

Contraception: The good, the bad and the postpartum



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Disclosures

- None



Land acknowledgement

Founded in 1889, UNM sits on the traditional homelands of the Tiwa people, whose descendants today include the Pueblos of Sandia and Isleta. The Indigenous peoples of New Mexico have deep connections to the land. We honor that legacy and the peoples who continue to remain its protectors and stewards.

Objectives

- Understand the history and importance of contraception in the US
- Review attacks on contraception access and innovations to improve access
- Discuss postpartum methods of contraception



ACOG supports access to **comprehensive contraceptive care and contraceptive methods as an integral component of women's health care** and is committed to encouraging and upholding policies and actions that ensure the availability of **affordable and accessible contraceptive care** and contraceptive methods

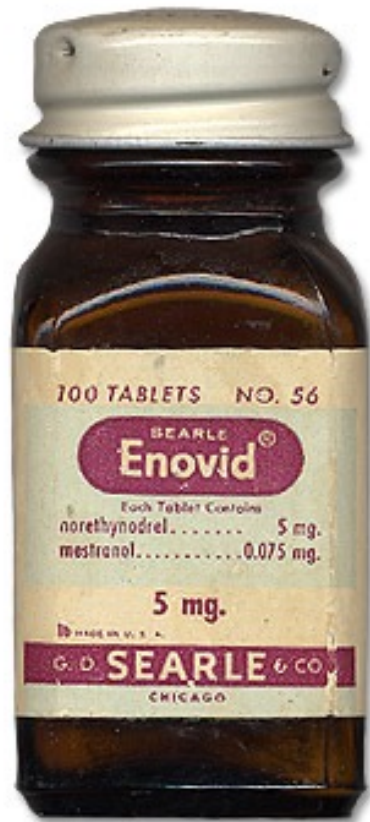
Comstock law 1873



Federal anti-vice law

“...no obscene, lewd, or lascivious book, pamphlet... designed for the prevention of conception”

FDA approval of the pill: 1960



D. / PHARMACIA CORPORATION



Griswold vs. Connecticut: 1965

Supreme court
decision:
“Unconstitutional
to prohibit
married couples
from using birth
control”



