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IUD INSERTION STUDY

FINAL REPORT

FAMILY OF THE FUTURE

(MAY 1982)

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I. INTRODUCTION

A. Objectives

In March 1982, prior to expansion in the Delta, Family of the Future conducted a study among Physicians who practice medicine in five Delta Governates.

The Objectives of the study were to

- determine the levels of Physicians experience and training;
- determine methods of contraception Physicians preferred to prescribe to patients;
- determine Physician's attitudes toward the IUD as a method of contraception;
- identify Physicians inserting IUDs;
- identify problems involved in inserting IUDs;
- determine complications involved in patients who have had IUDs inserted;
- determine information needs about IUDs; and
- explore options for IUD insertion training.

B. Methodology

Family of the Future staff visited a total of 100 Physicians who practice medicine in Zagazig, Fakoose, Bilbesse, Tanta, Mehalla, Zifta, Mansoura, Meetghmr, Fayoom, Semesta, Naser and Benisuif. Physicians were selected randomly from a list of doctors created from the records of FOFs Medical Promotion and Distributing Department.

When Physicians who were on the list could not be located, research staff identified another Physician working in the area to interview.

FOF Medical Representatives introduced the Physician to a member of FOF research staff who gave the Physician a Questionnaire and asked him/her to complete it while the FOF staff members waited.

Prior to the full scale study, FOF staff pretested the questionnaire among 11 Physicians in Garbeia and Sharkeia.

C. Composition of the Sample

Of the doctors surveyed, 77% were general practitioners, and 23% were obstetricians/gynecologists. The majority of all Physicians surveyed (83%) had received their MB.BCH Degree in the last 12 years. About one quarter of the Physicians (23%) had completed a higher degree than a MB.BCH; 9% of the entire sample held a Masters Degree in Obstetrics and Gynecology.

The Physicians were trained at many Egyptian Medical Schools. One fourth (26%) were educated at Cairo University, 18% went to Alexandria University, 13% to Tanta University, 10% to El Azzher University, and 9% to Ein Shams University.

II. SUMMARY OF FINDINGS

A. Responsibility for Advice about Contraceptive Methods

Ninety two percent of all Physicians surveyed said they believed doctors were responsible for giving advice about using contraceptive methods. Additionally, about four of ten doctors mentioned that advice about methods of contraception was the responsibility of the mass media (40%) or religious men (35%).

Ninety percent of all Physicians surveyed said they would personally give advice for using contraceptive methods. Six percent of the Physicians said it was not their responsibility to give advice about use of contraception methods.

B. Type of Contraceptives Used and Prescribed in Egypt

About three fourths (77%) of all Physicians said that the Oral Pill was the most widely used method of contraception used by women in Egypt; one fourth (25%) said the IUD was the most widely used method. (Percentage totals exceed 100% due to multiple responses.)

The Oral Pill and the IUD are the two contraceptives Physicians prescribe most frequently. About four of ten (38%) "usually" prescribe the Oral Pill while one fourth (24%) "usually" prescribe the IUD. A large number of Physicians did not answer this question.

Eighty percent of all Physicians said they currently insert IUDs in some of their patients. The Plastic IUD, Leppe's Loop, is inserted by nine of every ten doctors (90%) who said they insert IUDs, while the Copper IUD is inserted by half (51%) of all doctors inserting IUDs.

About four of ten Physicians surveyed (40%) said they believed women preferred female Physicians to male Physicians for inserting IUDs; four of ten Physicians (41%) said there was no difference between women's preferences between male and female doctors.

C. Advantages of IUDs

When asked what the advantages were of the IUD, Physicians most frequently replied it was effective in preventing pregnancy. The disadvantage most frequently mentioned was that it caused bleeding.

Physicians who insert Plastic IUDs said they preferred Plastic IUDs because they were available and inexpensive. Availability was the most frequently mentioned advantage of the Copper IUD. Other advantages of the Copper IUD were that Copper IUDs do not cause side effects and are effective in preventing pregnancy.

D. IUD Insertion Training

Sixty five percent of all doctors surveyed said they had the chance to see an IUD insertion while they were attending the University. And, about six of ten Physicians (58%) inserted an IUD for the first time during their training -- either as part of University study (26%) or during their one year training (32%). One fourth of Physicians surveyed (27%) inserted an IUD for the first time during personal practice.

