

# Knowledge, Attitude and Practice of Emergency Contraception in Women Attending Outpatient Department of Shahida Islam Teaching Hospital (SITH) Lodhran

Joveria Sadaf, Tanzila Rafiq, Aslam Mahmood Malik, Saba Nadeem and Sana Ara

## ABSTRACT

**Objective:** The aim of this study was to assess the knowledge, attitude and practice of emergency contraceptive among women who attended Shahida Islam Teaching Hospital Obstetrics and Gynaecology Department in Out Patient department.

**Study Design:** Cross-Sectional Study

**Place and Duration of Study:** This study was conducted at the Shahida Islam Teaching Hospital, Lodhran from April to June, 2018.

**Materials and Methods:** All women of reproductive age, presenting in the gynaecology and obstetrics outpatient department in Shahida Islam Teaching Hospital Lodhran were included in the study. Unmarried, mentally retarded and those who were not willing to participate in survey were excluded. Face to face interview through structured questionnaire was done. Data was collected using structured questionnaire and analyzed using SPSS version 17.0. Descriptive statistics chi-square tests were done and significance of tests was decided at p-value 0.05.

**Results:** In this study 548 women were interviewed. Less than half of them 262(47.8%) were from urban area and 286(52.2%) were from rural area. All of them were married. Of all the respondents 92(16.8%) women had awareness about emergency contraceptive. 82(15%) of the women mentioned pills as emergency contraception and only 26(4.7%) of them mentioned intrauterine device as emergency contraception. 265(48.4%) of them have positive attitude towards emergency contraception but only 64(11.1%) of them have ever used emergency contraceptives.

**Conclusion:** The knowledge and practice of emergency contraception is very low. But there is high positive attitude towards emergency contraceptives. Since there is much deficit on knowledge of women on emergency contraceptives, in addition to making them accessible; programs targeted at promotion and education of emergency contraceptives is helpful to prevent unwanted pregnancy.

**Key Words:** Emergency contraception, IUD, Morning after pill

**Citation of article:** Sadaf J, Rafiq T, Malik AM, Nadeem S, Ara S. Knowledge, Attitude and Practice of Emergency Contraception in Women Attending Outpatient Department of Shahida Islam Teaching Hospital (SITH) Lodhran. Med Forum 2020;31(12):81-84.

## INTRODUCTION

Approximately, one third of pregnancies are not planned and one fifth of all pregnancies end in abortion. More than 170,000 legal abortions are performed in the United Kingdom annually.<sup>1</sup>

---

Department of Obstet and Gynae, Shahida Islam Teaching Hospital(SITH) Lodhran.

---

Correspondence: Dr Joveria Sadaf, Assistant Professor of Obstet and Gynae, Shahida Islam Teaching Hospital, Lodhran.

Contact No: 0333 6372107

Email: joveriasadaf@gmail.com

---

Received: May, 2020

Accepted: September, 2020

Printed: December, 2020

---

Emergency contraception is effective and safe method to avoid an unwanted pregnancy happening after an unprotected sexual intercourse. History of emergency contraceptive dates back to the 1960's when physicians in the Netherlands gave estrogen extracts to 13 years old girl who had been raped. Several methods for emergency contraception (EC) are now registered in many countries to be used in an emergency to avoid a pregnancy following an unprotected, possibly fertile intercourse or after a contraceptive accident like condom leak or condom rupture<sup>2,3,4</sup>.

There have been many attempts to control pregnancy after unprotected sexual intercourse (UPSI). So far, hormonal methods preventing or delaying ovulation have proved to be the most popular method starting with the combination of ethinyl estradiol and levonorgestrel (LNG), the Yuzpe regimen. The first dose had to be taken within three days of UPSI, a second one 12 hours later. Later on, LNG alone, at first in a regimen similar to the Yuzpe method ( $2 \times 0.75$  mg

12 hours apart) proved to be more successful, at last resulting in the development of a 1.5 mg LNG pill that combined good control of fertility with a high ease of use. Its limitations are the non-optimal efficacy which is decreasing the later the drug is taken and the fact that it is only approved for up to 72 hours after UPSI.<sup>3,5,6</sup> It has become the standard method of emergency contraception used up to this day in most countries.

