

Postpartum Contraceptive Concordance in the COVID Era



Katie Plummer, MS; Felix Rubio MD, MBA; Nancy Fang MD, MS

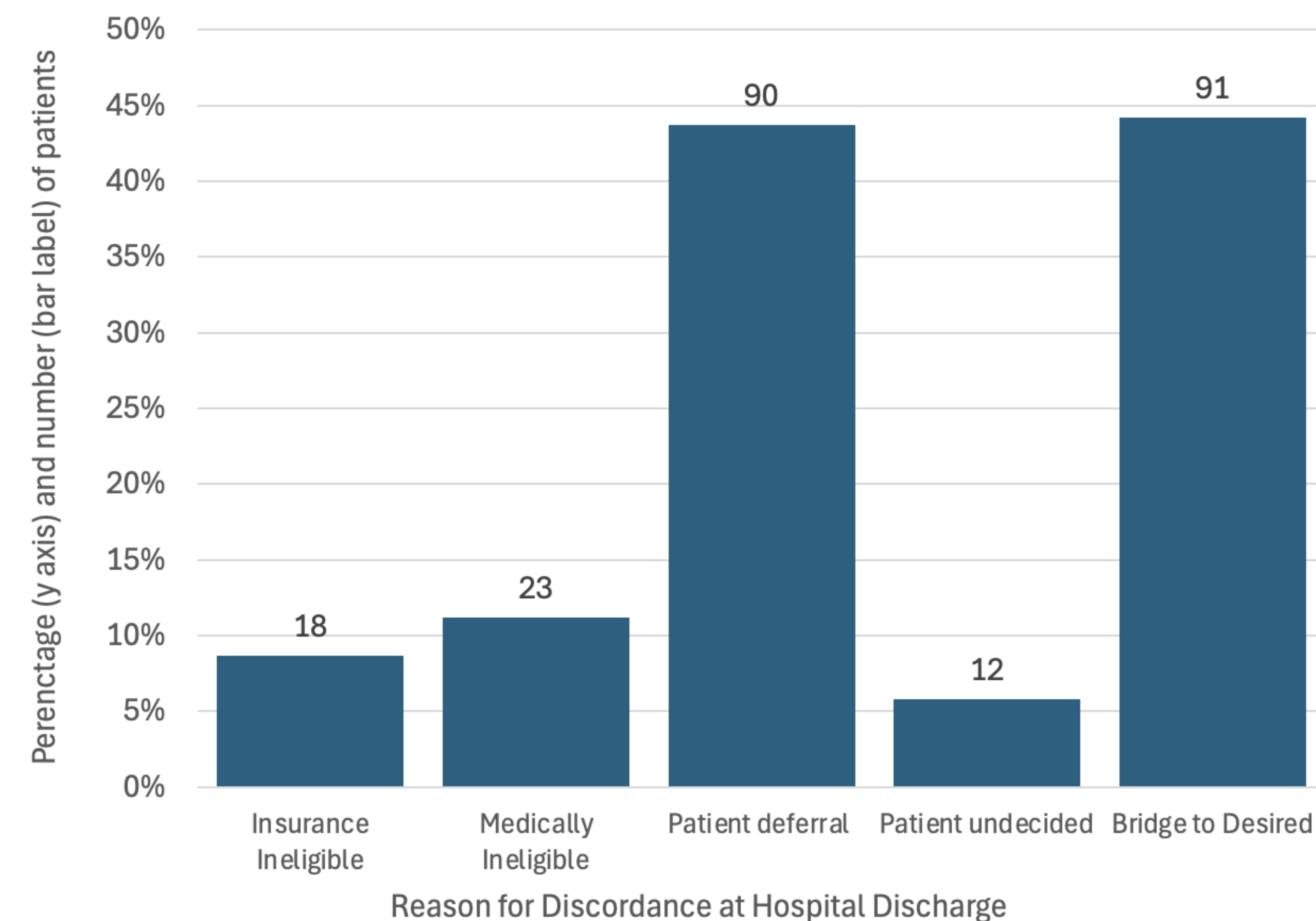
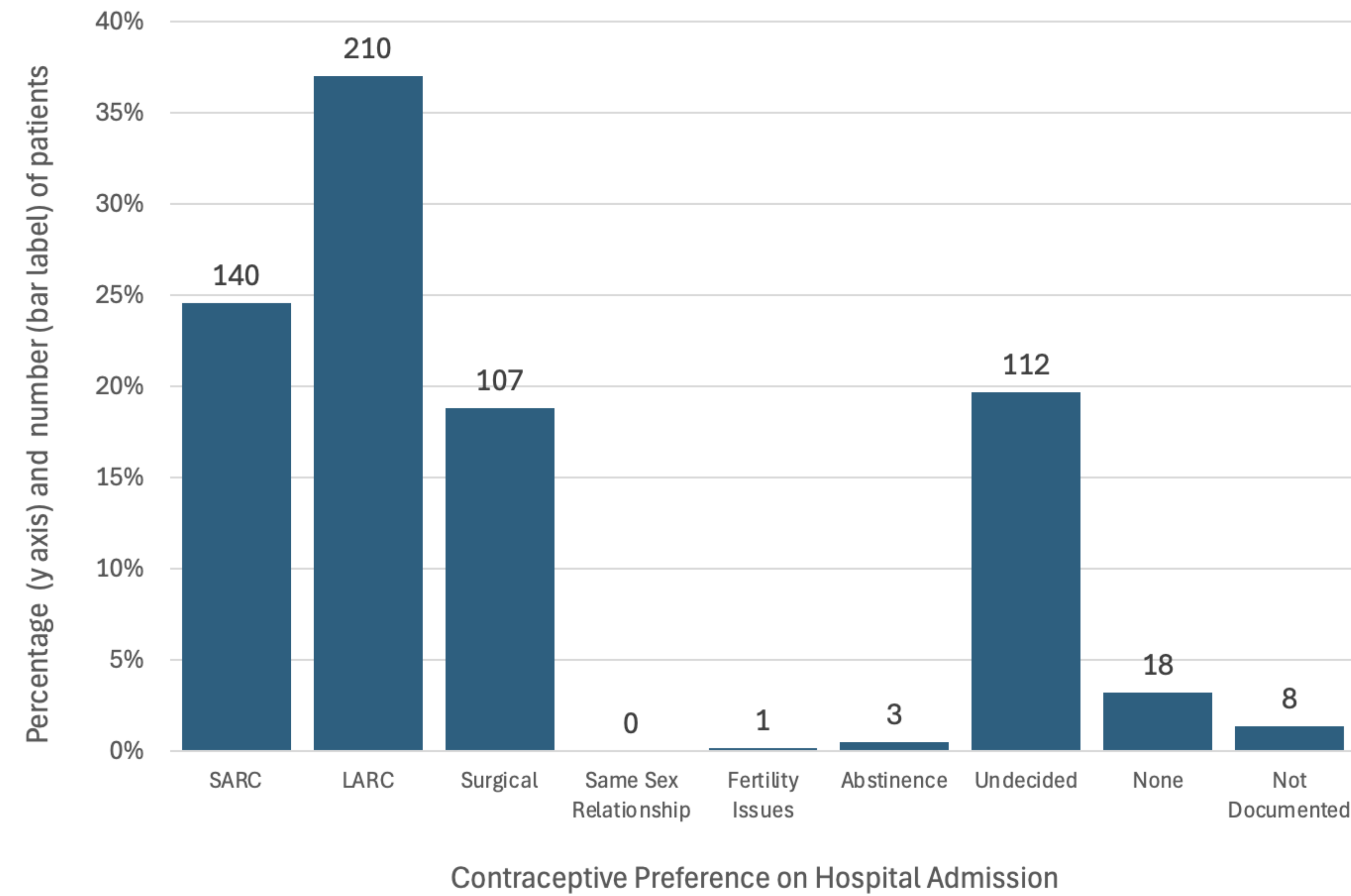
Introduction