Title X signed into law: 1972

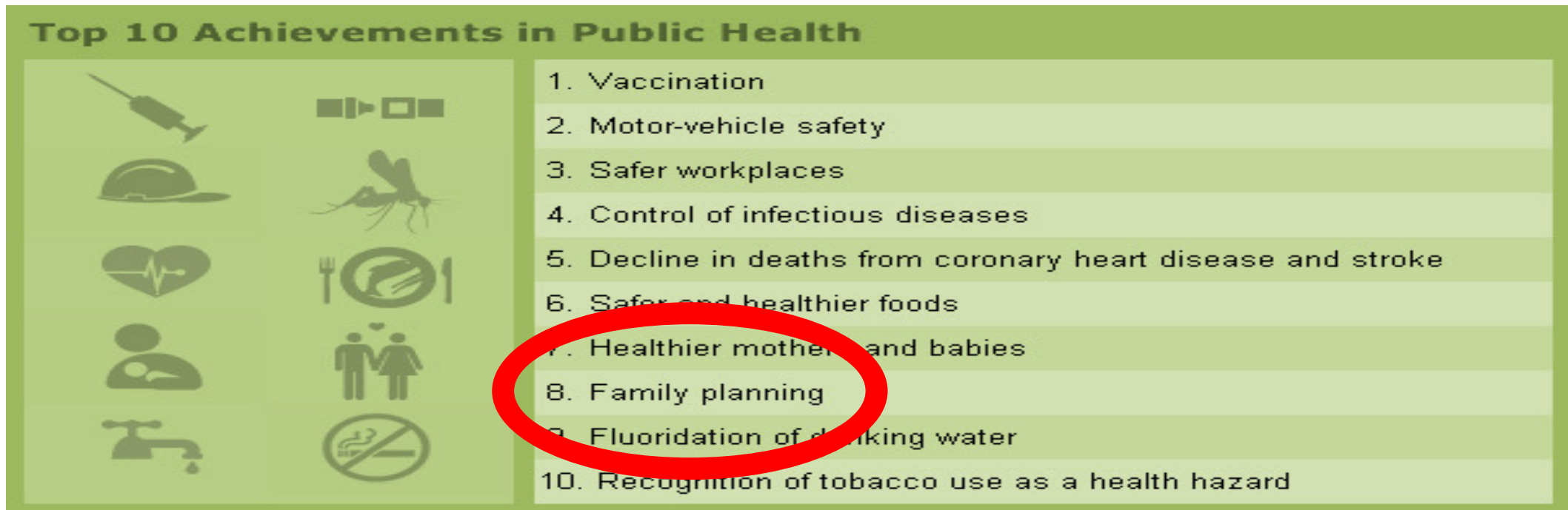


“Universal human right”

“It is my view that no American woman should be denied access to family planning assistance because of her economic condition.”

CDC 20th Century Top 10

Top 10 Achievements in Public Health



The infographic features a grid of icons on the left side, including a syringe, a film strip, a hard hat, a mosquito, a heart with an ECG line, a fork and knife with a plate, a pregnant woman, a family, a person at a desk, and a cigarette with a slash through it. To the right of the icons is a numbered list of 10 achievements. A red circle highlights the seventh item, 'Healthier mothers and babies'.

1. Vaccination
2. Motor-vehicle safety
3. Safer workplaces
4. Control of infectious diseases
5. Decline in deaths from coronary heart disease and stroke
6. Safer and healthier foods
7. Healthier mothers and babies
8. Family planning
9. Fluoridation of drinking water
10. Recognition of tobacco use as a health hazard



