



A STUDY OF USE OF DMPA(INJECTABLE CONTRACEPTIVE) IN POSTPARTUM AND POSTABORTAL PATIENTS

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ABSTRACT

BACKGROUND: Injectable depot-medroxyprogesterone acetate is a progestin-only, long acting contraceptive. It is proved safe, effective, reversible and acceptable.

AIMS AND OBJECTIVE: The objective of the study is to evaluate the safety and effectiveness of DMPA, its acceptance and its side effects in postpartum and postabortal women.

MATERIALS AND METHOD: The type of study was prospective, interventional, longitudinal and a single centered study conducted in Department of Obstetrics and Gynecology at L G Hospital, Maninagar, Ahmedabad.

Study group received Inj. DMPA 150 mg intra muscularly immediately after abortion and delivery before discharge from hospital (Day 2 to 7 of their delivery). They were given DMPA every 3 months.

RESULTS: In present study out of 90 patients, 50 patients (55.55%) took injection post-delivery and 40 patients (44.44%) took it post abortion. Irregular bleeding was major side effect seen in 55 patients (61.11%), amenorrhea seen in 26 (29%) patients, weight gain noted in 3 patients over 1 year, other side effects were headache, backache, dyspareunia, erythema nodosum in 5 patients.

In post-partum women, lactation remained unaffected.

CONCLUSION: Patients prefer DMPA because it is non-coitus dependent, convenient, long acting and other non-contraceptive benefits.

No effect on lactation.

The return of fertility takes 7-10 months from date of last injection, but it is completely reversible.

KEYWORDS

DMPA, POSTPARTUM, POSTABORTAL, IRREGULAR BLEEDING

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BACKGROUND

- Population in the world is increasing day by day. India is having population of 1.2 billion as per census 2011. India was the first country in the world to launch a Family Planning Programme, as early as 1952, with the main aim of controlling its population.
- Contraceptive counseling should be an integrated part of any abortion care and postpartum care to help women avoid another unplanned or unwanted pregnancy. Injection DMPA is an long acting, effective and reversible contraceptive method in lactating mother and postabortal patients.
- One injection at every three months makes compliance better and less side effects makes this contraception acceptable. The inclusion of injectables in National Family Planning Programme is consistent with steps by Government of India towards reducing unmet need of family planning.
- The study is conducted with the purpose to view the safety and effectiveness of DMPA, its acceptance and its side effects in postpartum and postabortal women.

MATERIALS AND METHOD

Study site:

- The study was conducted at the Obstetrics and Gynecology Department, Tertiary care Centre, Ahmedabad.

Study duration:

- The study was conducted for a total duration of 12 months from June 2017 to June 2018.

STUDY METHOD:

- Prior approval to conduct the study was taken from the Head of the unit and then patients were enrolled in the study.

- Study group received Inj. DMPA 150 mg intra muscularly immediately after abortion and Delivery before discharge from hospital (Day 2-Day 7 of their delivery). They were given DMPA every 3 months.

INCLUSION CRITERIA:

- Female patients age 18 years above in post-delivery and postabortal period.
- Patients not suffering from any chronic illness or having any Contraindication to Progesterone.
- Patients who have given a written informed consent and willing to report for regular follow up
- Patients desiring a long-term, highly efficacious, non-coitus dependent, private contraceptive method.

EXCLUSION CRITERIA:

- Patients who did not consent for enrolment or regular follow up were excluded from the study.
- Patients having contraindication to progesterone therapy.

RESULTS

1: Age distribution of patients (N=90)

- Table 1 shows that, Majority 49(54.44%) patients were in the age Group of 18-25 years while 33(36.66%) patients were in the age group of 26-35 years where as 8(8.88%) were of more than 36 years.

2: Parity Distribution

- Out of 90 patients, most of patients, 37 (41.11%) were 2nd para and 5 patients (5.55%) were nulliparous, 9 patients (10%) were Primiparous.

- para,26 patients (28.88%) were 3rd para,12 patients (13.33%) were 4th para and 1 patient (1.11%) was >4th para. So, 84% patient were multipara and 10% were primipara.
- In present study most of the women had 2 or more children, thus had completed their family size. They choose DMPA as they feared from using permanent sterilization or IUCD as per their religious and cultural beliefs.
 - In India women are less aware and less informed about spacing methods So, generally they are reluctant to use any contraception method before completing their family.

3: Time of Injection

- In present study out of 90 patients,50 patients (55.55%) took injection post-delivery and 40 patients (44.44%) took it post abortal.

4: Side effects of DMPA

SIDE EFFECTS	NO:OF PATIENTS (N=90)	PERCENTAGE (%)
AMENORRHEA	26	28.88%
IRREGULAR BLEEDING	55	61.11%
HEAVY BLEEDING	5	5.55%
WEIGHT GAIN	3	3.33%
MOOD CHANGES	6	6.66%
HEADACHE and others (backache, erythema nodosum, dyspareunia)	5	5.55%

- In present study irregular bleeding was major side effect seen in 61.11% patients.
- Second major side effect was amenorrheaseen in 29% patients.
- Irregular bleeding was more common with initial 2-3 injection, gradually it subsided.
- In present study, weight gain noted in 3 patients over 1 year, other side effects were headache, backache, dyspareunia, erythema nodosum in 5 patients.
- Menorrhagia which was common with first and second dose of injectable was reported by five patients in our study
- Though these effects are self-limiting. It is established that pretreatment counselling on expected side effects and their management improves acceptability of DMPA.

5: Effect on Lactation

Parity	Satisfied with lactation (frequency, amount, quality)	Not satisfied
Primipara	8(89%)	1
Multipara	73(96%)	3

- In post-partum women, lactation remained unaffected.
- Therefore, DMPA is a feasible option during lactation when estrogen containing contraceptives are not favored. When initiated immediately or at 6 weeks postpartum, DMPA has not been shown to decrease duration of lactation or infant weight gain

CONCLUSION

- The study concludes that DMPA is very effective contraceptive and convenient to use due to its convenient dosage schedule.
- Apart from menstrual troubles there are no significant major side (weight gain, mood changes, etc.) effects related to its use.
- DMPA may cause a delay in the return of fertility, the return of fertility takes 7-10 months from date of last injection, but it is completely reversible.
- Patients prefer DMPA because it is non-coitus dependent, convenient, long acting and other non-contraceptive benefits.
- Injectable DMPA use as a contraceptive in the immediate postpartum period was found to be a safe and effective alternative method with no deleterious effect on mother's milk secretion and infant growth.

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