

Why are long-acting forms of contraception like IUDs becoming more popular?

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Long-acting, reversible contraceptives, such as intrauterine devices (IUDs), have been growing in popularity. Credit: University of California, San Francisco

On a campus crowded by scientists and physicians, Elizabeth Watkins, Ph.D., is a bit of an anomaly as a historian.

Her recent work on contraceptives, estrogen replacement therapy, and pharmaceutical companies is an example of how culture and science are intimately linked.



"I'm really interested in how people outside the scientific and medical communities get their information about science," she said in a recent interview for Carry the One Radio. Watkins is professor of history of health sciences at UC San Francisco as well as dean of the Graduate Division and vice chancellor of Student Academic Affairs.

In particular, Watkins wants to understand why there has been a recent uptick in the use of long-acting forms of contraception.

Long-acting reversible contraceptives, such as intrauterine devices (IUDs) and contraceptive implants, provide highly effective birth control for between three and 10 years. Though they are far from new on the birth control scene – IUDs have been around since the early 1900s – they're suddenly getting a lot more popular. In the early 1990s, 1.5 percent of women used an IUD or an implant; that percentage jumped to 7.2 percent by 2013, a nearly five-fold increase.

According to the U.S. Centers for Disease Control and Prevention, the rise in popularity is due in part to a new demographic of IUD users: young women with no children.

Historically, long-acting forms of birth control have been targeted to two groups of women: low-income women outside the U.S. and mid-to-upper-class mothers who did not want more children.

"There is a really interesting sort of two-prong type of marketing and conceptualization of IUDs," said Watkins.

Because there were concerns that IUDs could negatively impact fertility, they were not often recommended for young women who had never had children. The newest versions of IUDs are much safer, and thanks to the addition of either copper or the hormone levonorgestrel, much more effective than the IUDs of the 1970s and '80s.



Yet increases in safety and effectiveness alone can't explain the increased popularity of IUDs, as the uptick lagged about a decade behind the arrival of the latest IUD on the market.

Watkins is exploring three factors that may better explain the trend. The first is how physicians' opinions change and how this affects what they recommend to their patients.

"What is it that makes a professional society change its opinion, and then how do they go about changing the opinions and the practices of other physicians in their wider professional community?" said Watkins.

The second focus is how women get their information about birth control, especially in the era of social media and widespread access to the internet. Watkins recently found 1,300 user reviews for an IUD called Skyla on drugs.com. Other people use that information to make decisions, which is "outside the traditional scope of when women went to physicians and asked for birth control and received it," said Watkins. "Women are clearly informing themselves."

The third piece of the puzzle is economics. In 2011, the contraceptive mandate of the Affordable Care Act required insurance companies to provide contraceptives to patients without a copay, dramatically reducing the out-of-pocket costs for an IUD or implant for many women. "Women may be taking this opportunity to have an IUD or an implant inserted when they might not have had the cash up front prior to the ACA," said Watkins.

While scientific factors like effectiveness and safety are crucial in getting a <u>birth control</u> product to market, factors like the <u>women</u>'s health movement, physician's exposure to different technologies, and economic considerations can shape which products are popular and which fail to catch on. It's an example of why cultural context is essential to



understanding a scientific phenomenon, said Watkins.

"Science doesn't operate in a vacuum. Science is a social activity. Science has social consequences. People who do science are humans."

Provided by University of California, San Francisco

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