



Transcript Details

This is a transcript of an educational program. Details about the program and additional media formats for the program are accessible by visiting: https://reachmd.com/programs/advances-in-womens-health/talking-with-your-patients-about-their-contraceptive-options/13580/

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Talking With Your Patients About Their Contraceptive Options

ReachMD Announcer:

You're listening to ReachMD. This medical industry feature, titled "Talking With Your Patients About Their Contraceptive Options" is paid for and brought to you by Organon. This program is intended for health care professionals in the United States, its territories, and Puerto Rico. Here's your host, Dr. Mandy Gittler.

Dr. Gittler:

Hi! I'm Dr. Mandy Gittler, a family medicine doctor. The conversation between a patient and a provider on contraception is an essential component of patient counseling. Let's watch an example of one in action.^{1,2}

Hi Ashley. It's so nice to see you again. How are things going since I last saw you about, about a year ago?^{1,2}

Ashley:

Things are good! Just got a promotion, so my boyfriend and I are planning a trip to celebrate.^{1,2}

Dr. Gittler:

Wow, that sounds like a lot has changed over the last year.^{1,2}

Wondering are you okay talking about things we discussed in the past regarding your family planning, and when you may want to get pregnant?^{1,2}

Ashley:

Well, I'd like to have kids, but especially with this promotion, I don't think I'm really ready to have a baby right now.^{1,2}

Dr. Gittler:

Yeah, that makes a lot of sense. You're putting forth a lot of effort for your career, and, if you could guess, when do you think you might want to get pregnant?^{1,2}

Ashley:

Maybe in a couple years?^{1,2}

Dr. Gittler:

Ok. If you did happen to get pregnant though, how do you think a pregnancy would impact your life right now?^{1,2}

Ashley:

With all the work-related travel I've been doing recently. It would absolutely flip my life upside down.^{1,2}

Dr. Gittler:

What is most important to you about your contraception? 1,2

Ashley:

Well, I guess the most important thing is that it works, but it would also be great if I didn't have to take it every day. I did some research online, but I would love to get your help in choosing another option.^{1,2}

Dr. Gittler:





Of course, I'm happy to help! I'm sure you saw in your own research, there are a number of options to choose from. Would you prefer a birth control method that is administered monthly or less often?^{1,2}

Ashley:

I suppose either is fine. 1,2

Dr. Gittler:

Tell me a little bit about your periods. What type of bleeding do you typically experience month to month?^{1,2}

Ashlev:

I guess they're pretty regular. They usually come about a day or so after I start my last week of pills and usually last about a week.^{1,2}

Dr Gittler

Ok. How would you feel if you had a change in your bleeding pattern?^{1,2}

Ashley:

Well I'm fine with the way it is now. What do you mean by a change?^{1,2}

Dr Gittler

So some types of birth control can increase or decrease your flow, or they can change the time between your periods, and in between periods you may also have some spotting. But we usually won't know exactly what the change will be until you start using the new method. 1-3

Ashley:

Thanks for letting me know. That's very helpful. I think I'd be ok trying something like that and seeing how it goes^{1,2}

Dr. Gittler:

Ok. So if I understand you correctly, you're looking for an option you don't have to take every day and you do understand that there probably could be some changes in your bleeding pattern.^{1,2}

Ashlev:

Yes. 1,2

Dr. Gittler:

Ok. Do you have any other concerns about contraception that you wanted to bring up before we continue the discussion?^{1,2}

Ashley:

Nope, not really.^{1,2}

Dr. Gittler:

Ok. You had mentioned that you looked up other birth control options? Can you tell me what you heard about or what you've read?^{1,2}

Ashley:

Yeah, so my friend has an IUD, so I started by looking at those, but I'm not really sure that it's for me. Though I do like that I wouldn't have to think about it every day. Are there other options that I should be considering?^{1,2}

Dr. Gittler:

Yeah, there are other options, and we can go over them now if you'd like.^{1,2}

Ashley:

Yes, that'd be great. I did see something about options that are not IUDs that cover some of the other criteria we were talking about, but I don't know exactly how they work. Could you tell me a little more about them?^{1,2}

Dr. Gittler:

Sure, I can go over those methods with you right now, and then we'll be able to make a decision that's right for you^{1,2}

Ashley:

That'd be perfect. Thank you! 1,2

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The references for the information discussed today are available in the transcript, which can be accessed on the site where you listened to this podcast.

References:

- 1. Gavin L, Moskosky S, Carter M, et al; Centers for Disease Control and Prevention. Providing quality family planning services: recommendations of CDC and the U.S. Office of Population Affairs. MMWR Recomm Rep. 2014;63(RR-04):1–54.
- 2. Gavin L, Pazol K, Ahrens K. Update: providing quality family planning services recommendations from CDC and the U.S. Office of Population Affairs, 2017. MMWR Morb Mortal Wkly Rep. 2017;66(50):1383–1385.
- **3.** Family planning: a global handbook for providers. World Health Organization Web site. Apps.who.int/iris/bitstream/handle/10665/260156/9780999203705-eng.pdf. Accessed June 17, 2022.

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