Since the mid-1970s copper IUDs have been used for emergency contraceptive, which show a high efficacy. Their disadvantages are that emergency contraception is considered an off label use for most IUDs and that they sometimes not be acceptable for every patient. Moreover, IUD-insertion is an invasive procedure and it is required trained personals and sterilized facilities for insertion.<sup>3,7</sup>

Mifepristone in the dosages of 10 or 25 mg is used with good results as an emergency contraceptive in China for up to 5 days after UPSI, but has never received any significant consideration in Western countries. It is not available in Pakistan.<sup>3,8</sup>

The most recent development is the approval of the selective progesterone receptor modulator ulipristal acetate (UPA) in the dosage of 30 mg for EC up to 5 days after UPSI, combining the safe and easy application of the single dose LNG pill with an even higher efficacy. It has shown to be more efficacious than LNG and can be used for up to 120 hours after UPSI; the difference in efficacy is highest for 0-24 hours, followed by 0-72 hours following UPSI. It is also not available in Pakistan

So, we are left with oral hormones and IUD devices and designed our questionnaire accordingly. Generally, the knowledge of contraception has increased in urban and rural population of Pakistan in recent years, so as the positive attitude towards contraception use. But still the knowledge about emergency contraception is poor even in educated females. Our study will not only help to show the level of knowledge and use as well as attitude of women toward emergency contraception it also provides useful information for the policy makers to control the rate of unintended pregnancy and unsafe abortions by overcoming the problems related to this neglected domain of family planning in Pakistan.

## MATERIALS AND METHODS

Institution base cross-sectional study on knowledge, attitude and practice of emergency contraceptive was conducted at Shahida Islam Teaching Hospital, Lodhran from April to June, 2018. Total of 548 patients participated in the survey.

**Inclusion and Exclusion Criteria:** All women of reproductive age, presenting in the gynaecology and obstetrics outpatient department in Shahida Islam Teaching Hospital Lodhran were included in the study. Unmarried, mentally retarded and those who were not willing to participate in survey were excluded.

**Data Collection:** Face to face interview through structured questionnaire was done. The questionnaire was kept in the outpatient department and patients were interviewed on arrival.

**Data Analysis and Presentation:** The Data was analyzed by SPSS for windows version 17.0. Descriptive statistics chi-square tests were done and significance of tests was decided at p-value 0.05. Tables and graphs were used to depict results.

**Operational Definitions:** Knowledge-Awareness about the types and time limit to be taken after unprotected sex, of emergency contraceptives.

Attitude-The way to which clients are thinking or behaving towards emergency contraceptive. Practice - Trend of use of emergency contraceptives among women, in case of unprotected intercourse.

## RESULTS

In this study 548 women were interviewed. Less than half of them 262(47.8%) were from urban area and 286(52.2%) were from rural area.

**Table No.1: Knowledge, Attitude and Practice n=548**

Variable	YES	NO
Knowledge of emergency contraception	92(16.8%)	456(83.2%)
Know the pill as emergency contraceptive	82(15%)	456(85%)
Know how to take the pill	47(8.6%)	501(91.4%)
Know the IUD as emergency contraceptive	26(4.7%)	522(95.3%)
Like to use emergency contraceptive if needed	265(48.4%)	283(51.6%)
Had ever practiced emergency contraception	64(11.7%)	484(88.3%)

**Table No.2: Knowledge and Practice n=548**

Practiced ever→ Knowledge↓	Yes	No	total
Yes	64(11.7%)	28 (5.1%)	92(16.8%)
No	0(0%)	456(83.2%)	456(83.2%)
Total	64(11.7%)	484(88.3%)	548(100%)

P value= 0.00

**Table No.3: Knowledge and Area of Origin n=548**

Origin knowledge	Urban	Rural	Total
Yes	71 (13%)	21 (3.8%)	92 (16.8%)
No	191 (34.8%)	265 (48.4%)	456 (83.2%)
Total	262 (47.8%)	286 (52.2%)	548 (100%)

P value= 0.00

All of them were married. Of all the respondents 92(16.8%) women had awareness about emergency contraceptive. 82(15%) of the women mentioned pills as emergency contraception and only 26(4.7%) of them mentioned intrauterine device as emergency contraception. 265(48.4%) of them have positive

attitude towards emergency contraception but only 64(11.1%) of them have ever used emergency contraceptives. Results are shown in tables 1,2,3.

## DISCUSSION

Unwanted pregnancy is a major challenge to reproductive health of young women in developing countries. Some women, who had unwanted pregnancies, obtain abortion. Many of which are performed in unsafe and unsterilized conditions by untrained and unauthorized persons and others carry their pregnancies to term. Emergency contraceptive can prevent pregnancy when taken shortly after unprotected sex.

The result of our study shows that knowledge of emergency contraception is very low (16.8%) especially among the women of rural origin (3.8%) similar findings are there in many other studies.<sup>8,9,10,11</sup> Knowledge of the emergency contraception is directly proportional to the use of the method. It is evident that to increase the use of emergency contraception to prevent unwanted pregnancy, knowledge of the method should be spread among the women of reproductive age especially in rural population.

It is also clear from our study that there is high level of positive attitude towards emergency contraception 48.8% women told that they would use an emergency contraception method if needed. These results are similar to those found in studies conducted by Hobbs M, Ball DE, Harper CC<sup>12, 13, 14</sup> Some women also commented that they would have definitely used a method if they could have known and found any emergency contraception earlier. It means that giving them the knowledge of emergency contraception is definitely going to reduce unwanted pregnancy rates.

