Contraceptive Use and Pregnancy Outcomes among Opioid Drug-Using Women: A Retrospective Cohort Study

Charles Cornford MD FRCGP*,   Helen Close, Roz Bray, Deborah Beere, James M. Mason

*Fulcrum Medical Practice, Middlesbrough charles.cornford@nhs.net

Background
- Low level of contraception use in opioid addicted women in previous, non UK studies
- High rates of sexually transmitted infections in related groups
- Problems with knowledge and attitudes towards contraception: exaggerated worries, fatalism, coercive relationships with men.
- Child protection issues and legal proceedings

Aims
- To describe contraceptive use and pregnancy outcomes in opioid-using women, and to examine their association with a range of risk factors

Method
- Sample and setting: 376 female patients (mean age 33, range 20-61) receiving methadone or buprenorphine and registered at two specialist General Practices
- Measures:
  - Note search including: contraceptive use, pregnancies, terminations, births, family composition, sexually transmitted infections and cervical testing
  - Data from Treatment Outcomes Profile (TOP) and National Drug Treatment Monitoring System forms (NDTMS)
- Data combined and analysed through SPSS

Results
- Low use of contraception and differences in types used in comparisons with age-adjusted national data:
  - Non-condom contraception low: (24% compared to 50% $p<0.001$)
  - Lower use of oral contraception (4% v 25% $p<0.001$) and IUCD (1% v 6% $p<0.001$)
  - Higher rates of injectable contraception (6% v 3% $p=0.003$),
  - Similar rates of sterilisation (7% v 6%)
  - No associations with current drug/ alcohol use, health status, DV.
  - Sexual abuse history statistically associated with greater planned non-condom contraception.
- Pregnancies
  - Similar live births to population norm of an age-matched cohort (2.43 v 1.97 $p=0.74$)
  - High termination rates (0.46 per mother v 0.025 $p= 0.004$)
- Children: Of the total 556 under 16 years of age:
  - 36% lived with their mother
  - 39% with other family member
  - 20% adopted/ foster care.
- Cervical smears: high rates of testing (82% v 79% nationally)
- Chlamydia: high annual incidence (1.1% v 0.33% nationally $p<0.0001$)

Limitations:
- Use of data designed for purposes other than research
- Lack of reliable recording of condom use.
- Hypothesis generating approach to explore associations

Conclusions
- Low use of non-condom contraception, but also a different spectrum of use compared to standard population
- No 'within group' associations between contraceptive use and current drug/ alcohol use
- High rates of Chlamydia, terminations of pregnancy, children living apart from mothers.

Practice implications:
- Lack of association with current drug or alcohol use, sexual abuse, DV and perceived health status shows they are not barriers to uptake of contraceptive services within this group.
- High rates of cervical testing and use of injectable contraception indicate what might be achieved.