

# In this issue

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## Norethisterone and VTE risk

Diana Mansour highlights a change in the Summary of Product Characteristics for Primolut N<sup>®</sup>, since data have emerged showing that, in high doses, norethisterone is partly metabolised to estradiol. This only applies to this particular progestogen, and only in high doses, not those used in contraceptive pills. Nevertheless, it could explain why studies have occasionally suggested an increased risk of venous thromboembolism with high-dose norethisterone, used therapeutically for the management of menorrhagia or dysfunctional uterine bleeding.

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## The SDM: a realistic option for longer-term use

The Standard Days Method<sup>®</sup> (SDM), a fertility awareness-based method of family planning, is a regular part of service delivery in over 30 countries, but information about effectiveness in longer-term use is limited. Sinai *et al.* report on the experience of nearly 500 women who used the SDM for between 2 and 3 years. Regularity of cycle length within the range of 26–32 days was key to contraceptive effectiveness. Their study demonstrated that women whose cycle length nearly always fell within this range in the first year of use are likely to have cycles within this range thereafter. The observed low typical-use pregnancy rate indicates that the SDM is a viable option for women who prefer this form of family planning and should assist programme managers/policymakers when considering the addition of this method to their contraceptive services.

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## CycleBeads: the latest in 'contraceptive jewellery'!

The SDM, a fertility awareness-based method of family planning that helps users to identify the fertile days of the cycle, is an important addition to the range of family planning options. CycleBeads<sup>®</sup>, a colour-coded string of beads, is a visual tool that helps women use the SDM correctly. This report describes the experience of 184 women who participated in a cross-sectional community-based study in Ethiopia, designed to assess knowledge about, and correct use of, the SDM, and desire to continue its use. The study demonstrated a high degree of user and

provider satisfaction with the method, indicating the value of introducing the SDM in family planning programmes to expand contraceptive choice.

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## Ovarian and cervical cancer: better awareness, earlier recognition, improved outcome?

Earlier awareness of cancer is a key part of the UK's current approach to improving cancer mortality. This is particularly relevant in ovarian cancer: the fifth commonest cancer affecting UK women and one that often presents late as there is no reliable population screening programme. In contrast, cervical cancer has become less common in the UK where a population screening programme is in place. Simon and colleagues developed and validated reliable disease-specific Cancer Awareness Measurement tools for both forms of cancer, testing them in matched comparison groups. Such tools can be used to assess and monitor awareness levels and to evaluate the impact of population-based programmes designed to raise awareness of ovarian and cervical cancer.

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## Encouraging IUD uptake after medical TOP

Sharon Cameron and her colleagues in Edinburgh created a fast-track referral service so that women who had undergone early medical abortion who wished to use intrauterine contraception afterwards could be seen promptly for intrauterine device (IUD)/intrauterine system (IUS) fitting. However, only about half the women who were given appointments actually attended. This article analyses the differences between the attenders and the non-attenders and suggests ways to enhance the uptake of these effective methods for the prevention of further unwanted pregnancies. While some women would benefit from IUD/IUS insertion at the place of abortion, provision of a fast-track service to the family planning clinic may yet remain the best strategy for maximising uptake of intrauterine contraception in this specific client group.

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## Helping women with hirsutism

In his very clear review of the investigation and management of hirsutism, Stephen Franks provides useful guidance for helping women with this

common and often distressing condition. He gives a succinct overview of the actions of androgens in women and explains that while polycystic ovary syndrome is by far the commonest cause of unwanted hair growth, practitioners need to be aware of rarer but more serious conditions. Investigations need not be complex, and in many cases they may not be needed at all. Available treatments and their appropriate application are discussed and Franks reminds us that for many patients, psychological support may play an important parallel role in helping them to regain quality of life.

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## US administration's attitude to family planning

The winner of the 2010 Margaret Jackson Prize Essay for undergraduate medical students has looked at the differences between the Bush and Obama administrations' attitudes to family planning and abortion. It is taking a long time to reverse the damaging initiatives put in place by the Bush administration: we can only hope that the Right Wing does not triumph in the upcoming election.

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## Avoiding a shocking experience with intrauterine contraceptive procedures

'Cervical shock' – severe bradycardia and loss of consciousness due to vagal stimulation – is a rare but potentially serious complication of procedures involving cervical manipulation such as IUD/IUS insertion or removal. This Journal has recently featured lively correspondence regarding the most appropriate means of preventing or managing this condition. In this case report, Baird *et al.* make a compelling case for adherence to the current Faculty of Sexual and Reproductive Healthcare and UK Resuscitation Council guidelines, and in particular for the availability of atropine for intravenous use and the training of medical and nursing personnel for its prompt administration.

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## Psychosexual therapists speak out

Psychosexual therapy can seem like one of the dark arts, but in this issue Consumer Correspondent Susan Quilliam brings us the therapists' own stories.

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