

# A Prospective Questionnaire Based Assessment of the Efficacy and Satisfaction Rate in Postpartum Intrauterine Contraceptive Device Insertion

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## Abstract

**Aim:** Efficacy and satisfaction rate in postpartum intrauterine contraceptive device insertion.

**Methods:** This prospective observational study was carried out in the Department of Obstetrics and Gynaecology, JLNCH, Bhagalpur, Bihar, India for 15 months. IUCD was inserted immediately postpartum regardless of the mode of delivery either intra-caesarean section (CS) or spontaneous vaginal delivery (SVD). Some patients took longer to make the decision, and IUCD was inserted after vaginal delivery within 48 hours. All patients were asked to fill in a questionnaire based upon likerts scale to judge the satisfaction level. And there was one direct question at the end which asked about satisfaction. All the patients were followed up immediately, after a week, after a month, after 3 months and after 6 months.

**Results:** There were some complications and as accepted the satisfaction levels were good in the cases that did not have any complications.

**Conclusion:** The satisfaction level is good except in the patients who suffer from initial complications. Steps are necessary to counsel the patients and take appropriate steps so as to reduce the complications.

**Keywords:** Efficacy, Satisfaction, Post-Partum, Intra Uterine, Contraception.

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## Introduction

Reduction in mortality of women is an area of concern for various health systems across globe. Current population of India is 1,21,05,69,573 (2011 census) [1]. India is the second largest country in the world accounting for 17.5% of world's population. With roughly 25 million births annually, India at present contribute one fifth of total world population growth more

than any other country.

Family planning during postpartum period has the potential to reduce a significant proportion of unintended pregnancies because, as research has demonstrated, women experience a large-unmet need for family planning during this time. Loosely defined, unmet need refers to the percentage of women who do not wish to

become pregnant but are not currently using a contraceptive.

The postpartum intrauterine contraceptive device (PPIUCD)-a long-acting, reversible contraceptive-offers a safe, effective and convenient alternative [2]. It has also been found to be acceptable among Indian women [3,4].

Among the various method of family planning available for an women, insertion of post-partum IUCD appears appealing for several reasons: commencement of ovulation is unpredictable after delivery, women wish to avoid pregnancy, but still may not be using any form of contraception, delivery may be only time when a healthy women comes in contact with health care providers, women is likely to be highly motivated for accepting contraception during postpartum, long term and reversible method, newer understanding about IUCD in terms of acceptability, low expulsion when inserted by proper technique, cost effectiveness, safety and feasibility of inserting immediately after child birth [5,6].

Advantages of immediate postpartum insertion of the IUCD include client motivation, safety, convenience, assurance of no pregnancy, does not interfere with lactation, facilitates adequate birth spacing,

immediately reversible and does not require repeated health care visits for contraceptive refills. PPIUCD insertion gives these women an extra edge of leaving the hospital with contraception after institutional delivery.

### Material and methods

This prospective observational study was carried out in the Department of Obstetrics and Gynaecology, JLNMCH, Bhagalpur, Bihar, India for 15 months. IUCD was inserted immediately postpartum regardless of the mode of delivery either intra-cesarean section (CS) or spontaneous vaginal delivery (SVD). Some patients took longer to make the decision, and IUCD was inserted after vaginal delivery within 48 hours. All patients were asked to fill in a questionnaire based upon likerts scale to judge the satisfaction level. And there was one direct question at the end which asked about satisfaction. All the patients were followed up immediately, after a week, after a month, after 3 months and after 6 months.

### Results

There were some complications and as accepted the satisfaction levels were good in the cases who did not have any complications

**Table 1: Age**

Number	Mean±Std. Deviation
50	24.45±4.55

**Table 2: Complications**

Expulsion	2
Secondary PPH	2
Irregular bleeding	4
Infection	1
Shock	1

**Table 3. Satisfaction based on Likerts scale**

	Likerts scale value
Immediately	37
after a week	36
after a month	40
after 3 month	36
after 6 month	42

## Discussion

Postpartum family planning is the prevention of unintended and closely spaced pregnancies during the first 12 months following childbirth [7,9]. Unintended pregnancy is characterized by untimely and short pregnancy intervals, and it can result in acute maternal complications and death of mothers and their children. In the United States, half of the pregnancies are unintended. According to "Healthy people 2020," almost 6.1 million pregnancies are unplanned, and it has a direct association with negative health and economic outcomes [10]. An unplanned pregnancy can cause maternal and child morbidity and mortality. In a recent study of postpartum unintended pregnancies, 86% resulted from non-use of contraception and almost 50% ended in induced abortion [9,10]. Using family planning (FP) to space births at least 36 months apart can avert 30% of maternal deaths and 10% of child deaths. Insertion of an intrauterine contraceptive device (IUCD) immediately after delivery has been recommended by the World Health Organization (WHO), as one of the safe and effective methods of temporary contraception [11]. Postpartum intra-contraceptive uterine device (PPIUCD) can be safely used in all breastfeeding women. Almost 39% to 65% of women in the first-year postpartum have an unmet need for family planning [11]. Hence, providing contraception in this sensitive period is important. PPIUCD reduces the rate of abortions, and it is a cost-effective, reversible, and convenient choice of contraception.

## Conclusion

The satisfaction level is good except in the patients who suffer from initial complications. Steps are necessary to counsel the patients and take appropriate steps so as to reduce the complications.

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