Contraception for the older woman: an update.

Blathena RK, Guillebaud J. Climacteric 2006; 9: 264–276

So much has been written about contraception for the young adolescent that the implications of an unplanned pregnancy for the older woman can easily be overlooked. This comprehensive update pulls together peer-reviewed, randomised, controlled trials and observational studies from the last 6 years. It also refers to guidelines from the Royal College of Obstetricians and Gynaecologists, the Clinical Effectiveness Unit of the Faculty of Family Planning and Reproductive Health Care, the Committee on Safety of Medicines, the World Health Organization and the International Planned Parenthood Federation.

It gives evidence-based advice on all methods of contraception (including emergency contraception) and looks at their suitability for this age group, stressing the non-contraceptive benefits that such methods may possess including reduction of menstruation, with the intruterine system, and reduction in vasomotor symptoms and increase in bone mineral density with the combined oral contraceptive – all useful advantages for the older woman.

Although in the UK female sterilisation is the most commonly used method of contraception in women aged over 40 years, this paper suggests that the need for this procedure should be reviewed. Long-acting reversible methods are reviewed. Long-acting reversible methods are peer-reviewed, randomised, controlled trials and observational studies from the last 6 years. It also refers to guidelines from the Royal College of Obstetricians and Gynaecologists, the Clinical Effectiveness Unit of the Faculty of Family Planning and Reproductive Health Care, the Committee on Safety of Medicines, the World Health Organization and the International Planned Parenthood Federation.

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