# Improving access to self-adminstered injectable contraception



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### Introduction

After a GP practice declined to continue a Sayana Press® prescription started postnatally in the local Maternity Unit, primary care prescribing data was analysed to assess uptake in Ayrshire and Arran, and investigate whether self-administered injectable contraception was accessible to users via local general practices, consistent with the FSRH Hatfield vision Goals 3 & 6, and the Scottish Government Women's Health Plan priority of "a full range of contraceptive methods being available in a location of user choice."

Sayana Press® is a self-administered injectable contraception, given every 13 weeks. It is a highly reliable method of contraception. It was first marketed in the UK in 2015. As women self-administer it gives them autonomy and they need fewer clinic appointments, freeing up practice time.

Teaching women to use Sayana Press<sup>®</sup> is quick and simple. The sexual health service teaches women in one visit and gives them the rest of the year's supply to take home.

# Methodology

**Data analysis** 5 years of Primary care prescribing data was analysed using Microsoft Excel®.

**A short life working group** under the auspices of public health addressing access to long acting contraception discussed injectable contraception prescribing data

**Interventions** were created to try and improve access to Sayana Press®

Sayana press® was promoted to practices through general posts in the GP Teams channel and in Sexual Health updates circulated to all local GPs and Practice managers.

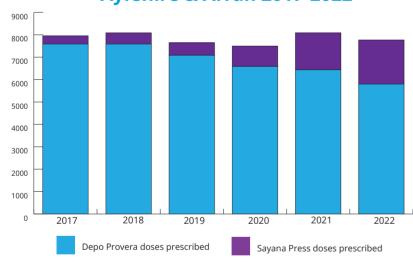
Practices who didn't prescribe Sayana Press®, plus the practice where there had been the issue with continuation in primary care were contacted (8 practices in total).

9 minute training video recorded by an SRH consultant uploaded onto the local GP CPD Microsoft Teams® channel.

# **Results**

The proportion of self injectable contraception prescribed in the board area has been slowly increasing.



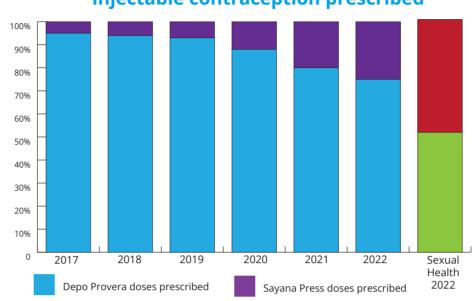


Prescribing of injectable contraception dropped only slightly during the 2020 COVID19 pandemic lockdowns but recovered rapidly. The proportion of self-administered injectable contraception increased during and after the pandemic.

This chart below shows prescribing rate (per 1000 women aged 15-44) at practices over 5 years. It shows persisting wide differences in prescribing rates between practices

This chart shows that the proportion of clinician administered to self-administered injectable contraception has increased but is far lower in primary care than in the specialist integrated sexual health service where the proportion of Depo Provera® to Sayana Press® prescribed is 51%:49%.

# Proportions of Clinican-administered to Self-administered injectable contraception prescribed

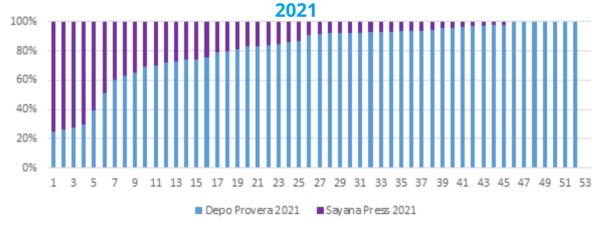


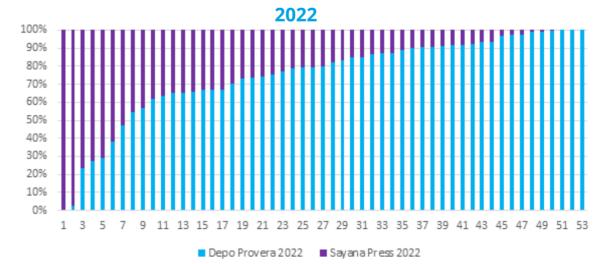
The proportion of practices providing Sayana Press® has increased, and the proportion of prescribing of Sayana Press® within practices has increased

	number of practices	number practices prescribing any injectable contraception	% prescribing Depo Provera®	number practices prescribing Sayana Press <sup>®</sup>	% practices prescribing Sayana Press <sup>®</sup>	Lowest and highest proportions (as %) of Sayana Press® to Depo Provera® prescribing by year in practices which prescribe it	Proportion of injectable presctibing which is sayanna press®
2017	55	55	100%	22	40.00%	0.3- 42	5%
2018	56	56	100%	35	62.50%	0.4-58	6%
2019	55	55	100%	32	58.18%	0.5-35	7%
2020	54	52	96.30%	38	70.37%	0.6-62	12%
2021	53	52	98.11%	47	88.68%	2.9-75	20%
2022	53	53	98.11%	50	94.34%	0.5-100	25%

The ratio of Depo Provera<sup>®</sup> to Sayana Press<sup>®</sup> prescribing shows wide variation between practices, but the proportion of Sayana Press<sup>®</sup> prescribed has increased.

# Proportion of Injectible contraception prescribing which is Sayana Press®/Depo Provera® in GP practices NHS Ayrshire and Arran





Outcome of contacting 8 identified practices in 2022

In discussion, practice staff expressed a need for training to support them to teach patients to use Sayana press<sup>®</sup>. A short video was made to support this.

Practices accessing training video				
In person training delivered to practice nursing team	2			
In person training delivered to practice nurse & GP	1			
Practice declined training, signposted to on-line resources	1			

The video has been viewed 44 times from Feb 2022 to Feb 2023.

## **Conclusions**

Women in Ayrshire and Arran can access selfadministered injectable contraception but data showed unexplained wide disparity in inter-practice prescribing rates of injectable contraception, which persisted over time suggesting some women face unnecessary barriers to access their choice of contraception

The pandemic increased use of self-administered injectable contraception, and this increase has been maintained

### After interventions:

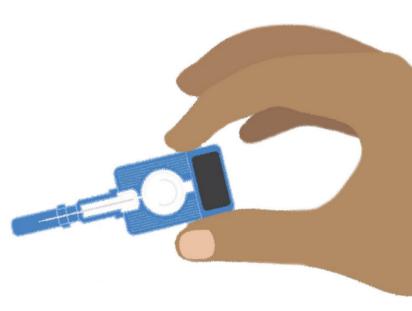
- the number of practices prescribing selfadministered injectable contraception rose from 89 to 94%,
- self-administered injectable contraception rose from 20 to 25% of all injectable contraception prescribed- an increase was seen in most practices.

There may still be a training need in some practices regarding discussion about injectable contraceptive options and teaching self-administration of Sayana Press®.

# References

Scottish Government Women's Health Plan Scottish Government 2021 <a href="https://www.gov.scot/publications/womens-health-plan">https://www.gov.scot/publications/womens-health-plan</a>

The FSRH Hatfield Vision, Faculty of Sexual And Reproductive health 2023 <a href="https://www.fsrh.org/news-and-advocacy/the-fsrh-hatfield-vision">https://www.fsrh.org/news-and-advocacy/the-fsrh-hatfield-vision</a>



# **Injectable Contraception Rates at practices 2017-2022**

