

## Contraception continuation rates in the under 18s

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### Abstract

**Introduction:** England has one of the highest teenage pregnancy rates in Europe. Although there is a wide selection of available contraceptives, they must be used consistently and correctly to prevent pregnancy. There is limited data on contraception continuation rates in teenagers in the UK. This audit aims to establish baseline continuation rates of the contraceptive pill/injection in <18's within a sexual health service.

**Method:** A retrospective audit on all 305 <18's started on the contraceptive pill/injection between Jan-March 2014. Continuation rates at 6 and 12 months were compared to the 2002 National Survey of Family Growth in the United States, standards cited by FSRH guidance.

**Results:** The continuation rates of the combined oral contraceptive pill (COC) at 6 and 12 months were 59% and 44.9% respectively, the progesterone only pill (POP) were 37.3% and 23.6% respectively and the injection were 60% and 22.9% respectively.

**Conclusion:** The continuation rates were lower than the standard when compared to women of all ages. However, using age-adjusted rates, the COC continuation rate exceeded the standard by 3%, and the POP and injection rates were closer to the standard. The COC had the highest continuation rate, suggesting the COC should be the method of choice in <18's. Continuation rates dropped off more sharply in the first 6 months, suggesting this is the crucial time to remind, educate and engage with teenagers. Continuation rates were higher in the section of the service with a dedicated vulnerable young persons' worker.

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### Biography

Katie Lawton graduated from Manchester Medical School in 2013, and then worked as a foundation doctor in Manchester for 2 years. During this time, she completed the DRCOG and FSRH diplomas. She then worked in sexual health for 1 year,

completing contraceptive implant and IUD training. She is now completing academic GP training. This research has also been presented at the Faculty of reproductive health conference in 2016 and at the royal college of GP conference in 2016.