

Decision aid helps patients make informed decisions about sterilization

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Researchers at the University of Pittsburgh have developed a simple, web-based decision aid called My Decision/Mi Decisión that helps empower pregnant individuals who are considering tubal sterilization to

make informed decisions about their reproductive health, according to a new study published in *JAMA Network Open*.

With significant misunderstandings surrounding sterilization, the Pitt researchers can now offer comprehensive, engaging and accessible information to help support individuals as they make the best contraceptive decisions for themselves.

"When patients are making decisions about their health and fertility, we want to make certain they make them based on facts," says Sonya Borrero, M.D., M.S., professor of medicine and founding director of the Center for Innovative Research on Gender Health Equity (CONVERGE) at the University of Pittsburgh School of Medicine. "From there, they can take the step most aligned with their preferences and values."

Borrero and her team developed My Decision/Mi Decisión, which is available in English and Spanish, with input from people with lived experience, bioethicists and [reproductive health](#) advocates. The decision aid includes written, audio and video information about tubal sterilization, an interactive table comparing contraceptive options, values-clarifying exercises and knowledge checks.

Tubal sterilization, commonly referred to as getting one's "tubes tied," is a common and permanent form of birth control that involves removing or blocking the [fallopian tubes](#) with heat, clamps or rings.

Among Black, brown, and low-income individuals in particular, there is a fraught history with sterilization procedures, including both coercive sterilization as well as significant barriers to a desired procedure. Borrero aims to shift the narrative by offering each individual patient the knowledge they need to make the best decision for themselves.

To evaluate the impact of My Decision/Mi Decisión on pregnant

individuals who were contemplating tubal sterilization after delivery, the researchers conducted a [randomized clinical trial](#) with 350 English- or Spanish-speaking pregnant individuals with Medicaid insurance.

Half of participants used the decision aid and half did not. They focused on people with Medicaid insurance given that sterilization abuses and barriers have predominantly impacted people living on lower incomes.

Compared to the [control group](#), participants who used My Decision/Mi Decisión had significantly higher knowledge of tubal sterilization. They also reported feeling less uncertainty about their decision to undergo the procedure.

The greatest knowledge differences between the two groups were related to the permanence of tubal sterilization. Of those who used My Decision/Mi Decisión, 90% understood that tubal [sterilization](#) is not easily reversible, compared with 40% who did not use the tool. And 87% of participants who used the aid understood that fallopian tubes do not spontaneously "come untied," compared with 39% of those who received standard care alone.

"Following the elimination of federal abortion protections, there has been increased interest in permanent contraception," said Borrero. "Our decision aid provides access to the quality information people need to make important decisions about their reproductive health."

More information: A Decision Aid to Support Tubal Sterilization Decision-Making Among Pregnant Women, *JAMA Network Open* (2024). [DOI: 10.1001/jamanetworkopen.2024.2215](https://doi.org/10.1001/jamanetworkopen.2024.2215)

Provided by University of Pittsburgh

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