Use and knowledge of contraceptive methods by patients in two substance abuse treatment centers in Paris

Virgile Clergue-Duval¹, Suzanne Robin², Maeva Fortias³, Gaël Dupuy³, Béatrice Badin-de-Montjoye⁴, Florence Vorspan^{1,3}

¹ Faculté de Médecine, Université Paris Diderot, Paris ² Master Genre, Politique et Sexualité, EHESS, Paris ³ CSAPA Espace Murger, Service de Médecine Addictologique, Hôpital Fernand Widal, APHP, Paris ⁴ CSAPA Centre Cassini, Service de Psychiatrie, Hôpital Cochin, APHP, Paris virgile.med@clergue-duval.net

Background

International studies on contraceptive use by patients with substance use disorders show a low use of contraception. They focus on the most precarious fraction of patients, mainly users of opiates with high-risk drug use and sexual behaviors and those not currently enrolled with treatment centers [1]. They are not easily applicable to all patients of substance abuse treatment centers.

- > Main objective : describe the use of contraceptive methods of patients aged 18 to 54 followed in substance abuse treatment centers in Paris.
- > Secondary objectives : describe patients' knowledge of contraceptive methods and assess the rate of abortion.

Characteristics of patients

- > 78 respondents (5-10% of total visitors)
 - 69% Espace Murger, 31% Centre Cassini
 - 48% women and 52% men
 - Mean age 40.7 years
 - 74% have general practitioner
 - 30% have children
 - Substance use:
 - 44% opiate
 - 31% alcohol,
 - 21% prescribed drugs
 - 19% cannabis
 - 18% cocaine
 - 8% crack
 - 10% tobacco
 - 5% Behavioral addiction
- > 53 patients with at least one partner in the last 6 months and unsterilized
 - 71% with regular partner
 - 37% with casual partners

Methods

- o Population: French-speaking and literate patients aged 18 to 54 years, in medical visit or heroin maintenance treatment delivery.
- o In two generalist substance abuse treatment centers in parisian hospitals: Espace Murger (F. Widal) and Centre Cassini (Cochin).
- An anonymous self-report questionnaire was distributed by the reception staff during five weeks between February and March 2016.
- It explored different contraceptive methods, medical abortion, unplanned pregnancy and emergency contraception.
- The data was analyzed with the R program.

Results

- Contraception use :
 - > **55.3% always** (26)
 - > 19.1% sometimes (9)
 - > **25.5%** never (12)
- > Contraceptive methods use currently:
 - > 39.6% male condom alone (21)
 - ➤ 13.2% hormonal pill (7)
 - > 5.7% intrauterin device (3)
- Contraceptive methods use previously :
 - > **89.2% male condom** (66)
 - > 63.5% hormonal pill (47)
 - > 35.1% withdrawal (26)
 - ➤ 18.9% intrauterine device (14)
- Knowledge of contraceptive methods :
 - > 98.6% male condom (72)
 - > 93.2% hormonal pills (68), including 18.4% insufficiently
 - > 79.4% intrauterine device (54), including 29.4% insufficiently
 - > 55.5% implant (40), including 20.8% insufficiently
 - > 35.6% injection (26), including 21.9% insufficiently
- > 89.0% knew the emergency contraception. 37.5% have used it.
- > 35,6% ever confronted with an unplanned pregnancy (26)
- > **41,1%** had a **medical abortion** (30)
- > 12,3% reported abortion but no unplanned pregnancy (9)

Conclusion

- Use of contraceptive methods is not as low as previously observed in other populations of substance users, but it is lower than general population's [1-3].
- This may reflect the combined severity of the SUD as well as high access to medical and social care for patients attending this type of free clinics.
- Knowledge of contraceptive methods is common [4].
- Male condom is the dominant method, yet it is not best effective contraceptive method in practice [5].
- Use of intrauterin device is low, in this population with a mean age of 41 years [2].
- It is necessary to continue questioning individually the contraceptive choices and the influence of the desire to be a parent on addiction care pathway [6].

References

- 1. Terplan M, Hand DJ, Hutchinson M, and al. Contraceptive use and method choice among women with opioid and other substance use disorders: A systematic review. Prev Med. 2015;80:23–31.
- 2. Bajos N, Rouzaud-Cornabas M, Panjo H, Bohet A. La crise de la pilule en France : vers un nouveau modèle contraceptif ? Popul Sociétés. 2014;511.
- 3. Le Guen M, Ventola C, Bohet A, and al. Men's contraceptive practices in France: evidence of male involvement in family planning. Contraception. 2015;92(1):46–54.
- 4. Gall B, Jouannic É. Les français et la contraception. Saint-Denis : INPES; 2007.
- 5. World Health Organization. Family planning: a global handbook for providers. Geneva: WHO; 2011. 372p.
- 6. Bajos N, Ferrand M. L'interruption volontaire de grossesse et la recomposition de la norme procréative. Sociétés Contemp. 61(1):91–117.

