

When young women use hormonal contraceptives, condom use drops, study finds

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Young women who start using hormonal contraceptives for birth control often stop using condoms, but a new study in the *Journal of Adolescent Health* finds that if they later discontinue using hormonal contraceptives, they tend not to resume using condoms. This leaves them open to both unintended pregnancy and sexually transmitted infections (STIs).

The prospective year-long study included 1,194 sexually active women aged 15 to 24 visiting [Planned Parenthood](#) clinics and who were starting on contraceptive pills, patches, injections, or vaginal rings and not planning a pregnancy within the year. The researchers collected data on the [young women](#)'s beliefs toward condom use and their knowledge of

their partners' beliefs toward condoms.

At the beginning of the study, 36 percent of the young women used condoms consistently. Condom use dropped to 27 percent by 3 months later. Over the year, some women discontinued using hormonal contraception. More than half did not resume using condoms after they stopped using other contraception, according to Rachel Goldstein, M.D., of Stanford University School of Medicine and lead author of the study.

Using condoms together with other contraception (dual method use) decreases both the risk of pregnancy and sexually transmitted infections. The single largest predictor of using condoms and other contraception is the attitude of the woman's partner toward condoms, Goldstein noted. Women who said their partner thought condoms were "very important" or did not know how their partners felt about condom use were more likely to be dual method users than women who said their partner thought condoms were "not at all important".

"It appears that her partner's feelings may be more important than her perceived risk of a sexually transmitted infection or her own beliefs about dual method use," said Goldstein. This finding underscores the fact that a woman's decisions about contraception and preventing STIs may depend on factors over which she has little control. "Although a woman feels like she is at risk for an STI, she may not be able to advocate for herself and successfully negotiate [condom use](#) with her partner," Goldstein explained. Because a lapse in [hormonal contraceptives](#) may lead to [unintended pregnancy](#), it may be better practice to advise young women to use longer-acting reversible contraceptives, such as implants or IUDs, and about the importance of [condoms](#) in preventing STIs, she recommended.

The study did not look at the use of hormonal implants or IUDs, also noted Mark Nichols, M.D., professor of obstetrics and gynecology at

Oregon Health and Science University in Portland. IUDs, which protect against pregnancy for several years, are an increasingly popular and highly recommended choice for women who are starting contraception now. Furthermore, although the study concluded that more counseling was needed, it did not describe the kind of counseling the women received either when they started hormonal [contraception](#) or at later clinic visits, he added.

More information: Goldstein RL, Upadhyay U, Raine TR: With pills, patches, rings, and shots: Who still uses condoms? A longitudinal cohort study. *J Adol Health* 2012; In Press.

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