E. Side Effects Caused by IUDs

Eighty percent of all Physicians surveyed said that less than 25% of their patients experienced side effects from IUDs. Severe bleeding was most frequently mentioned (65%) as the IUD side effect they most frequently see. Pelvic visceral inflammation and expulsion were mentioned as other problems caused by side effects.

Physicians said they handled severe bleeding by removing the IUD and using another method of contraception (40%), removing the IUD and giving treatment (35%) or by giving treatment only (12%). Pelvic visceral inflammation was handled by treatment (45%) or removal of IUD (15%). Fifty seven percent of doctors surveyed said they reinserted an IUD when expulsion occurred and a few Physicians (5%) treated expulsion by X-ray and reinsertion. Forty two percent of all doctors

surveyed said they sent women with perforated uteruses to the hospital.

The majority of Physicians (63%) said they left IUDs in women who became pregnant while using them.

F. Desire for IUD Insertion Training

The vast majority of all Physicians surveyed (93%) said they would like to participate in working meetings among doctors during which they discuss the theoretical aspects of contraception by IUDs and practice IUD insertion.

Other methods of family planning and their side effects, the latest information about contraceptives and the religious issues surrounding contraception were other subjects the doctors expressed a desire to discuss in the seminars.

The doctors who did not welcome participation in the seminars said they had specialized in gynecology (4%) or had no time (3%).

Most Physicians felt that the seminars should last one (27%) or two (23%) days and run approximately two hours. Any day except Friday seemed to be good days to hold the seminars. Saturday and Thursday were the most preferred days. About nine of ten (89%) preferred to hold the seminars in the Governate Capital in either the University Hospital (35%), Family Planning Center (29%) or Governate Hospital (24%).

III. CONCLUSIONS

The sample of Physicians surveyed appears to reflect a fairly accurate ratio of general practitioners to ob/gyns in the Governates where the research was conducted.

In general, Physicians believe it is their responsibility to provide advice to patients about methods of contraception although they also believe the mass media and religious men have a responsibility to provide this information.

The oral pill appears to be the method of contraception most commonly prescribed by doctors. IUDs are the second most commonly prescribed method. The vast majority of Physicians surveyed who insert IUDs are inserting Plastic IUDs, but half of them also insert Copper IUDs. The doctors believed the overall advantage of the IUD is that it is effective in preventing pregnancy. The availability of both Copper and Plastic IUDs was another advantage of IUDs mentioned by the doctors. Plastic IUDs were also preferred because of their low price.

Many Physicians appear to be inserting IUDs without formal training. At least one fourth of all Physicians surveyed inserted an IUD for the first time during their personal practice.

Although Physicians say that less than 25% of their patients experience side effects from IUDs, they do see women who have problems caused by their IUDs. Severe bleeding, pelvic visceral inflammation and expulsion are frequent problems.

Most doctors surveyed said they would like to attend seminars about contraception and IUD insertion. The religious issues surrounding family planning were also mentioned as a topic for inclusion in the seminars.

V. RECOMMENDATIONS

Family of the Future's expansion into the Delta is making the IUD more widely available than ever before. Although a Physician can read and follow instructions for inserting an IUD without special training, several factors indicate that more information is needed. These factors include:

- the ratio of general practitioners to gynecologists in the Delta;
- the number of Physicians who inserted an IUD for the first time during their personal practice; and
- the interest among Physicians surveyed in attending training seminars on IUD insertion and contraceptive methods in general.

A series of IUD insertion training sessions should be planned, conducted and evaluated in each of the Governates in the Delta. FOF should learn about the US Aid IUD insertion training program and any other IUD insertion training programs in Egypt which can be used to create an effective program.

Family of the Future's promotional information for its IUDs should contain IUD selling points and instructions for insertion. FOF is currently distributing Searle's promotional folders to Physicians about the Copper 7 IUD.

No promotional folder for the Copper T exists. It is recommended:

- A promotional folder for the Copper T be developed which FOF can give to doctors to encourage use of the Copper T. The folder should also give step by step information about IUD insertion.
- A promotional folder for the Copper 7 bearing the FOF logo developed which carries selling points and information about Copper 7 insertion.

