PCC adolescent population

- Majority are white Hispanic (75.2%)
- Average age is 16-21, some are as young as 11
- Language barrier for 18.3% of female patients seeking family planning services
- Provided 727 LARCs from 2009 to January 2015, removed 115 (15.8%)
  - 22.5% of these were due for removal
  - Removal rate is comparable to that of Contraceptive Choice one-year follow-up
  - Different from study populations with regard to race, education, and age

Interview findings

- Implants are preferred method for teens because they do not include a pelvic exam, which adolescents experience differently from adults
- PCC Tandem Program maintains repeat teen pregnancy rate of 4.4 percent compared with the national average of 17 percent, low rate attributed to LARCs
- Patients often do not show if multiple appointments are required for LARCs
- Some women do not tolerate pelvic exams and IUD insertion well
- PCC tries to improve adherence through counseling, prescribing doxycycline, birth control pills, NSAIDs, and DMPA to treat excessive bleeding
- PCC abides by patient-centered mission and respects requests to remove LARCs
LARCs for PCC Adolescent Patients, 2009-2014

Reasons for LARC Removal, 2009-2015

Side Effect Reasons for Early LARC Removal

Improving Initiation and Adherence

There are a few ways to improve initiation and adherence:

- Increase provider training
- Provide counseling for patients
- Fund programs that provide free LARC methods
Planned Parenthood Program in Travis County

- Program offers free LARCs to low-income Travis County residents
- Can select either hormonal IUD, copper IUD, or implant
- More information at austinbirthcontrol.org
- No cost but not confidential

Call 1-800-230-PLAN Today

Suggestions for Future Research

- Determine what is associated with breakthrough bleeding attributed to implants
- Examine impact of family, friends, and partner norms on LARC adherence
- Analyze differences in motivational interviewing for health educators with different levels of education and whether this impacts adherence
- Assess the effects of different kinds of bleeding irregularities on adherence

Concluding Thoughts

- LARC methods are highly effective and have several benefits
- Several factors impacting initiation and adherence among teens
- We should do what we can to increase LARC usage among teens
- However, this isn’t the best method for all teens

Acknowledgements

- Thank you to People’s Community Clinic, Dr. Celia Neavel, and Dr. Abigail Aiken for this opportunity to learn more about adolescent LARC usage and adherence and for the opportunity to work with People Community Clinic’s data.