

RELATIONSHIP BETWEEN CONTRACEPTION AND REPEAT TERMINATION OF PREGNANCY (TOP) IN EAST SUSSEX

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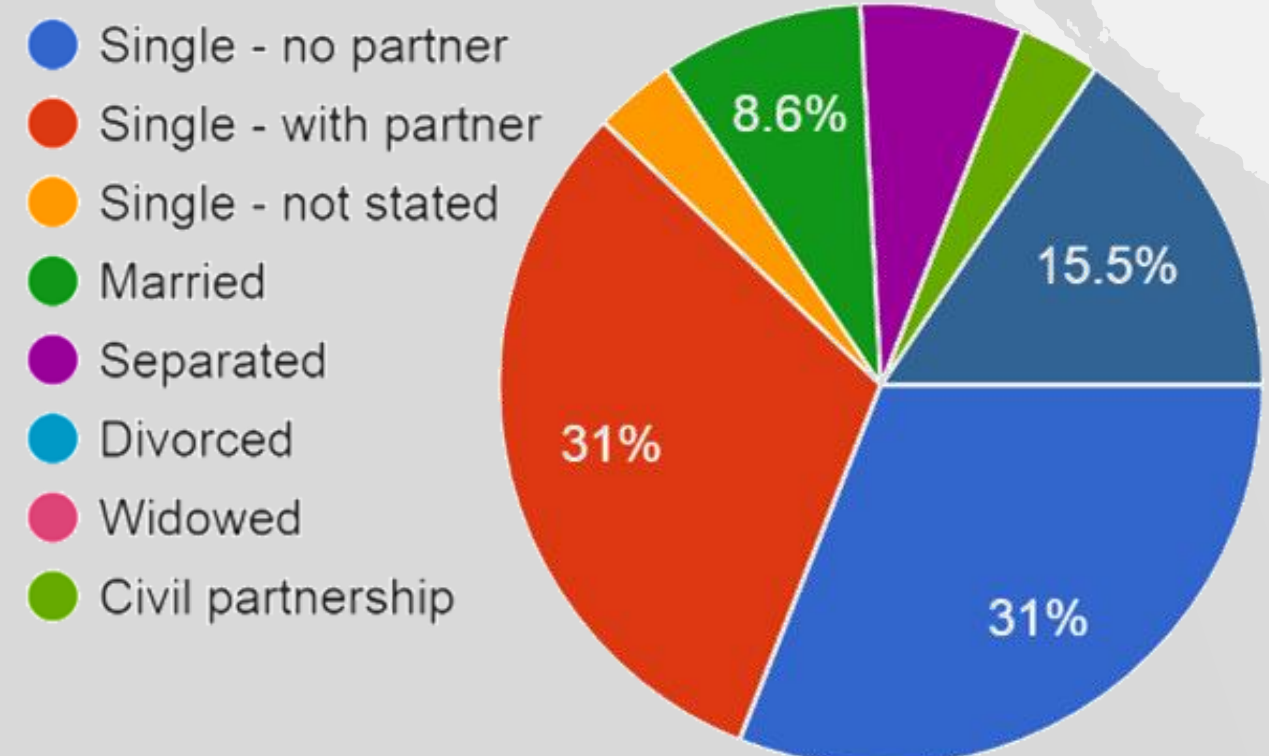
Background/Objectives Repeat TOPs (TOP in a client who's had at least one previous TOP) has increased across all age groups since 2015/16 in East Sussex and prescriptions for contraception at TOP clinics have decreased by 30% since 2014/15¹. Contraception provision reduces unwanted pregnancies, TOP and significantly reduces healthcare and non-healthcare costs². We conducted the first audit of services on repeat TOP in East Sussex, where all TOP services are provided by BPAS (The British Pregnancy Advisory Service). We also explored factors influencing repeat TOPs including contraception.