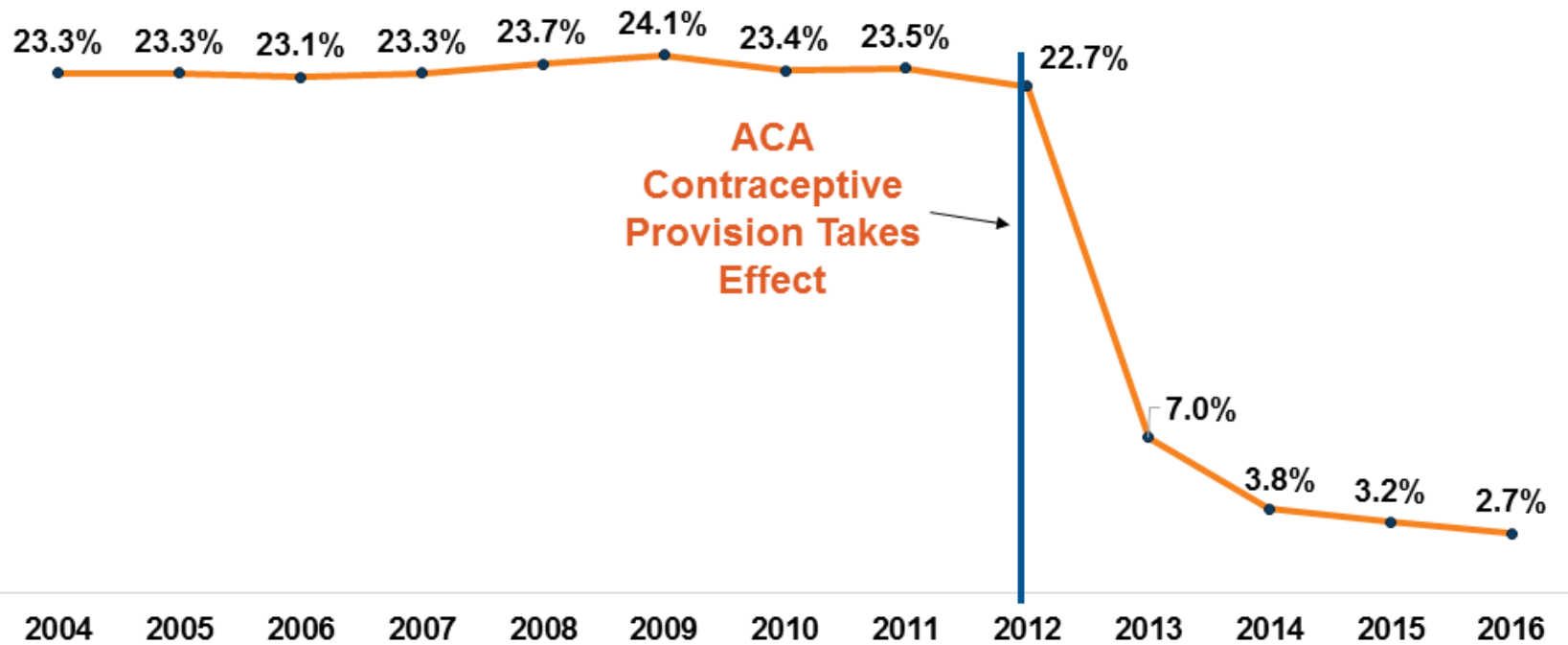
Contraception mandate ACA 2012

Most private health insurance plans must cover the full range of contraceptive methods, services and counseling without copayments or deductibles.

Figure 2

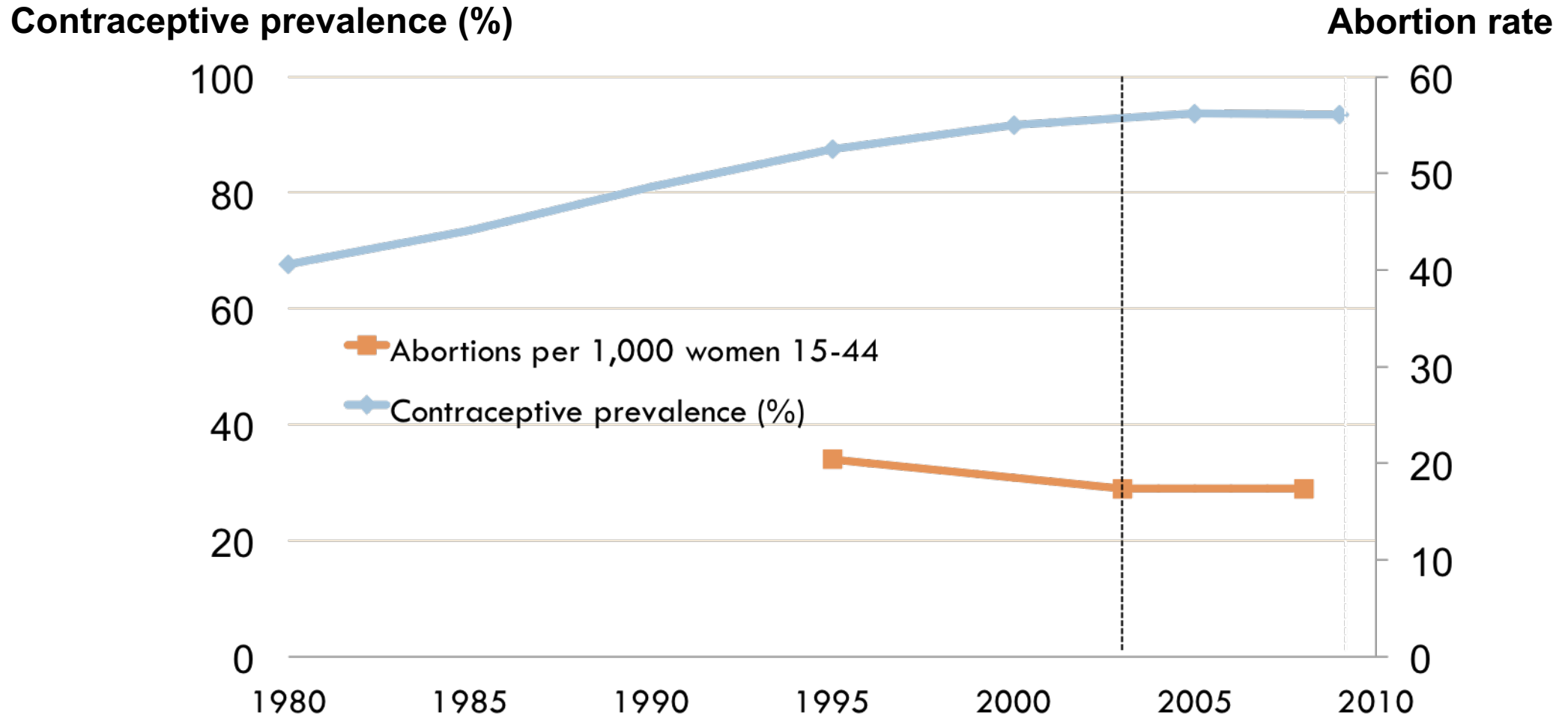
The Contraceptive Coverage Policy Has Had a Large Impact on Out-Of-Pocket Spending in a Short Amount of Time

