Norplant in Jordan: A prospective study conducted in a primary care facility over 2 years

*RCOG World Congress, Hyderabad, India (March 2014).*

Abdel-Fattah Salem, MBBS, DGO, MRCOG, FRCOG

Hashemite University

Zarqa, Jordan

**Abstract number:** 366

**Presentation:** Oral presentation

**Introduction:** Norplant is a form of birth control in which levonorgestrel is implanted sub-dermally. Although data addressing the efficacy and side-effects of Norplant are abundant in developed countries, there is a clear lack of such studies in the Middle East. The aim of this work was to evaluate the side-effects, efficacy, duration of use and causes of removal of Norplant in a primary care facility in Jordan.

**Methods:** This is a prospective study conducted at Al Bashir Hospital (Amman, Jordan). One hundred and thirty women who had Norplant inserted over a period of 2 years were included. Baseline patient characters (age and parity), duration of use, cause of removal, side-effects and failure rate were accurately documented.

**Results:** The mean age of users was 33.6 years (range, 26-40 years). Mean parity was 4.8 (para 5 or more in 70 cases (53.84%), para 3-4 in 42 cases (32.31%) and para 1-2 in 18 cases (13.85%). Overall, the mean duration of use was 3.6 years. In 62 cases (47.7%), Norplant remained for the entire 5 years. In the remaining patients, Norplant was removed prematurely; 26 cases (20%) after 4 years, 24 cases between 1-3 years (18.5%) and 18 cases (13.8%) after less than 1 year. The most commonly encountered side-effects were irregular cycles (60 cases; 46.2%) and weight gain (52 cases; 40%). Other less common side-effects include decreased libido (30 cases; 23.1%) and amenorrhea (10 cases; 7.7%). Overall, only one user (an obese lady) presented with pregnancy after 4 years of use; failure rate of 0.2 per 100 women year.

**Conclusion:** Norplant is a highly effective method of contraception with a very low failure rate. Good counseling and adequate explanation of the side-effects is required prior to insertion in an attempt to avoid early removal. In our community, irregular cycle was the most common side-effect and the leading cause of early removal followed closely by weight gain.