- Postpartum contraception is key for prevention of rapid repeat pregnancies
- Contraceptive concordance occurs when a patient receives their preferred contraceptive method
- Prior research compared postpartum contraceptive concordance in patients with Emergency vs. Full-Scope Medicaid and found higher levels of concordance at hospital discharge for patients with Full-Scope Medicaid ($p < 0.01$)¹
- Little is currently known about the COVID-19 pandemic's impact on postpartum contraceptive concordance

Methods

- Retrospective examination of contraceptive concordance at discharge from the postpartum unit for patients with Medicaid who delivered at Denver Health April-October 2020
- Exclusion criteria included: Intrauterine fetal demise, delivery at <24 weeks gestation, cesarean hysterectomy, outborn infants
- Deemed exempt by COMIRB, #22-1772

Results



Conclusions

- Contraceptive concordance was met for the majority (63%) of the 569 patients in this study at hospital discharge
- The most common reasons for contraceptive discordance were bridge to desired method and patient deferral of initiation
- 29% of patients changed contraceptive preference between admission to labor and delivery and discharge
- 13.9% (79 patients) had a rapid repeat pregnancy within 18 months
- Further research will examine contributing factors to postpartum contraceptive discordance and to rapid repeat pregnancies

Selected Reference

1. Wilson CH, Lazowitz A, Hyer J, Guahi M. Concordance of desired and administered postpartum contraceptives among emergency and full-scope Medicaid patients. *Womens Health Issues*. 2022;32(4):343-351. doi:10.1016/j.whi.2022.01.008

Disclosures

No conflicts of interest to report