



Review article

What some women want? On-demand oral contraception ☆☆☆, ★

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Abstract

Objective: To summarize evidence regarding current demand for on-demand oral contraception.**Study design:** We used Medline and collegial contacts to find published and unpublished studies conducted or reported in the past 15 years with information assessing women's interest in using any oral drug preparation, including emergency contraceptive pills, in a coitus-dependent manner either repeatedly or as a primary or planned pregnancy prevention method.**Results:** We found 19 studies with relevant information. The studies were conducted in 16 countries. Eight studies provided data on women's attitudes regarding a coitus-dependent oral contraceptive; all suggested substantial interest in using it. Nine studies assessed actual use of oral tablets on demand for primary contraception. In these studies, 9–97% of women in the analysis populations reported using the pills on demand as main method, although frequency and consistency of use varied. Reported reasons for interest in or use of this contraceptive approach included convenience, ease of remembering, ability to conceal use, lack of coital interruption, and infrequent sexual activity. Three studies were clinical trials of investigational on-demand oral contraceptives which reported Pearl indices ranging from 6.8 to 53 pregnancies per 100 woman–years.**Conclusion:** Data from a variety of settings suggest that demand for an on-demand oral contraceptive may be widespread. The effectiveness of this potential method is not established, however. Considering the seriousness of the unmet need for contraception, further development research into the public health benefits and risks of such a method would be worthwhile.**Implications:** Demand for an on-demand oral contraceptive may be widespread. Efforts should be made to further explore the possibility of developing such a method.

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1. Introduction

Decades ago, an oral contraceptive product containing 4 or 10 tablets of levonorgestrel 0.75 mg was commercially marketed in several countries in Eastern Europe and Asia.

This product differed from current oral contraceptives in that women were instructed to take the pills only “on demand” — that is, only when they had sex, shortly before and/or after the act — rather than daily. Ten clinical trials of the regimen that together included more than 2600 women who used the pills over a period of 1–16 months found a combined pregnancy rate of 5.1 pregnancies per 100 woman–years, approximately comparable to the rates observed among typical users of other coitus-dependent contraceptives such as condoms and diaphragms [1]. No serious adverse effects occurred in the trials, although bleeding irregularities, nausea, and other symptoms associated with progestin-based contraceptives were not uncommon. Despite the side effects, participants in the trials generally liked the method and used it continuously for more than 6 months on average. The product reportedly sold quite well for at least 10 years [2].

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Nevertheless, marketing of this product was discontinued during the 1990s, in part because of concerns about overuse [2] and also because of the conviction that women should use more effective methods with fewer side effects [3]. The manufacturer introduced a new product that contained only two tablets per package and that was explicitly indicated for emergency treatment after unplanned contraceptive mishaps or failure to use contraception during sex. Levonorgestrel-based emergency contraceptive pills (ECPs) are now widely available worldwide.

However, recent studies suggest that the original concept of on-demand oral contraception as an ongoing family planning approach continues to have appeal, at least to some women in some settings. This information is of interest to researchers working on the development of new contraceptive methods and may also be relevant to clinicians and program managers needing to advise women about frequent use of ECPs. In this paper, we summarize evidence regarding current demand for on-demand (also called “pericoital”) oral contraception.

2. Materials and methods

We aimed to find published and unpublished studies conducted or reported in the past 15 years (since 1998) with information assessing women’s interest in using any oral drug preparation, including ECPs, in a coitus-dependent manner either repeatedly or as a primary or planned pregnancy prevention method. To locate these reports, we performed multiple PubMed searches including the following terms either alone or in various combinations: *on-demand*, *pericoital*, *postcoital*, *visiting pill*, *repeat*, *contraception*, *oral*, *emergency contraception*, *levonorgestrel* and *mifepristone*. We supplemented these searches by reviewing reference lists of the papers identified in primary searches and by consulting with experts working on issues related to emergency contraception. We used our judgment to determine whether each report included pertinent information.

3. Results

We found 19 studies that met the above criteria. All of these were either previously known to us through our work on emergency contraception over many years or were identified through contacts with colleagues. Despite our best creative efforts, our Medline search strategies did not find additional information about this method, which is yet nonexistent and has no standard name. The studies were conducted in a total of 16 countries. We grouped the 19 studies into three categories.

3.1. Studies that assessed women’s attitudes about an on-demand oral contraceptive

Eight of the studies provided direct data on women’s attitudes about routine coitus-dependent oral contraceptive

use (Table 1). In three of these studies, researchers described a hypothetical on-demand oral contraceptive pill to convenience samples of subjects drawn from clinics, schools and the community, and they ascertained subjects’ thoughts about it. Two of the studies were surveys conducted in the United States [4] and Kenya and Nigeria [5], and the third was a set of focus groups and in-depth interviews with women and men in Uganda and India [6]. The descriptions of the imaginary pill included basic instructions for on-demand use. The United States and Uganda/India studies provided further detail: that the pill would be intermediate in efficacy between condoms and daily oral contraceptive pills, that it probably would cause irregular bleeding and that it would not protect against sexually transmitted infections.

All 3 studies found favorable reactions to the on-demand pill. In the United States, Kenya and Nigeria, 58%, 48% and 40% of women, respectively, said that they were interested in using it [4,7]. In Kenya and Nigeria, 39% and 37%, respectively, indicated that they were likely to adopt the pill as their primary contraceptive method, and among women who had ever previously used ECPs, these figures were even higher: 66% and 79%, respectively. Interest was associated with various subject characteristics: Black race, difficulty obtaining prescription contraceptives, recent unprotected sex, recent abortion in the United States, and higher education, prior ECP use and prior use of other short-acting family planning methods in Kenya and Nigeria. In each of these African countries, more than 20% of women who had never used modern contraceptives said that they would be likely to adopt the imaginary pill as a main method (D. Chin-Quee, personal communication). The study in Uganda and India did not provide quantitative results but reported that women were generally enthusiastic, especially younger unmarried women [6].

Across all three studies, perceived advantages of the hypothetical method included ease of remembering, applicability for women who have infrequent sex, requirement to use only when needed, potential for use before or after sex and female control. Women in Uganda also highlighted the possibility of taking the pill without their partners’ knowledge. In the United States, India and Uganda, some respondents cited superior efficacy to condoms. Some women in each study noted concerns about the method, including insufficient efficacy, fear of forgetting and side effects. Mechanism of action was not specifically cited as an issue by women in any of the studies.

A fourth study asked abortion clients at six clinics in the United States about the importance of 18 features of contraceptives, such as effectiveness, side effects, ease of use, control and effect on enjoyment of sex [8]. The authors concluded that an on-demand oral pill would have at least 64% of the features considered by the women to be extremely important. This method would thus have more highly desirable features than almost any other currently available method, including daily oral contraceptives (60%), intrauterine devices (56%), injectables and implants (51%)

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