STATISTICAL EVALUATION OF EFFECTIVENESS AND ACCEPTABILITY OF IUCD PROGRAMME

by

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To control population, clinical trials are going on an extensive scale to find a suitable IUCD, that could be accepted for preventing pregnancy and with little side effects. Since, Postgraduate Institute of Medical Education and Research, Chandigarh has been accepted as contraceptive testing centre, there is a need for a procedure to evaluate the IUCD programme. The analysis described here is based on multiple decrement life table technique and confined to statistical evaluation of data on the first segment use of copper T, women who had first insertions from 1st November, 1971 to 31st December, 1973. Net cumulative rates for each type of termination, total cumulative termination rate and its complement cumulative continuation rate are presented in this paper.

Introduction

The Indian Council of Medical Research conducted IUCD studies in 50 selected clinics between 1962 to 1964 and after

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analysing the data, recommended in early 1965 that IUCD is a safe and effective contraceptive and could be made available in India through all medical and health centres.

The present paper relates to the study of 503 women who accepted copper T as contraceptive from 1st November, 1971 to 31st December, 1973 at the Postgraduate Institute of Medical Education and Research, Chandigarh. Furthermore it is confined to the analysis of data on first segment use, that is, the interval from the first insertion of an IUCD to the first termination or from the first insertion to cut off data i.e. 31st December, 1973, whichever is earlier.

Material and Method

All women who got IUCD inserted were followed. First, she was asked to come for check up after a month, then after every three months for one year. Thereafter, she came after every six months. Thus from November, 1973 to December, 1973, 503 women who got IUCD inserted were followed, and their experience with IUCD on first segment use, was analysed. In case a woman did not come at regular intervals, a home visit was made to ascertain her.

To assess the effectiveness and accept-

ability of copper T, the technique of multiple decrement life table as recommended by Potter (1969), Tietze (1967, 1968, 1973) is used to generate net cumulative rates for each type of termination for the followed up period after first insertion. The complement, cumulative continuation rate per hundred women for 12 and 20 months after first insertion, has also been presented. Though we had observation for 26 months, the total termination rate was not worked beyond 20 months as the woman months of use fell sharply below 100 there after.

Results

First insertions, terminations and continuing users of copper T during 26 months period covered by the study—

		TABLE I	
First	Incertions,	Terminations Continuing	Users
		of Copper T	

	Number
First insertions	503
Total terminations	146
Continuing users	357
Woman-months of use	5936
TABLE II	
Terminations By Type During 26 Covered By the Stud	
Terminations by Type	Number
Expulsions	27
Pregnancy	1
Sign of infection	3
Bleeding	52
Backache/abdominal pain	9
Wanted another method	3
Others	
O WICI D	35
Lost to follow up	35 16

Cumulative termination rates per hundred women using copper T at 12 and 20 months after insertion—

TABLE III Cumulative Terminations

Cumanume		
Type of termination	12 months	20 months
Pregnancy	.3	.3
Expulsion	4.5	6.6
Removals		
Bleeding	9.0	13.7
Backache/abdominal	pain 1.6	2.4
Sign of infection	.8	.8
Others	5.6	12.4
Cumulative	22.2	36.2
Cumulative continuat	tion 77.8	63.8

Discussion

The experience of users of copper T at our Centre, 77.8 continuation rate for first segment use at 12 months is similar to that in study at Bangkok by Wright with 77.3 continuation rate for the same period at 12 months. A study conducted in U.S.A. by Lewit has reported 76.4 continuation rate. Another study by Tatum reports 75.9 continuation rate at 12 months. However in Sweden Liedholm Lorend reports continuation rate as 85.7 and from Finland Timonen reports still higher continuation rate 89.2 at 12 months. These continuation rates show that copper T is a good alternative contraceptive. The pregnancy and expulsion rates are very low to prove its effectiveness.

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