Share of insured women reporting any out-of-pocket spending on oral contraceptives



NOTE: Share of Women age 15-44 with health coverage from a large employer who have any out-of-pocket spending on oral contraceptive pills, 2004-2015.
SOURCE: Kaiser Family Foundation analysis of Truven Health Analytics MarketScan Commercial Claims and Encounters Database, 2004 – 2016. [Peterson-Kaiser Health System Tracker](#).

The main determinant of abortion is access to contraception



Burwell vs. Hobby Lobby 2014

Hobby Lobby's position:

- Government violates religious freedom by requiring insurance coverage of all methods
- Belief that certain methods cause an “abortion”



Emergency
Contraception -
Morning After
Pill



Opposing contraception access: 2016-2020

Legislative and regulatory efforts to:

- Expand conscience refusals in provision of contraception
- Weaken the ACA contraceptive mandate to reduce coverage
- Defund Title X/Planned Parenthood
- Direct Title X funds to non-evidence-based programs including sex education, “pregnancy crisis centers”

Contraception at risk post Dobbs

- Conflation of contraception with abortion, EC and IUDs
- Closure of abortion clinics expands family planning deserts
- Expansion of misinformation and disinformation, junk science

Contraception and abortion: Fruits of the same rotten tree?

[William Newton*](#)

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**WOMEN'S HEALTH
ISSUES**
Official Publication of the Jacobs Institute of Women's Health

A Focus on Contraception in the Wake of *Dobbs*

[Alina Salganicoff, PhD](#)   • [Usha Ranji, MS](#)

Published: May 29, 2023 • DOI: <https://doi.org/10.1016/j.whi.2023.04.002> •



Disinformation

Conservative influencers are pushing an anti-birth control message

Alarmist statements about hormonal birth control go viral on social media, but experts say they're not showing the full picture.



Ep 430 | GIRL TALK: Why Women (And !!) Are Ditching Birth Control

Contraception on the legislative chopping block

The Washington Post
Democracy Dies in Darkness

Conservative attacks on birth control could threaten access

Far-right conservatives are sowing misinformation that inaccurately characterizes IUDs, emergency contraception, and birth-control pills as causing abortions



By [Lauren Weber](#)

June 5, 2024 at 5:00 a.m. EDT



- Missouri

- Blocked a bill to expand access to birth control pills by claiming they induce abortions

- Louisiana

- Defeated a bill to protect the right to contraception by equating EC with abortion

- Idaho

- Advocacy for a bill to ban access to EC and IUDs as abortifacients

> [Contraception](#). 2022 Oct;114:6-9. doi: 10.1016/j.contraception.2022.06.008. Epub 2022 Jun 23.

