

An Australian cohort study of postpartum women examining contraceptive use and breastfeeding

A Counsell¹, M Kang¹, K Vaclavek², K Cheney¹, K Black^{1,2,1}. University of Sydney, Sydney, Australia; 2 Sydney Local Health District Sydney Australia

Introduction

There is growing recognition that women's need for effective contraception in the period immediately after birth may be underestimated, and not well provided, if provided at all. In Australia, it is expected as usual practice that women will attend a routine 6-week postpartum visit with their general practitioner (GP) but there is little Australian data recording whether they received contraceptive advice and provision at this time.

Objectives

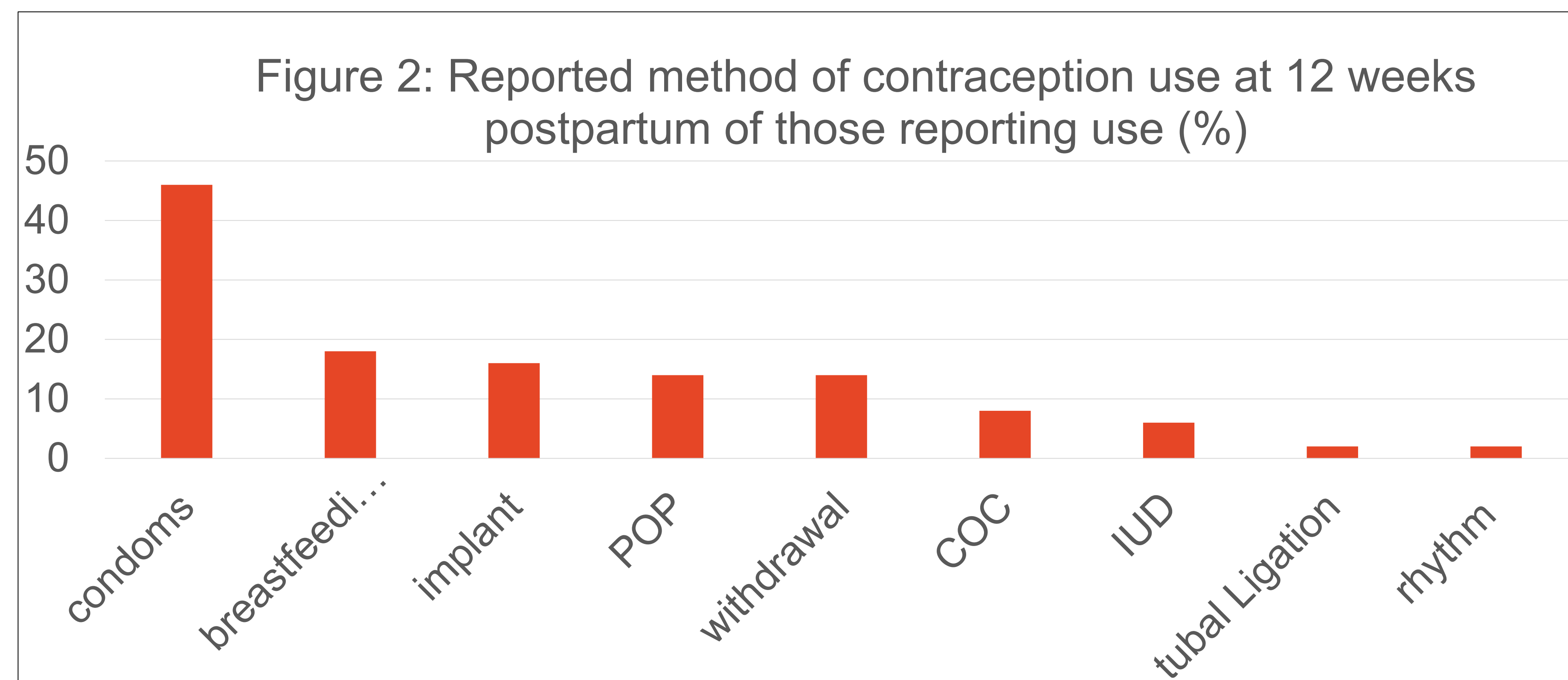
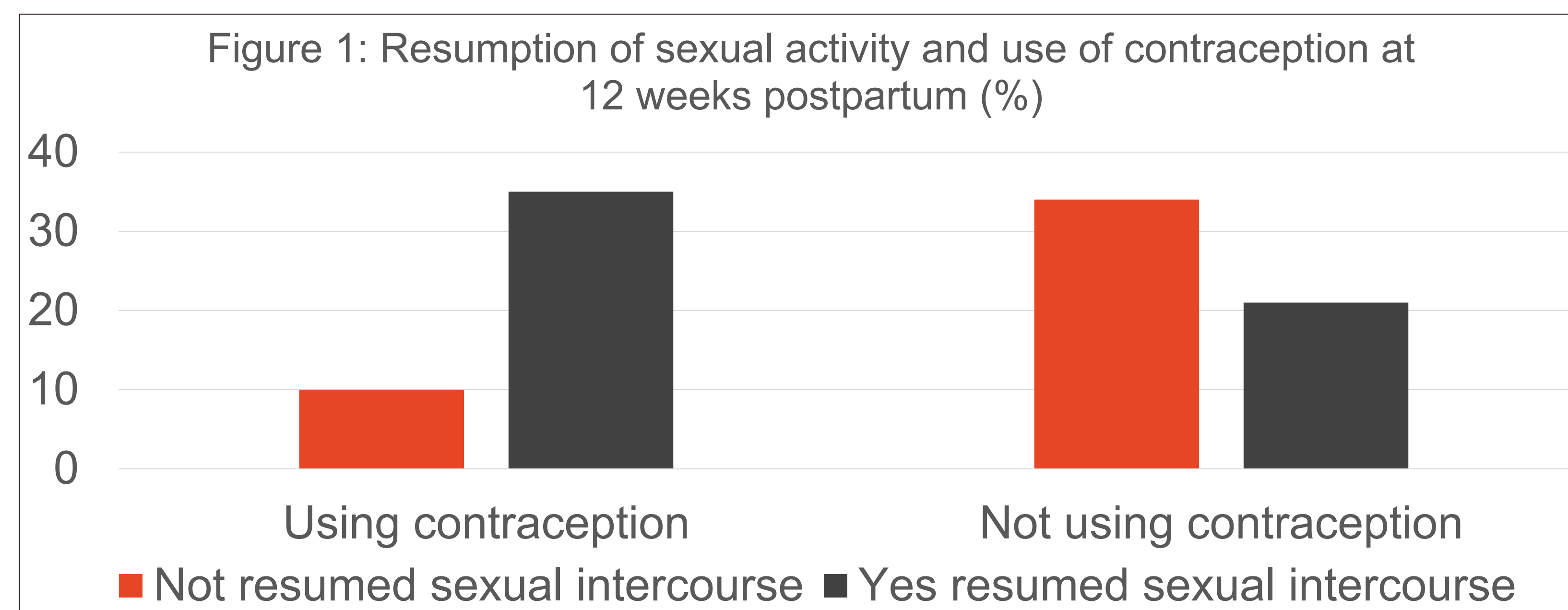
To describe postpartum contraception use, rates of breastfeeding and receipt of postpartum care and counselling by General Practitioners at 12 weeks postpartum within metropolitan Sydney, NSW, Australia. Primary outcomes were the uptake of an effective contraceptive method and breastfeeding continuation at 12 weeks postpartum. Secondary outcomes were the attendance and receipt of postpartum care with a General Practitioner (GP).