Results Almost a quarter of the clients were using hormonal contraception whilst almost half were not using any form of contraception. Just under half had gravidity of at least five and the significant majority had two or more previous TOPs. After the repeat TOP, every client was offered contraception and just below half were prescribed. A similar proportion continued to use their own supply, were to have a sterilization procedure or see their GP for contraception. Less than 5% had no intention of using contraception. Previous, recent, current and worsening mental health issues were common. The vast majority would cite this or having difficult life circumstances as a reason for needed a TOP. The clinic had fulfilled RCOG guidance on Chlamydia testing and BHIVA guidance on universal HIV testing. There was no testing of gonorrhoea and syphilis but there is no guidance to do so. Ethnicity data was not well collected.

Design/Methodology The inclusion criteria were clients whose permanent address was in East Sussex, aged 17 or above and had a repeat TOP between March-September 2019. Standards measured against were the Royal College of Obstetricians and Gynaecologists (RCOG) abortion guidelines and British HIV Association (BHIVA) HIV testing guidelines. Google forms were used to collect and analyse data anonymously.

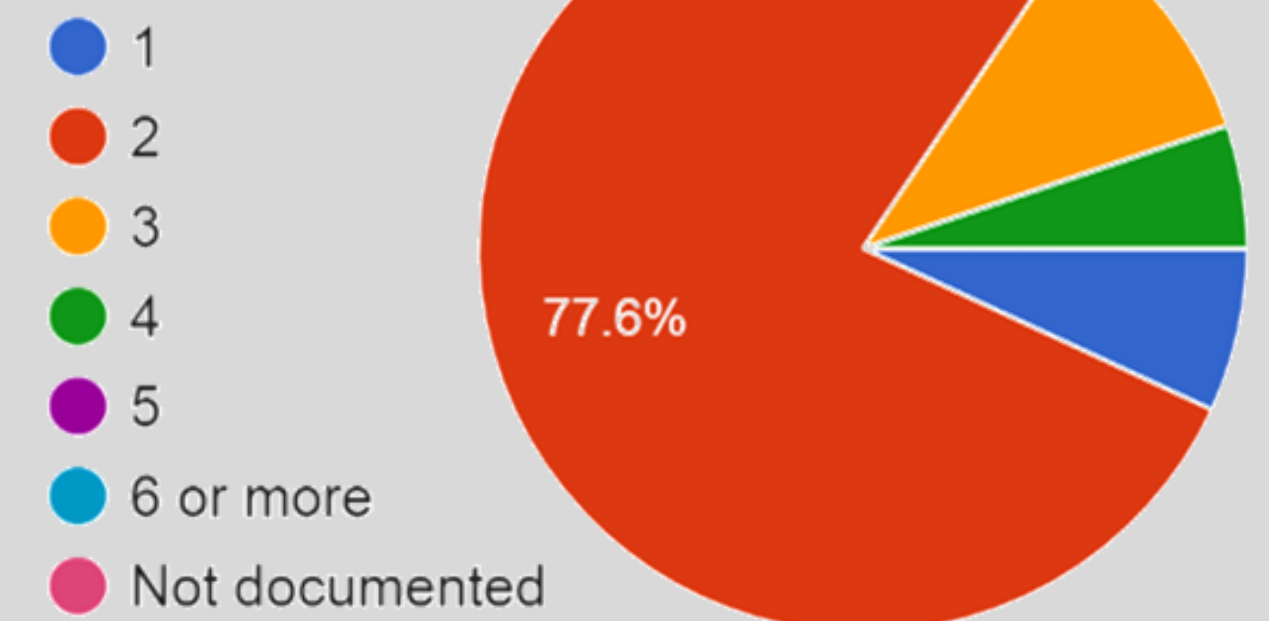
Relationship status

58 responses



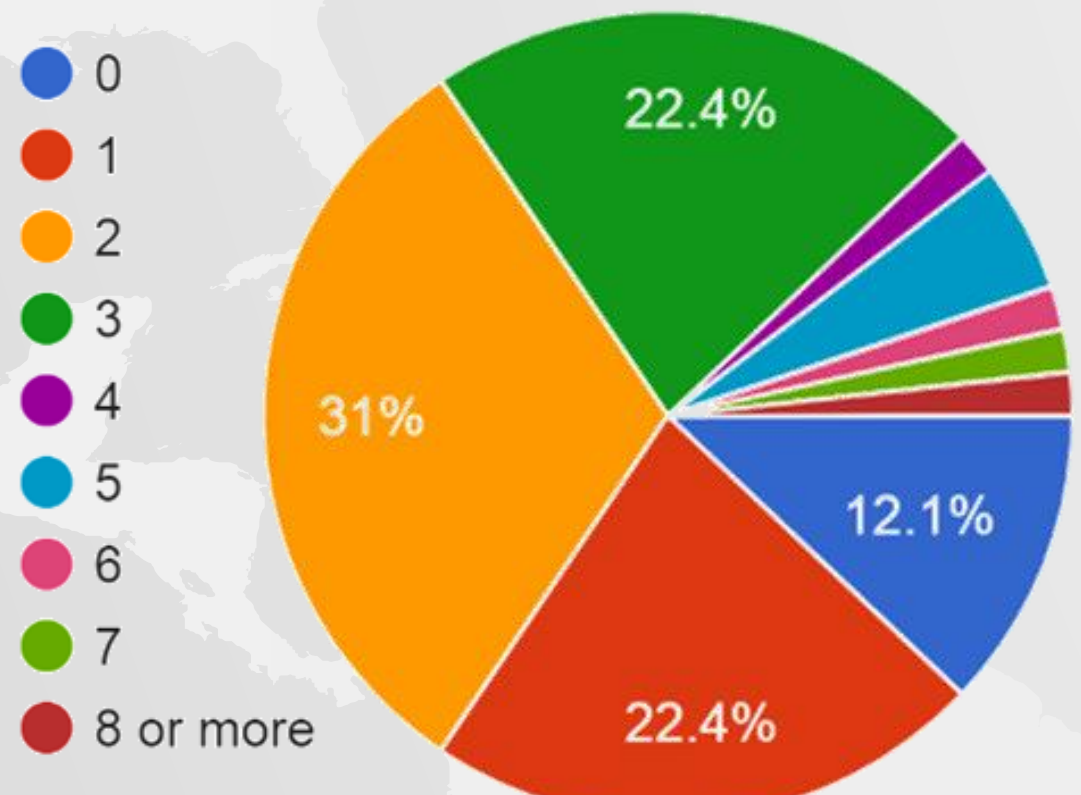
Number of previous TOPs

58 responses



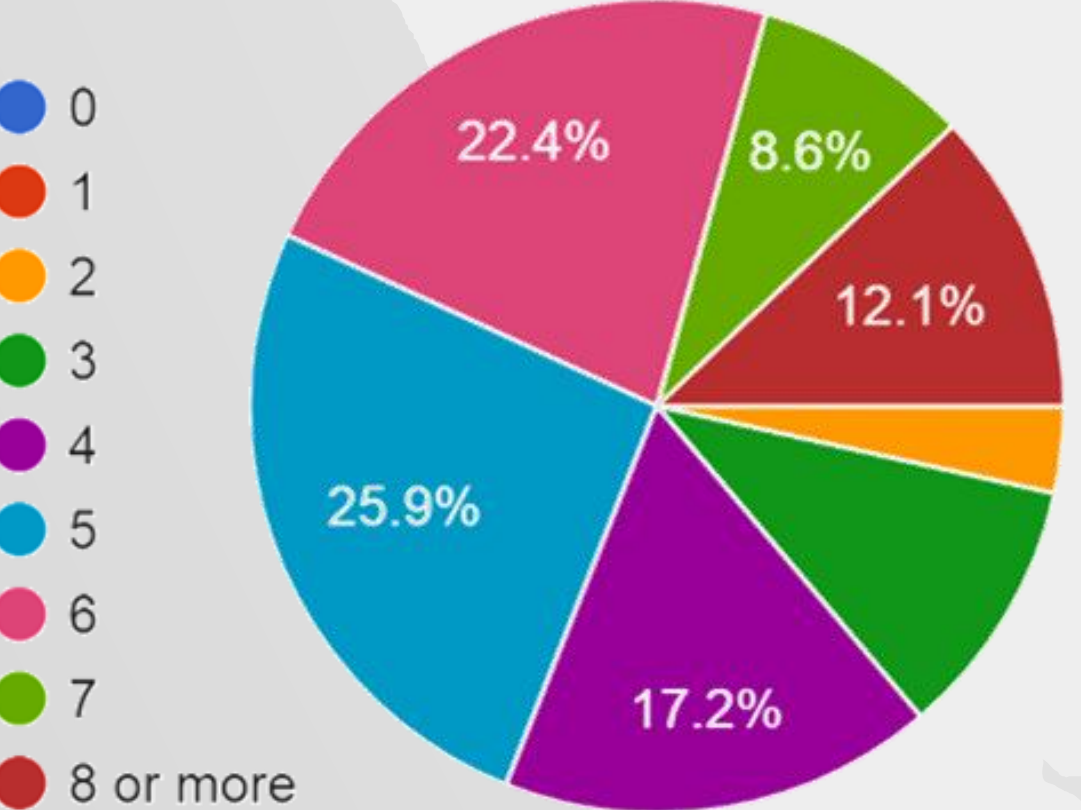
Parity

58 responses