Now is the time to safeguard access to emergency contraception as abortion restrictions sweep the United States

Kelly Cleland ¹, Bhavik Kumar ², Nikita Kakkad ³, Jasmine Shabazz ⁴, Nicola R Brogan ⁵, Mara K Gandal-Powers ⁶, Robyn Elliott ⁷, Rebecca Stone ⁸, David K Turok ⁹



A Year After Dobbs, Advocates Push in the States for a Right to Birth Control

After Justice Clarence Thomas cast doubt on the Supreme Court decision that established a right to contraception, reproductive rights advocates are pressing for new protections at the state level.

Share full article 151



Postpartum contraception in IHS

- Great idea!! For those who want it...
- What's available? Everything!

Why postpartum contraception is a great idea

- Supports reproductive autonomy
- WHO recommends birth spacing of at least 33 months between live births (24 months to next pregnancy)
- Reduces risk of adverse maternal, perinatal and infant outcomes



“Rapid repeat pregnancy”

- Pregnancy within 18 months of a birth: “Very rapid” is within 6 months
- 33-35% of US women
- In one large hospital system:
 - 19% in implant users
 - 18% in IUD users
 - 53% in patients given progestin-only pill RX

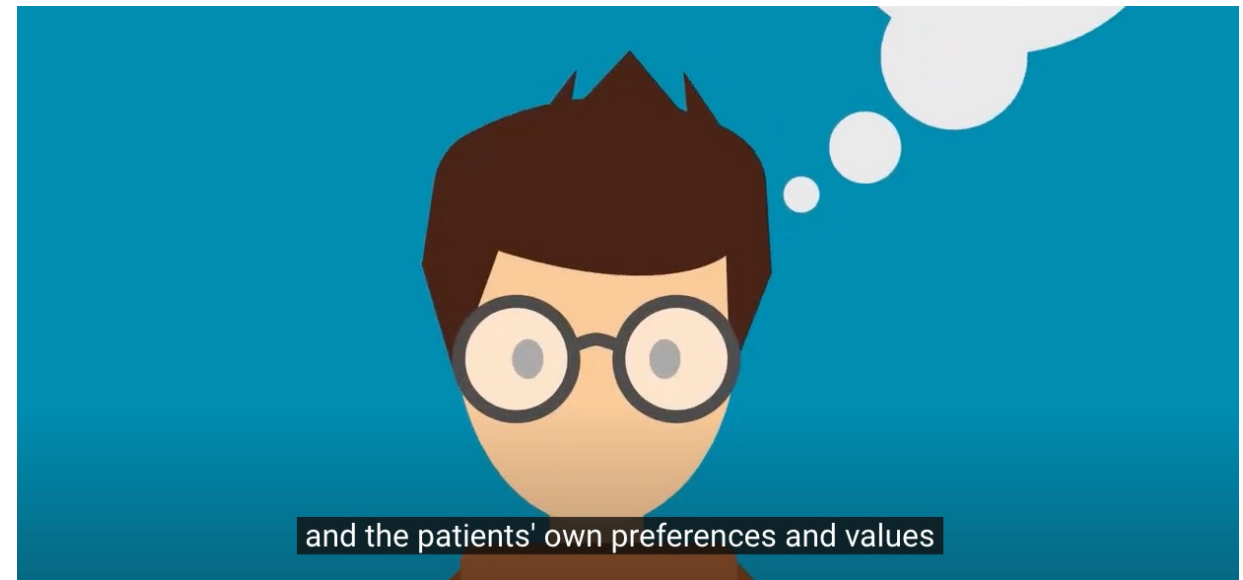
The human right to maintain personal bodily autonomy, have children, not have children, and parent the children we have in safe and sustainable communities.



Contraception coercion

“They wanted to go with the IUD...That’s the one they kept bringing up over and over again. I was like, it’s definitely a no-no. they said ‘It’s good, and you know like 90% of the women they love it,’ and you know...I was like ‘100% of me says NO.’”

Shared decision making, free of judgment or coercion, is the standard for patient-centered contraceptive decision making



What's available at IHS?