Materials and methods

A prospective cohort study of women giving birth in two central metropolitan Sydney hospitals. A convenience sample of women at 36 weeks gestation or beyond was recruited from outpatient antenatal clinics. Women <18 years old or who experienced a still-birth were excluded. Data were collected via an e-survey at 12 weeks postpartum and basic demographic and routine obstetric data were extracted from hospital records. Study information and surveys were translated into six common community languages. Data analysis included frequencies and chi-square tests to examine differences between groups. Log-binomial regression examined associations between sociodemographic and obstetric history and contraception use and breastfeeding continuation.

Results

197 women consented to participate in the study. 112 completed surveys were returned in the postpartum period (57% response rate). Around half reported a resumption of sexual activity, of whom 13 women (20.6%) were not using a method of contraception (Figure 1) and were not covered by lactational amenorrhea. Of the 38 women who did not want any more children, 36.8% (14 women) were not using a method of contraception and were not covered by lactational amenorrhea at three months postpartum. At the time of completing the postnatal survey, 73% of the participants were fully breastfeeding and 84.8% had seen a GP for their postpartum care. Contraception use at 12 weeks is documented in Figure 1.



Conclusions

A substantial minority of women were at risk of unplanned pregnancy including over a third who had stated they did not want any further children. Improving information and provision of postpartum contraception during antenatal and postnatal hospital care and through GP provision can reduce this risk.

Acknowledgments

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Further information

Kirsten.black@sydney.edu.au

Literature

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