

Retrospective Study of Norplant (R) Acceptors on a Districts of Nepal

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A retrospective analysis of Norplant (R) acceptors was done in Lalitpur district. The main objective of this study was to determine the status of Norplant (R) acceptors. In this study the information of complications, age, party, education and causes of removal were detected.

INTRODUCTION

Norplant (R) is an effective, long lasting, reversible new contraceptive method. Six thin, flexible capsules, made up of soft rubber like material, are inserted in a minor surgical procedure just under the skin of a woman's upper arm. The capsules contain a synthetic hormone, levonorgestrel. A low dose of hormone is continuously released into the woman's body. When Norplant (R) is inserted it becomes effective within a few hours of insertion and it protects the women for five years from becoming pregnant. After removal of the Norplant (R) the woman will be just as likely to become pregnant as woman who never used Norplant (R).

BACKGROUND

His Majesty's Government of Nepal aims to reduce the total fertility rate of it's population to 4 by the year 2000 A.D. from the prevailing total fertility rate of 5.8. A great emphasis was placed by Ministry of Health on sterilization in the past 23 years. So 87% of the

total family planning service coverage was by sterilization where as only 13% coverage was by temporary contraceptives. Now the service focus has shifted to more balanced contraceptive mix with due focus on spacing method as an important strategy to reduce population growth through birth spacing by younger couples. Ministry of Health has also been emphasizing temporary methods for the last few years.

NORPLANT (R) PROGRAM IN NEPAL

A clinical trial study of 307 cases of Norplant (R) was done in 1985 - 1989 in Lalitpur district which shows that the woman who had Norplant (R) insertion reported irregular periods, other side effects were negligible and the removal rate was less than 10%.

Following this study, Norplant (R) was introduced in the national Family Planning Program in 1987. Doctors and paramedicals were trained in insertion and removal techniques. Now the Norplant (R) is provided

in all 15 Institutionalized districts, other 25 districts and some Health Posts as well.

SOME FACTS ABOUT LALITPUR DISTRICT

Area: 385 sq. km.
Population: 258474 (1991)
Male: 1,31,885 (51%)
Female: 1,26,589 (49%)
VDC: 41, Municipality: 1
Under 1 year population: 9563
15 to 44 population: 51, 695
Family size: 5.6
Population growth rate: 2.61
Population density: 671/sq. km.
Household: 39375
No. of Families: 45,997
Urban Population: 117203 (45.35%)

Rural Population: 1,41,271 (54.65%)
Hospitals: 4, Health Posts: 12
Nursing Home: 2
Non Government Health Institutions: 8
Registered NGO's: 188
Primary Secondary Schools: 30
DPHO Staff: 167
CBR: 38/Thousand
CDR: 12/Thousand.

METHODS

Data of 1360 Norplant (R) clients from Lalitpur district from 1st March 1989 to 30th June 1992 have been studied and analysed.

RESULTS

Table 1

Religion & Caste

Newar	Brahmin & Chhetri	Magar & Gurung	Muslim	Sai, Sunar	Not Recorded
603	460	186	2	76	33
44.3%	33.8%	13.7%	0.1%	5.6%	2.4%

Norplant (R) acceptance is highest among the Newar Community. 45% of total acceptors belong to this Community. Norplant (R) are inserted only in few clients in Muslim, Sai and Sunar Communities.

Table 2

Age in Yrs

15-19	20-24	25-29	30-34	35-39	40-45
106	620	352	162	92	28
7.8%	45.6%	25.9%	11.9%	6.8%	2.1%

The acceptance rate is highest among the 20-29 age group. About 70% of total acceptors are in this age group; more than 20% of acceptors are in 30-45 yrs group. There is also gradual decline of acceptance in higher age group. Also significant percentage (8%) of woman in age group 15-19 have accepted Norplant (R).

Table 3

Parity

One	Two	Three	Four	Five	Over Five
365	581	274	94	36	10
26.8%	42.7%	20.1%	6.9%	2.6%	0.7%

About 70% of women in reproductive age, the acceptance of Norplant (R) is highest among second parity.

Table 4

Education

Literate	Illiterate	Unkonwn
431	674	255
31.7%	49.6%	18.7%

The Norplant (R) acceptance is higher among the illiterate group. About 50% illiterate women have used this method.

Table 1

Religion & Caste

Depo	IUD	Norplant (R)	Pills	Condom	Non Users	Not Recorded
34	14	90	52	5	672	493
2.5%	1.0%	6.6%	3.8%	0.4%	49.4%	36.3%

Norplant (R) is the choice of method to start with among non users of contraceptives. Among the contraceptive users who switched to Norplant (R) are Pills users were more and about 3.8. Also the reinsertion for Norplant (R) recorded was about 7%.

Table 6

Table VI - Removal and its causes

Causes of Removal are:	110	8.1%
- Bleeding P/v on & off	57	4.2%
- Desire for pregnancy	5	0.4%
- Husbands did vasectomy	4	0.3%
- Husband went out of country	4	0.3%
- Infection	1	.07%
- Wanted permanent sterilization	3	0.2%
- Headache	3	0.2%
- Tuberculosis	3	0.2%
- Dizziness	3	0.2%
- Expulsion	2	0.1%
- Chest pain	2	0.1%
- Loss of appetite	2	0.1%
- Amenorrhoea	2	0.1%
- Wt. gain	2	0.07%
- Acne	1	"
- Pregnancy before insertion	1	"
- Gallstone	1	"
- Jaundice	1	"
- Pain all over body	1	"
- Failure	1	"
- Pain in Norplant (R) site	1	"
- Afraid of cancer	1	"

Out of 1360 acceptors, the removals are 209 in number (15%), mostly because of irregular bleeding P/V which is 8.1%, 4.2% wanted removal because of desire for another baby. Other side effects are minimal.

CONCLUSION

The Norplant (R) acceptance is highest among Newar Community, Illiterate, 2nd parity and in 20-29 yrs age group. It is the choice of method to start with contraception among non users.

RECOMMENDATIONS/POLICY IMPLICATIONS

This study shows that lower caste and Muslims community have low acceptance. They should be persuaded with appropriate IEC information to accept this method.

In Nepal, where child birth soon after marriage is a normal having desired number of

children. Now it is encouraging that women have started the Norplant (R) use after 1st parity. More than 70% of women under 30 yrs clearly reflects that program should be expanded in this large group.

The literacy rate among Nepalese women is very low, only about 18%. However, the acceptance of Norplant (R) among illiterate women shows that this method can be popular among the mass of illiterate women too.

The popularity of Norplant (R) acceptance among the lower parity group shows that Nepalese women intend to space the child birth for longer period which will reduce the Maternal and Infant Mortality.

Norplant (R) seems to cause least side effects among the clinical contraceptives. Due to its long term effectiveness, the health care providers should ensure proper counselling to clients so that necessary and appropriate measures for treatment of its complications and

decisions for its removal could be taken by them.

The important side effect of Norplant (R) is irregular menstrual patterns. It will be important to have a small qualitative study through focus group techniques to have the

detailed knowledge how menstrual irregularities is perceived and to determine the condition for its removal comparing with other hormonal contraceptives like pills and Depo-provera.

REFERENCES

1. The Population Council, "Norplant (R), a summary of scientific Data" New York, 1990.
2. Chhetri M.K., Lama H, "Norplant (R): An Introduction and Experience in Nepal," 1987.