- Everything!
- Immediately postpartum
 - DMPA
 - IUD
 - Implant
 - Progestin-only pills
 - Sterilization (female/male)
 - Barriers, fertility awareness based methods
- Within the first 6 weeks to 2 months
 - Combined hormonal contraception (birth control pills, patch, ring)



Breastfeeding

WHO and CDC recommend exclusive breastfeeding up to 6m of age

Benefits

- Affordable
- Promotes bonding
- Improved health
 - **Newborn:** Decreases hospitalization rates, development of DM
 - **Mother:** Decreases risk of breast and ovarian cancer, DM and post partum depression



CDC Medical Eligibility Criteria

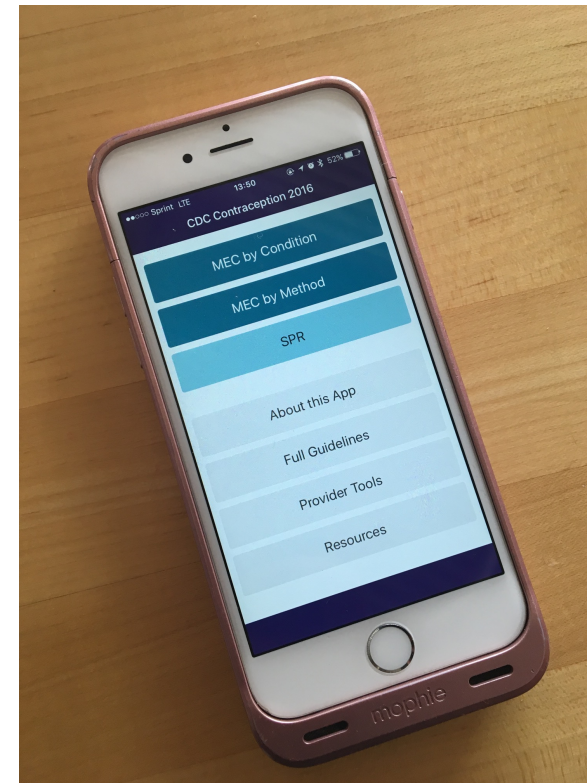
There's an app for that!

WHO's Medical Eligibility Criteria Categories for IUDs, Hormonal and Barrier Methods

Category	Description	With clinical judgment
1	No restriction for use	Use the method under any circumstances
2	Benefits generally outweigh risks	Generally use the method
3	Risks usually outweigh benefits	Use of method not usually recommended, unless other methods are not available/acceptable
4	Unacceptable health risk	Method not to be used

Source: WHO, 2010.

Session II, Slide # 7



Breastfeeding

Condition	Sub-Condition	Cu-IUD	LNG-IUD	Implant	DMPA	POP	CHC
Breastfeeding	a) <21 days postpartum			2*	2*	2*	4*
	b) 21 to <30 days postpartum						
	i) With other risk factors for VTE			2*	2*	2*	3*
	ii) Without other risk factors for VTE			2*	2*	2*	3*
	c) 30-42 days postpartum						
	i) With other risk factors for VTE			1*	1*	1*	3*
	ii) Without other risk factors for VTE			1*	1*	1*	2*
	d) >42 days postpartum			1*	1*	1*	2*
Postpartum (in breastfeeding or non-breastfeeding women, including cesarean delivery)	a) <10 minutes after delivery of the placenta						
	i) Breastfeeding	1*	2*				
	ii) Nonbreastfeeding	1*	1*				
	b) 10 minutes after delivery of the placenta to <4 weeks	2*	2*				
	c) ≥4 weeks	1*	1*				
	d) Postpartum sepsis	4	4				

Postpartum IUD: Copper and hormone

Advantages

- Women are motivated to contracept
- Convenient for patient/provider
- Insertion is simple (kinda...)
- No evidence of interference with Bfing
- Rapid return to fertility
- Bleeding changes
- Long duration

Disadvantages

- Higher expulsion rate
 - May be offset by higher proportion of patients actually getting an IUD inserted



Patient perceptions postpartum IUD: Convenience

- “Already here I might as well... knock it out, you know, two birds with one stone.”
- “It wasn’t that big of a deal. It was kind of I’m already in this position... might as well just get it done now instead of later.”
- “The placenta came out and um, they just put it in right away. I didn't feel anything.”
- “I was basically up here with my baby and you guys were doing your thing.”

