desired few children, lived in urban areas and belonged to a non-traditional ethnic group, i.e. non-Bedouin.⁴

A higher level of fertility has been associated with ‘traditional’ religious prohibition on some form of birth control, traditional values about the importance of children and the priority of the family. The UAE is among those societies in which social and religious rules have favoured the abundant production of children. In our study, 121 (40.61%) men have more than five children and among them 14 (18%) never practised any form of contraception.

Responsibility of contraception falls mainly on women being the wife’s responsibility. Despite a reasonable level of awareness overall, i.e. 84.5% and a positive attitude to contraception, only a small proportion of men (27.0%) ever practised any male contraceptive methods. Economic factors were not found to be affecting contraceptive practice in lower and upper class populations in the study group, where nearly the same level of contraceptive use was found. However, a higher level of contraceptive use was noted in the middle-income population. This could be partly explained by the higher level of education and employment of the wives in this subgroup.

To our knowledge this is the first study of its kind in the UAE, and due to the rapid economic development and influence of the information revolution we anticipate that male contraceptive knowledge and use may change positively in the near future.

Statements on funding and competing interests
Funding. None identified.
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F	Faculty	A CPD Self-Assessment Test
A	Aid to	
C	CPD	
T	Topics	
		ANSWER SHEET

Review No. 2002/04

To be reviewed not later than 31st December 2007

Bleeding problems and progestogen-only contraception

	<i>Answer</i>
1. Progestogen induces proliferative change in the endometrium.	False
2. Under the influence of synthetic progestogens, endometrial bleeding comes from the spiral arterioles.	False
3. Circulating progestogen levels are linked to the bleeding pattern.	False
4. When abnormal bleeding patterns are produced by the POP there is evidence to suggest that changing brands is helpful.	False
5. Bleeding problems with progestogen only methods improve with time.	True
6. Implanon® produces a higher rate of amenorrhoea than Depo-Provera®.	False
7. Women using the Mirena® IUS will ovulate normally in the majority of cycles.	True
8. Ethinylloestradiol is more effective than placebo in reducing bleeding side effects with Norplant®.	True
9. Oestrone is no better than placebo in reducing bleeding side effects with Depo-Provera®.	True
10. The use of oestrogen with the POP may affect contraceptive protection.	True

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