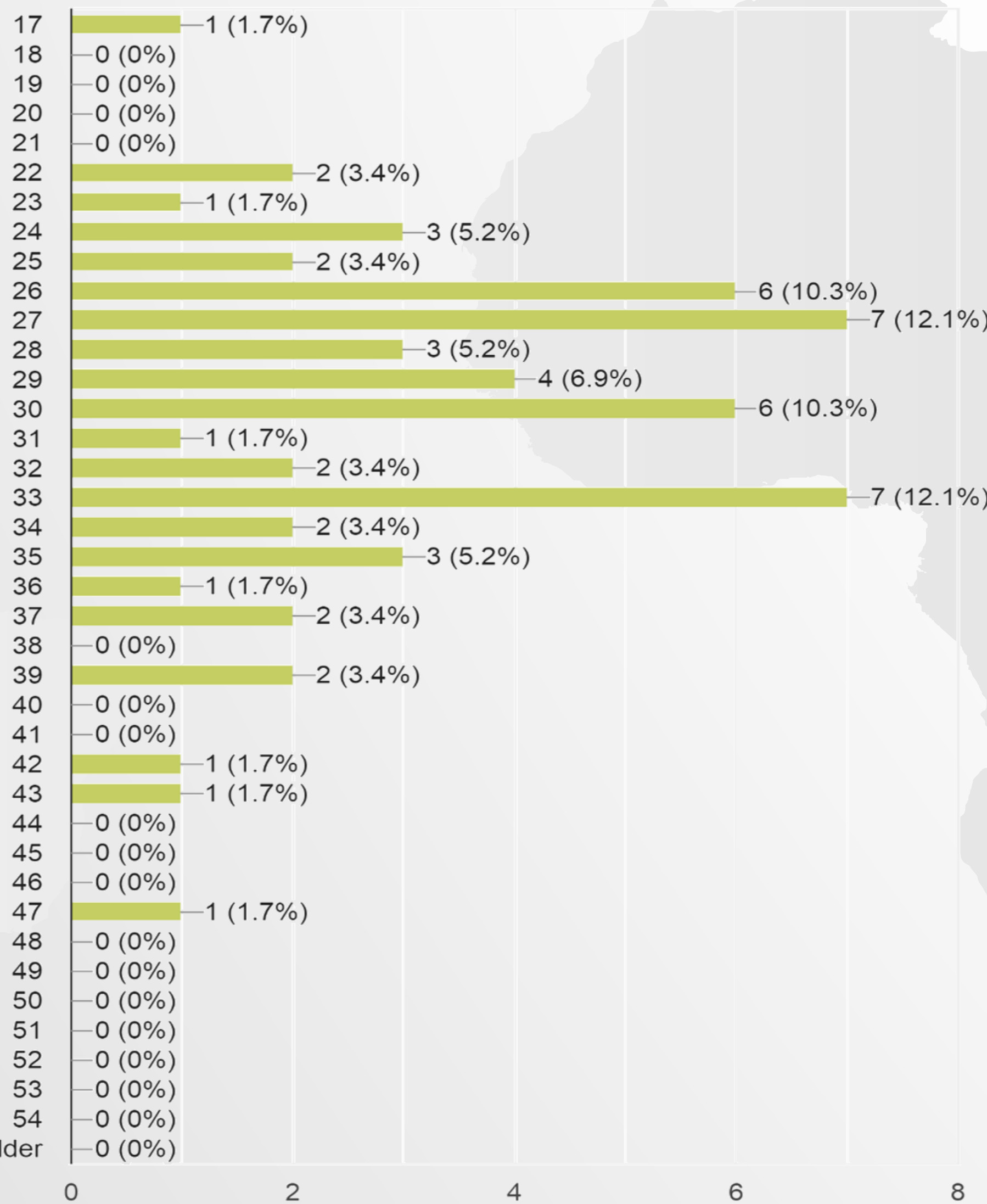
Gravida

58 responses



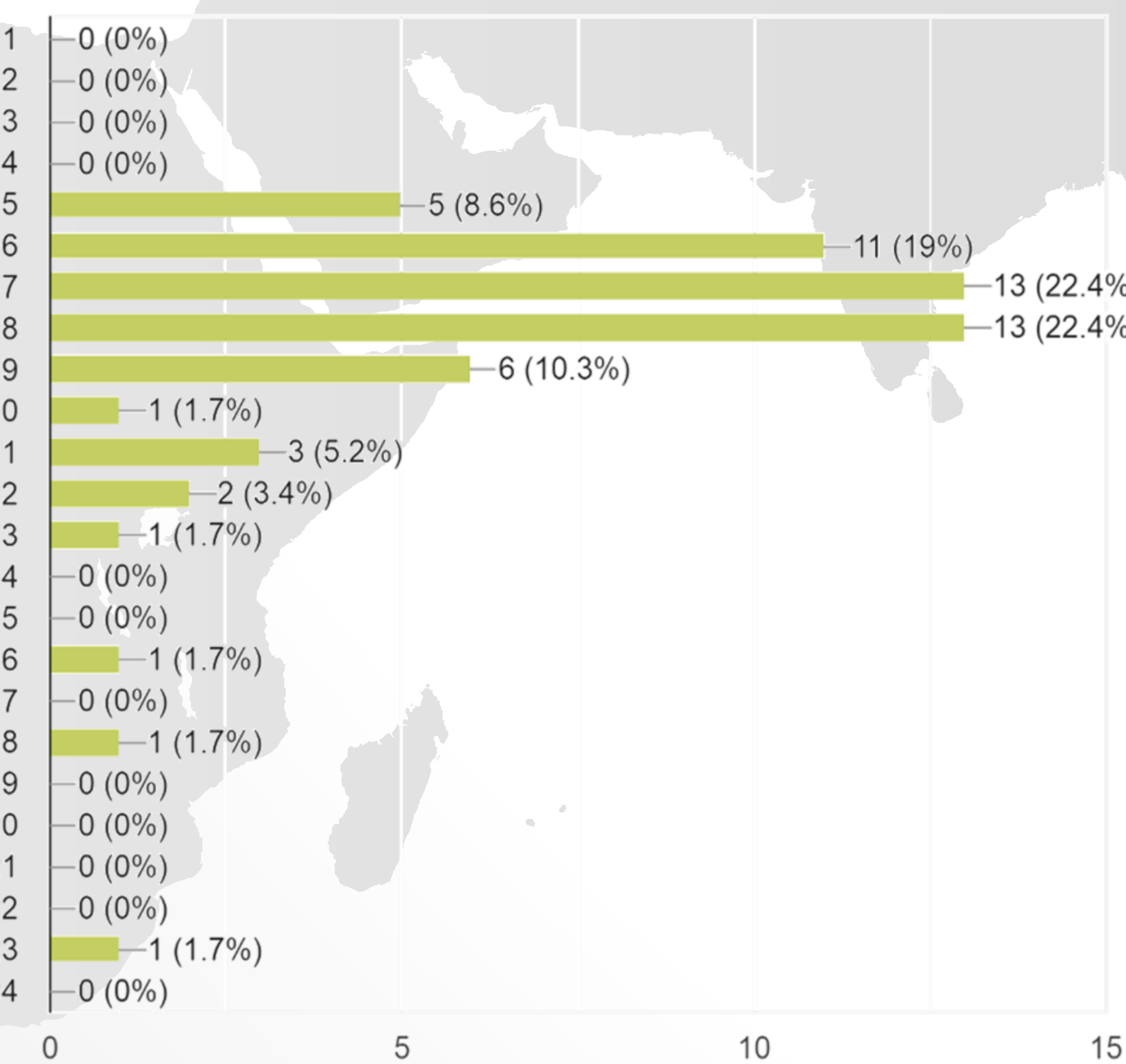
Age at time of TOP

58 responses



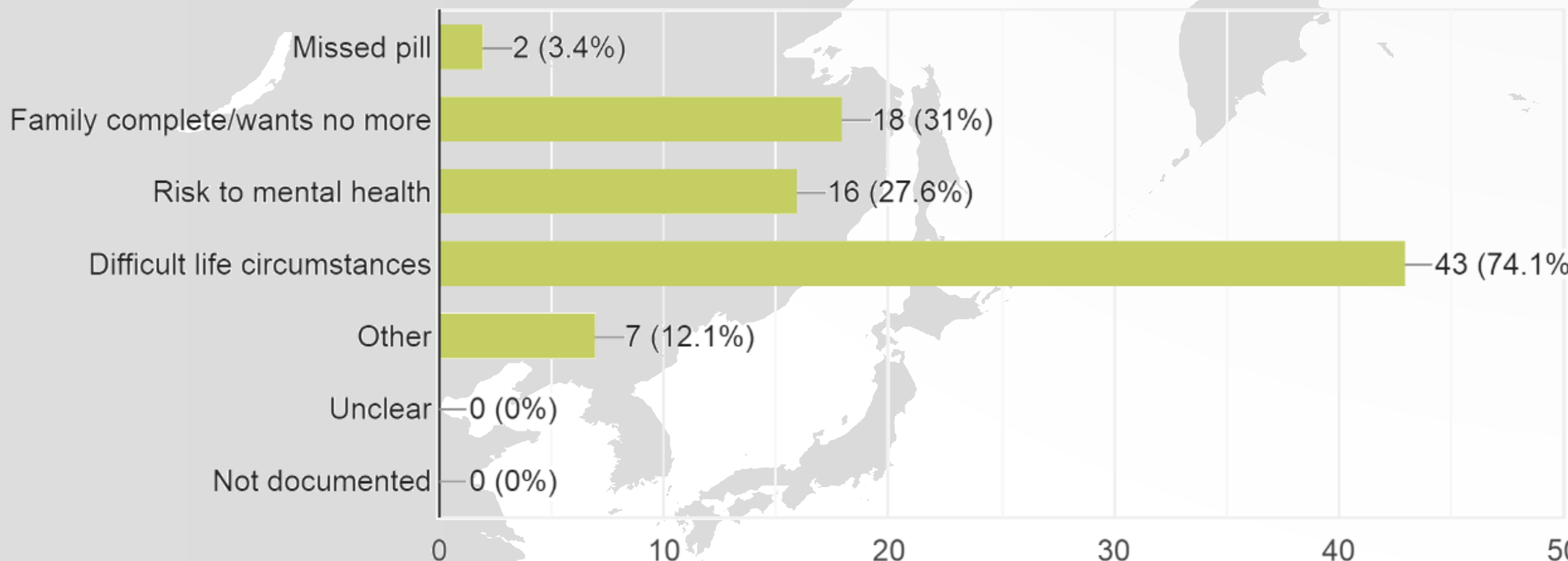
Gestational age at time of TOP

58 responses



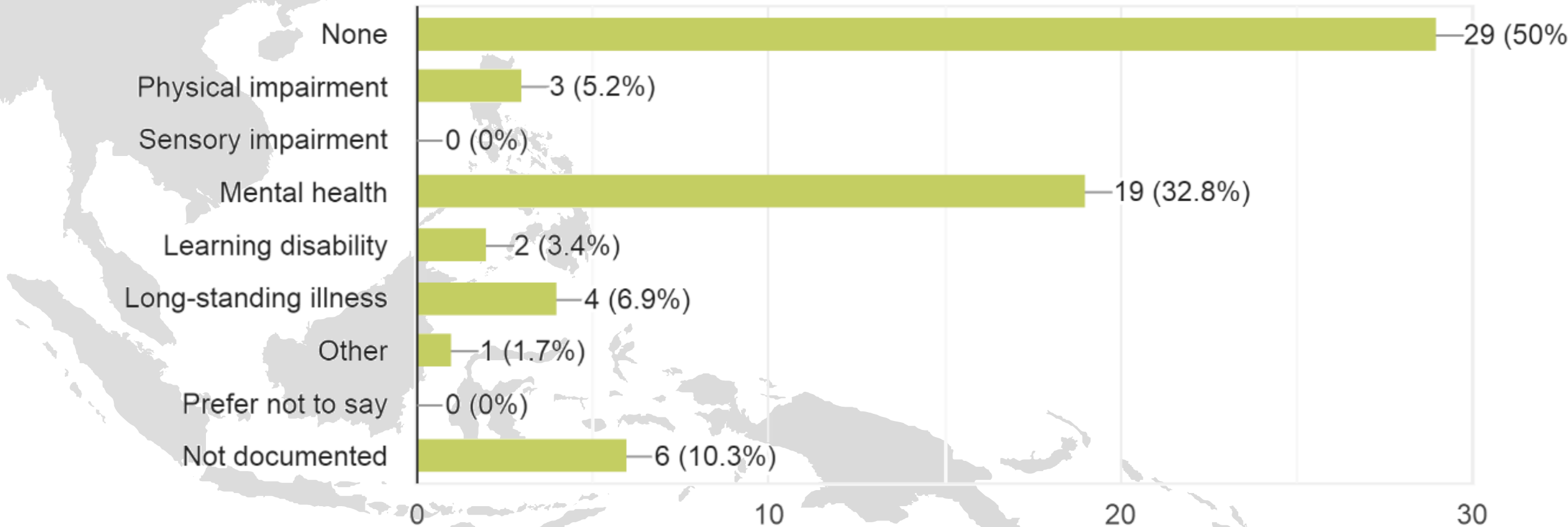
Reason for abortion

58 responses



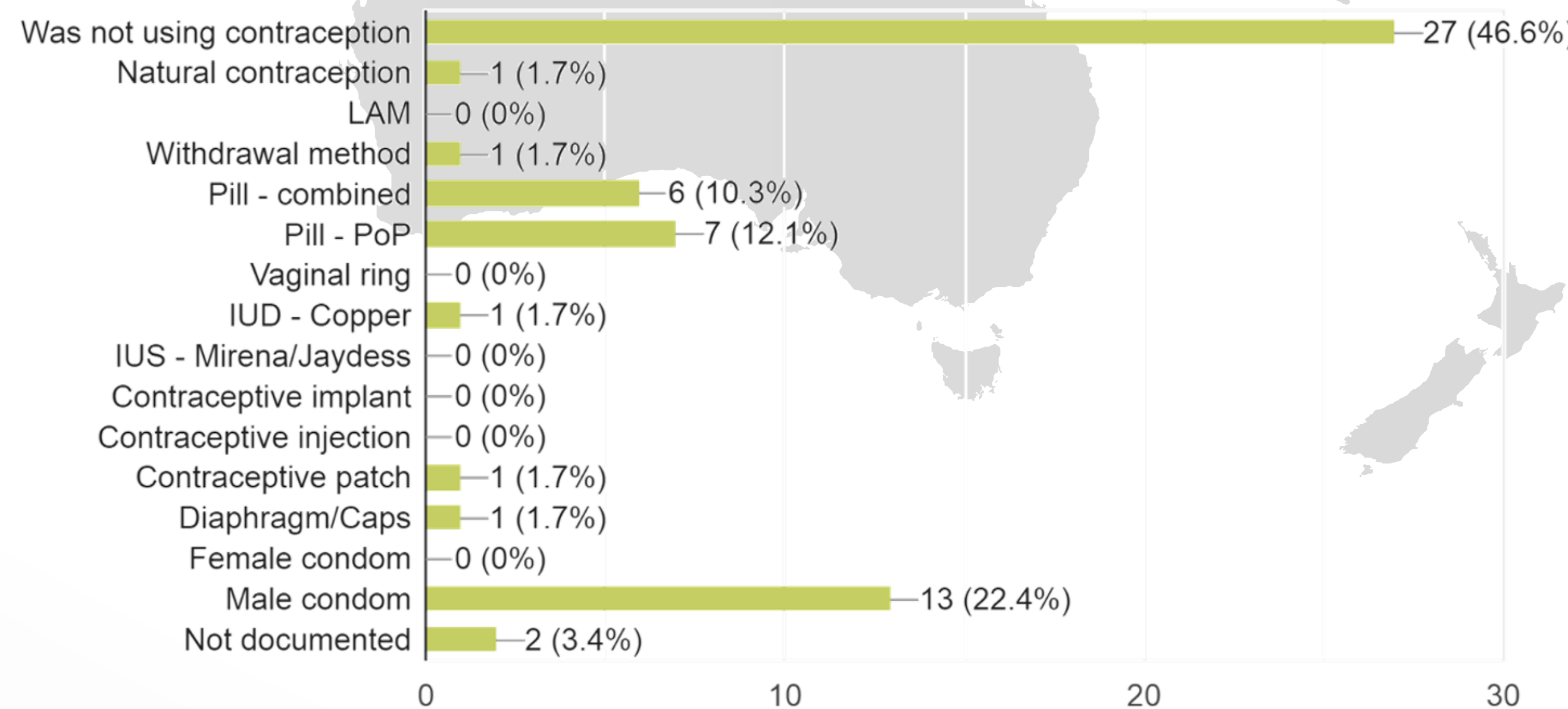
Disability

58 responses



Was the individual using contraception?

58 responses



Conclusion/Discussion Clients do not appear to be using TOP as a method of contraception. There may be a relationship between the findings of having multiple repeat TOPs, high gravidity, poor contraception uptake and mental health issues. Repeat TOPs may be reduced by ensuring improved uptake of contraceptives, hence the need for improved follow up. Although there are improvements needed, overall the services provided were appropriate, documentation was often very good and the testing of sexually transmitted infections met guidelines. Re-audit aimed for one years' time.

References 1. East Sussex SHNA(2019)[www.eastsussexjsna.org.uk]. 2. PHE (2016,updated 2018) Local health and care planning:Menu of preventative interventions.