Contraceptive implant



Most
effective

Prevents
pregnancy
>99% of the
time

Implants

- Lasts up to 5 years
- Highly effective, forgettable
- No evidence of impact on Bfing
- Bleeding changes
- Rapid return to fertility

Depo-provera



Very effective

Prevents
pregnancy
~91-99% of
the time

Injectables

- Highly effective
- Not associated with long term bone loss
- Not rapidly reversible
- Bleeding changes and weight gain



Review article

Progestogen-only contraceptive use among breastfeeding women: a systematic review[☆]

Sharon J. Phillips^{a,*}, Naomi K. Tepper^b, Nathalie Kapp^c, Kavita Nanda^d,
Marleen Temmerman^a, Kathryn M. Curtis^b





Conclusion: The preponderance of evidence **fails to demonstrate adverse breastfeeding outcomes or negative health outcomes in infants** such as restricted growth, health problems or impaired development

..... further study is warranted to examine the impact of immediate postpartum placement of the LNG-IUD.

Progestin-only contraceptives and breastfeeding



Combined pills, patch, ring

MENU		CDC Contraception 2016	
Breastfeeding		–	
a. <21 days postpartum			Category 4 - contraindicated
b. 21 to <30 days postpartum			Category 3 – risks may outweigh benefits
c. 30-42 days postpartum			Category 2 with no additional risk Category 3 if additional risks
d. >42 days postpartum			Category 2

Combined hormonal contraceptives and breastfeeding



Contraception

Contraception 94 (2016) 262–274

Review article

Combined hormonal contraceptive use among breastfeeding women: an updated systematic review^{☆,☆☆}

Naomi K. Tepper^{a,*}, Sharon J. Phillips^b, Nathalie Kapp^{b,c},
Mary E. Gaffield^b, Kathryn M. Curtis^a

In conclusion, fair- to poor-quality evidence showed **conflicting results on whether use of COCs affects breastfeeding performance.**

Combined-hormonal contraceptives and breastfeeding



How do you choose a method?



