

Role of Family Physician in Choice of Contraceptives, Consulting Women of Reproductive Age

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Introduction. As different choices of contraception are steadily expanding, it is of high importance that general practitioners stay updated and seek education on the topic.

Aim. The aim of the study is to investigate the role of general practitioners (GPs) in choice of contraceptives.

Material and Methods. A search for scientific papers was carried out in the following databases: PUBMED, BMJ (British medical journal), MEDLINE, EBSCOhost, WILEY ONLINE LIBRARY and THE COCHRANE LIBRARY. The search did not include time restriction, i.e. the databases were searched from the start-date to September 20th, 2014. The keywords used were: *family practitioners, general practitioners, physicians, role, consultation, adherence, contraception, contraceptive choice, intrauterine devices, long acting reversible contraceptives* and *family planning*. Further search for informative articles, both in databases mentioned above and via GOOGLE, were based on citations found in the relevant articles. After the review of the abstracts, publications not related to the specific topic, were excluded. No exclusion criteria were used other than relevance to the topic, making the articles methodologically diverse, including clinical trials, descriptive and cross-sectional studies. A cross-sectional questionnaire was formulated to investigate the GPs' role in contraceptive choice for women aged 15–49 in Norway, posted on a survey site (<https://kwiksurveys.com>), the replies were statistically analysed.

Results. Ten articles were selected for further analysis. The literature reviewed from different parts of Europe shows a clear tendency toward confirming the role of the general practitioner as the main source of information of contraceptive methods among women in reproductive age. Research of France by Moreau *et al.*, 2006; Halpern *et al.*, in 2013, showed that the role of GPs is not purely limited to the choice of contraceptives; they also play a positive role in the consistency of use of the chosen method. Mansour *et al.*, 2008, study results indicate that > 87% of patients at the GPs reported that they were unaware that LARC contraceptives can be fitted and provided by their GPs. 40% of patients, attending GP, reported that LARC methods were discussed. An insufficient fulfilment of the GPs' role was found in 8 descriptive, cross-sectional studies. More research is needed to find the possible causes of it. One randomised controlled trial study demonstrated that an empowered patient had an effect on the physician's outcome in a contraceptive consultation. The full sample size of an inquiry was 178. A great amount of the participants are satisfied with the knowledge of their general practitioner, classifying it as very high (21%), high (34%) or average (31%). 80% of the participants found, they received enough information to make an educated choice, 20% admitted it not to have been enough to make a proper choice. 50% received information about the efficiency of contraceptive methods, 81% received information about pros and cons of the chosen method, 46% received information about different types of contraception that are available. 9% of the participants chose another method of contraception after the consultation, while 91% were prescribed what they had decided on before the consultation. Unwanted pregnancies were experienced by 3% of the participants of the study.

Conclusions. The role of family practitioners in choice and consistency of use of contraceptives is dominating. In Norway a great amount of patients are satisfied with their GPs' knowledge and the provided consultation (80%). More research is needed to promote better consultations on contraceptive use. Guidelines and checklists, along with further education of GPs are recommended to optimize contraceptive use among women of reproductive age.