V. LIMITATIONS OF THE STUDY

Although the questionnaire used in the study was pretested and revised based on the pretest, many physicians failed to complete every question. FOF research staff indicates that this was the result of Physicians being in a hurry to complete the questionnaire because they had patients waiting.

The majority of Physicians were randomly selected. However, some Physicians were selected for interviewing in a non random manner because the randomly selected Physicians could not be located due to death or a move out of the Governate. FOF staff found the method of identifying Physicians and interviewing for the study extremely time consuming. Consequently, it is recommended that the next research among Physicians be more closely coordinated with the Physicians Union so that the Union can use their credibility with Physicians to distribute questionnaires to Physicians and encourage their completion. This will facilitate a situation where the Physicians can complete the questionnaires in an unhurried atmosphere and return the questionnaires to the Union who can, in turn, return the questionnaires to FOF.

TABLE 1 (N=100)

<u>GOVERNATE</u>	<u>CITY</u>	<u>% PHYSICIANS</u>
Sharkeia	Zagazig	11%
	Fakoose	8%
	Bilbesse	6%
Gargbeia	Tanta	12%
	Mahalla	6%
	Zifta	4%
Dakahleia	Mansoura	8%
	Meetghamr	6%
Fayoom	Fayoom	20%
Benisweif	Semesta	7%
	Naser	4%
	Benisweif	8%

TABLE 2 (N=100)

<u>TYPE OF PRACTICE</u>	<u>% PHYSICIANS</u>
General Practitioner	77%
Obstetrician/Gynecologist	23%

TABLE 3 (N=100)

<u>DATE OF MB. BCH</u>	<u>% PHYSICIANS</u>
1947 - 1959	5%
1960 - 1963	-
1964 - 1969	6%
1970 - 1975	18%
1976 - 1979	54%
1980 - 1982	11%
NO ANSWER	6%

TABLE 4 (N=100)

<u>HIGHER DEGREES ACQUIRED</u>	<u>% PHYSICIANS</u>
Masters in OB/GYN	12%
Diploma	7%
Certificate from College of Medicine	6%
PhD	1%
NONE	74%

TABLE 5 (N=100)

<u>UNIVERSITY ATTENDED FOR MBBCF</u>	<u>% PHYSICIANS</u>
Cairo University	26%
Alexandria University	18%
Tanta University	13%
El Azher University	10%
Ein Shams University	9%
Zagazig University	5%
Mansoura University	2%
Assuit University	2%
NO ANSWER	15%

TABLE 6 (N=100)

<u>WHO IS RESPONSIBLE FOR GIVING ADVICE ABOUT USING CONTRACEPTIVE METHODS?</u>	<u>% PHYSICIANS</u>
Doctors	92%
Mass Media	40%
Religious Men	35%
Social Workers	12%
Nurses	8%
Ministry of Health	5%
Child Care Center	5%
Family Planning Center	4%
Village Clinic	3%
Midwives	2%

TABLE 7 (N=100)

<u>WOULD YOU PERSONALLY GIVE ADVICE FOR USING CONTRACEPTIVE METHODS?</u>	<u>% PHYSICIANS</u>
YES	90%
NO	6%
NO ANSWER	4%

TABLE 8 (N=100)

<u>WHAT IS THE MOST WIDELY USED METHOD OF CONTRACEPTION USED BY EGYPTIAN WOMEN?</u>	<u>% PHYSICIANS</u>
Oral Pill	77%
IUD	25%
Safety Period	1%

TABLE (9) (N=53)

Do you prescribe the following
contraceptives : usually , sometimes or rarely ?

Method	usually	sometimes	rarely
1. Oral Pill	72%	19%	9%
2. IUD	53%	45%	2%
3. Foaming Tablets	6%	57%	37%
4. Diaphog	30%	6%	64%
5. Condoms	26%	29%	45%
6. Safety period	43%	12%	45%

TABLE (10) (N=100)

Do you practice now IUD insertion ?

	% physicians
- Yes	80%
- No	17%
- No answer	3%

TABLE (11) (N=100)

What are the kinds of IUDs that you
practice inserting ?