George J et al, Silva FC et al, Siebert I et al conducted studies in developed countries, tertiary care centers<sup>15,16,17</sup>. They concluded that in developed countries the knowledge of emergency contraception is high but the use is less, though the attitude towards emergency contraception is highly positive. These results are contradictory to our study. They give the reason that in developed world the use of reliable regular contraception is so high that they have less incidences of unprotected sexual intercourse.

To conclude in our society giving awareness of emergency contraception is definitely a way to reduce unplanned unwanted pregnancies and will give women empowerment over decision of their family size.

## CONCLUSION

The knowledge and practice of emergency contraception is very low. But there is high positive attitude towards emergency contraceptives. Since there is much deficit on knowledge of women on emergency contraceptives, in addition to making them accessible; programs targeted at promotion and education of

emergency contraceptives is helpful to prevent unwanted pregnancy.

### Author's Contribution:

Concept & Design of Study: Joveria Sadaf  
 Drafting: Tanzila Rafiq, Aslam Mahmood Malik  
 Data Analysis: Saba Nadeem and Sana Ara  
 Revisiting Critically: Joveria Sadaf, Tanzila Rafiq  
 Final Approval of version: Joveria Sadaf

**Conflict of Interest:** The study has no conflict of interest to declare by any author.

## REFERENCES

1. Philip D, Tabet R. Current diagnosis and treatments in Obstetrics and Gynecology, Chapter 36 contraception and family planning. US Obstet Gynecol 2007.
2. Essential OBS/Gyn 4th Edition, family planning, contraception, sterilization and abortion. p. 347.
3. Krassovics M, Virágh G. Usage patterns and attitudes towards emergency contraception: the International Emergency Contraception Research Initiative. Eur J Contracept Reprod Health Care 2016;21(4):310-7.
4. Gordon AF, Owen P. Emergency contraception: change in knowledge of women attending for termination of pregnancy from 1984 to 1996. Br J Fam Plann 1999;24(4):121-2.
5. Mittal S. Emergency contraception: which is the best? Minerva Ginecol 2016;68(6):687-99.
6. Gemzell-Danielsson K, Rabe T, Cheng L. Emergency contraception. Gynecol Endocrinol 2013;29 Suppl 1:1-14.
7. Smith LF, Whitfield MJ. Women's knowledge of taking oral contraceptive pills correctly and of emergency contraception: effect of providing information leaflets in general practice. Br J Gen Pract 1995;45 (397):409-14.
8. Tesfaye T, Tilahun T, Girma E. Knowledge, attitude and practice of emergency contraceptive among women who seek abortion care at Jimma University specialized hospital, southwest Ethiopia. BMC Womens Health 2012;12:3.
9. Abbott J, Feldhaus KM, Houry D, Lowenstein SR. Emergency contraception: what do our patients know? Ann Emerg Med 2004;43(3):376-81.
10. Hobbs MK, Taft AJ, Amir LH, Stewart K, Shelley JM, Smith AM, et al. Pharmacy access to the emergency contraceptive pill: a national survey of a random sample of Australian women. Contraception 2011;83(2):151-8.
11. McDonald G, Amir L. Women's knowledge and attitudes about emergency contraception: a survey

- in a Melbourne women's health clinic. *Aust N Z J Obstet Gynaecol* 1999;39(4):460-4.
12. Hobbs M, Taft AJ, Amir LH. The emergency contraceptive pill rescheduled: a focus group study of women's knowledge, attitudes and experiences. *J Fam Plann Reprod Health Care* 2009;35(2):87-91.
  13. Ball DE, Marafie N, Abahussain E. Awareness of and attitude toward hormonal emergency contraception among married women in Kuwait. *J Womens Health (Larchmt)* 2006;15(2):194-201.
  14. Harper CC, Ellertson CE. The emergency contraceptive pill: a survey of knowledge and attitudes among students at Princeton University. *Am J Obstet Gynecol* 1995;173(5):1438-45.
  15. George J, Turner J, Cooke E, Hennessy E, Savage W, Julian P, et al. Women's knowledge of emergency contraception. *Br J Gen Pract* 1994;44(387):451-4.
  16. Silva FC, Vitalle MS, Maranhão Hde S, Canuto MH, Pires MM, et al. [Regional differences in knowledge, attitudes, and practice in emergency contraceptive use among health sciences university students in Brazil]. *Cad Saude Publica* 2010; 26(9):1821-31.
  17. Siebert I, Steyn PS. Knowledge and use of emergency contraception in a tertiary referral unit in a developing country. *Eur J Contracept Reprod Health Care* 2002;7(3):137-43.