Emergency contraception

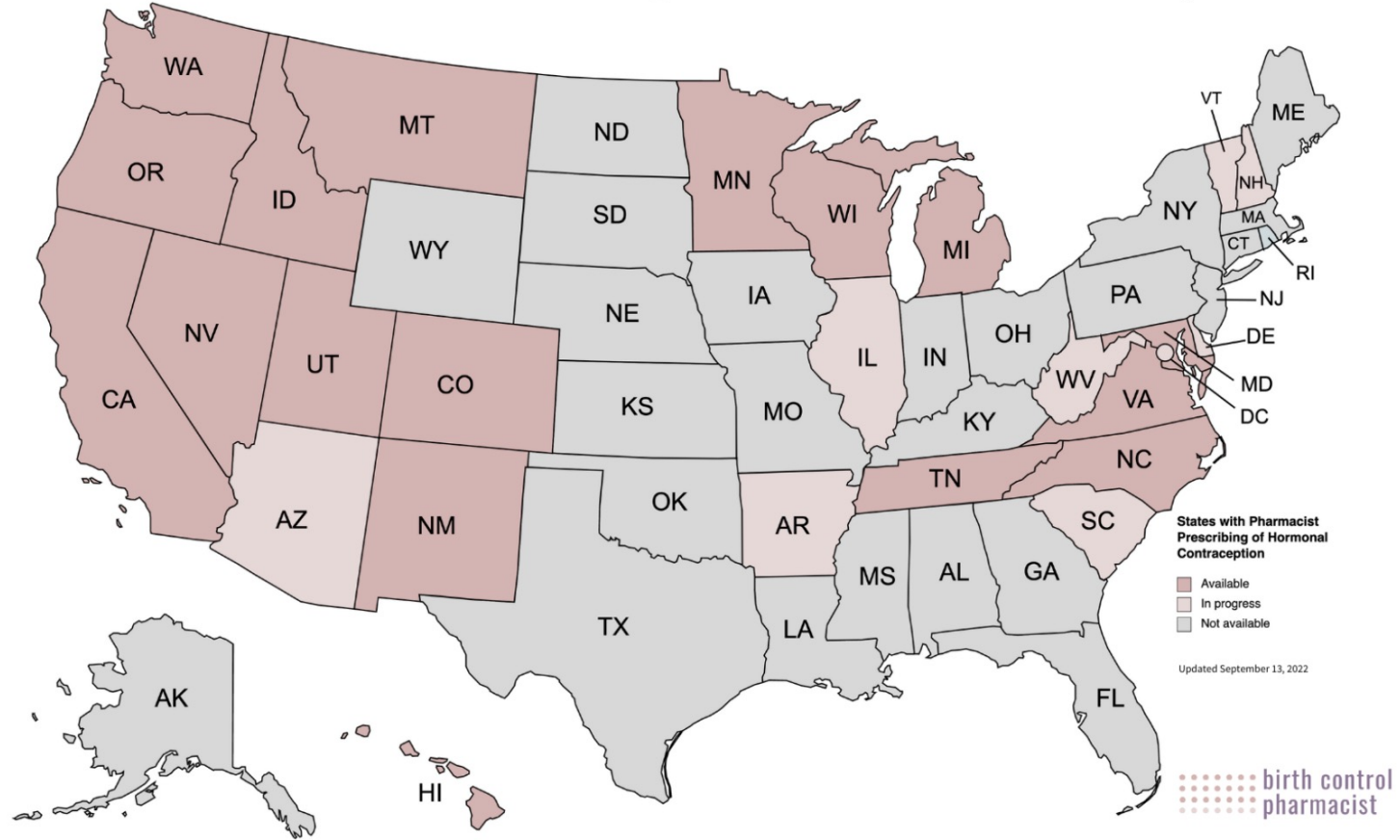
- “Plan B” 0.75mg levonorgestrel
 - Take within 3 days of unprotected sex
- “Ella” 30 mg ulipristal acetate
 - Take within 5 days of unprotected sex
- Both prevent ovulation and thin the endometrium





Telemedicine for contraception

Pharmacist Prescribing of Hormonal Contraception



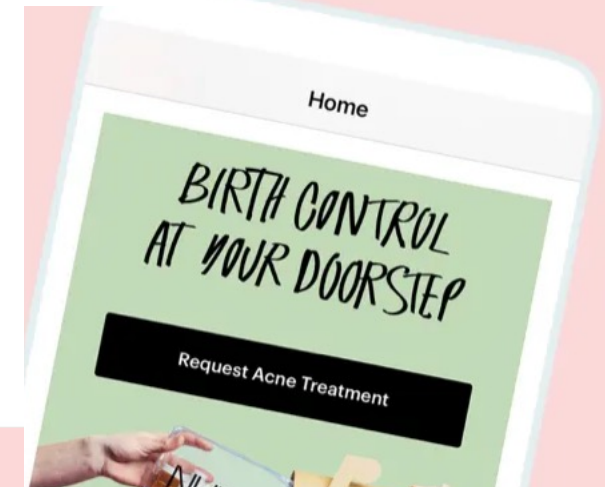
Access options are expanding

Get birth control delivered to your door

NURX.

Introducing Opill®

The first ever daily birth control pill available over the counter in the US is coming soon.



Birth Control, For Less

Shop your current birth control online, or try something new today

Get Started

Compare Prices



“... the cases on contraception [and] abortion... present various faces of a single issue: the roles women are to play in society. Are women to have the opportunity to participate in full partnership with men in the nation’s social, political, and economic life?”

—Ruth Bader Ginsburg, 1978



“Struggle is a never-ending process.
Freedom is never really won; you earn it
and win it in every generation”

- Coretta Scott King