	% physicians
- Plastic IUD	72%
- Copper IUD	41%
- Other	6%

TABLE 12

DO YOU THINK THAT WOMEN PREFER
MAN OR WOMAN PHYSICIAN FOR IUD
INSERTION OR IS THERE NO DIFFERENCE?

% PHYSICIANS

Man Physician	12%
Woman Physician	40%
No Difference	41%
No Answer	7%

TABLE 13 (N=95)

<u>WHAT ARE THE ADVANTAGES OF THE IUD?</u>	<u>N</u>	<u>% PHYSICIANS</u>
Effective in Preventing Pregnancy	30	32%
No Side Effects	20	21%
Lasts 2 Years	17	18%
Suits Egyptian Women	14	15%
Easy to Insert	12	13%
Doesn't Affect Breast Feeding	8	8%
Inexpensive	7	7%
Available	5	5%

TABLE 14 (N=54)

<u>WHAT ARE THE DISADVANTAGES OF THE IUD?</u>	<u>% PHYSICIANS</u>
Bleeding	69%
Pregnancy	24%
Perforation of Uterus	11%

TABLE 15 (N=72)

<u>WHY DO YOU INSERT THE PLASTIC IUD?</u>	<u>% PHYSICIANS</u>
Available	71%
Cheap	28%
Easy to Insert	13%
No Side Effects	4%
Safe for Women's Health	3%

TABLE 16 (N=41)

<u>WHY DO YOU INSERT THE COPPER IUD?</u>	<u>% PHYSICIANS</u>
Available	20%
No Side Effects	17%
Safe to Prevent Pregnancy	17%
Easy to Insert	10%
Safe for Women's Health	7%
Inexpensive	2%

TABLE 17 (N=100)

<u>DID YOU HAVE THE CHANCE TO SEE AN IUD INSERTION DURING YOUR UNIVERSITY YEARS?</u>	<u>% PHYSICIANS</u>
YES	65%
NO	34%
NO ANSWER	1%

TABLE 18 (N=100)

<u>WHEN DID YOU INSERT AN IUD FOR THE FIRST TIME?</u>	<u>% PHYSICIANS</u>
During University Study	26%
During the One Year Training	32%
During Personal Practice	27%
NO ANSWER	15%

TABLE 19 (N=100)

PERCENTAGE OF PATIENTS WHO EXPERIENCED
IUD's SIDE EFFECTS

% PHYSICIANS

Less than 25%	80%
25% to 50%	8%
50% to 75%	4%
More than 75%	-
No answer	8%

TABLE 20 (N=100)

PROBLEMS CAUSED BY IUD

FREQUENCY OF OCCURANCE

	<u>1</u>	<u>2</u>	<u>3</u>	<u>4</u>	<u>5</u>
Severe Bleeding	65%	12%	6%	2%	2%
Pelvic Visceral Inflammation	11%	27%	11%	4%	7%
Expulsion of IUD	6%	23%	18%	10%	5%
Perforation of Uterus	5%	3%	10%	10%	14%
Pregnancy	4%	15%	18%	14%	13%
Heavy Menses	5%	-	-	1%	-

TABLE 21 (N=100)

WOULD YOU PREFER SMALL WORKING MEETINGS
AMONG DOCTORS TO DISCUSS & PRACTICE
IUD INSERTION?

% PHYSICIANS

YES

93%

NO

7%

TABLE 22 (N=100)

WHAT OTHER SUBJECTS WOULD YOU LIKE
TO DISCUSS IN THE SEMINARS?

% PHYSICIANS

Other Methods of Family Planning

23%

Side Effects of Other Methods

32%

The Latest Information on Contraceptives

20%

Religious Issues Surrounding Contraception

25%

TABLE 23 (N=100)

DO YOU PREFER TO HOLD SUCH SEMINARS IN
CAIRO OR IN YOUR GOVERNATE CAPITAL?

% PHYSICIANS

Cairo	5%
Governate Capital	89%
No Answer	6%

TABLE 24 (N=100)

WHERE DO YOU PREFER HOLDING
SUCH SEMINARS?

% PHYSICIANS

Governate Hospital	24%
University Hospital	35%
Family Planning Center	29%
No difference	5%
No Answer	7%