## ACCEPTABILITY OF THE COPPER INTRAUTERINE DEVICE AS A FORM OF EMERGENCY CONTRACEPTION IN AUSTRALIA

Robertson S<sup>1</sup>, Dorney E<sup>2</sup>, Botfield JR<sup>1</sup>, Estoesta J<sup>1</sup>, Bateson D<sup>1</sup>, McGeechan K<sup>1,2</sup>

**Background**: Access to postcoital emergency contraception (EC) is important for the prevention of unintended pregnancy. The copper intrauterine device (Cu-IUD) is the most effective method and the only one that provides ongoing long-term contraception; however, the Cu-IUD remains largely underutilised as EC.

**Methods**: A cross sectional convenience study was undertaken in 2018 to explore the knowledge and attitudes of clients and clinicians from Family Planning NSW (FPNSW) regarding the Cu-IUD as EC via an online survey. Clients identifying as female or as a transgender man, and engaging in heterosexual intercourse, were eligible. Outcome measures for clients included previous experience with and knowledge of EC overall and perceived barriers and enablers to the use of the Cu-IUD as EC, and for clinicians included current practices regarding EC provision and perceived barriers and enablers to delivery of the Cu-IUD for this.

**Results**: In total, 509 clients (478 complete responses) were surveyed, with 63% previously using EC. Only 1.6% had used the Cu-IUD as EC, and only 12.2% knew that the Cu-IUD was a form of EC. If provided with information and the option of this method, 46% would consider the Cu-IUD as EC. However, 40% viewed cost, the risk of heavier menstrual bleeding or procedural risks as barriers. A separate survey was completed by 58 FPNSW clinicians; 55% reported discussing the Cu-IUD as an EC option with clients, compared to 94% discussing an oral EC method. Clinicians identified time constraints as the main barrier to discussing the Cu-IUD as EC.

**Conclusion**: There was limited awareness of the Cu-IUD as a method of EC among clients, and limited discussion by clinicians, highlighting a need for increased education and promotion strategies for both clients and clinicians. Raising awareness will also require processes are in place to ensure timely insertions of the Cu-IUD for EC.

Disclosure of Interest Statement: The authors have no disclosures of interest.

<sup>&</sup>lt;sup>1</sup> Family Planning NSW, Ashfield, Australia

<sup>&</sup>lt;sup>2</sup> University of Sydney, Australia