



PIONEER

MEDICAL JOURNAL

Vol. 4 No. 7 Jan. - Jun., 2014

ISSN: 2354-1954

Official Publication of The Medical and Dental
Consultants' Association of Nigeria (**MDCAN**)
FMC, Umuahia Chapter.

FAMILY PLANNING PRACTICE IN NIGERIA: FINDINGS FROM FAMILY PHYSICIANS

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ABSTRACT

Background: Family planning is a way of regulating child birth in the family to promote the well being of the family and the society in general. These services are offered by the gynaecologist, the primary care physician and other health staff trained to offer such services. Failure to plan the family may lead to unwanted pregnancy, abortions, ill-health, social problems and overpopulation.

Aim: To determine the methods of family planning commonly chosen by clients seen by the family physicians.

Method: Family physicians and resident doctors in family medicine attending a one week Annual general meeting/scientific conference of the Society of Family Physicians of Nigeria in Uyo in August 2012 were consecutively surveyed using a semi-structured questionnaire. The questionnaire sought information on their location of practice, methods of family planning chosen by their clients, reasons for choosing those methods and complications that occurred while on family planning.

Results: 72 out of 100 respondents filled and returned the questionnaire. The minimum age of the respondent was 29 years, maximum age was 62 years. Most of the physicians that attended the conference were from South South region of Nigeria. The three most common methods of family planning chosen by the clients who consulted Family physicians for family planning were intrauterine contraceptive device 75%, condoms 69.4%, and injectables 63.9%.

Conclusion: The Family physicians in this study recommended intrauterine contraceptive device for 75% of their clients, condoms for 69.4% of their clients and injectable contraceptive for 63.9% of their clients. These methods were prescribed based on the choice of the clients.

Key words: family planning, family physician, findings.

Introduction

The Family Physician is a frontline doctor who provides continuing and comprehensive medical care in a personalized manner to patients of all ages and their families regardless of the presence of disease or nature of the presenting complaints.¹

One of the task of the family is reproduction. Reproduction is one of the characteristics of living things but reproduction without provision for the newborn children will lead to starvation, poor growth, sickness, economic hardship and premature death. To prevent

these problems from befalling the children, the women and family, there is need to plan the family through family planning services. Family planning is a way of regulating child birth in the family to promote the well being of the family and the society in general. These services may be offered by the Primary care physician, the Gynaecologist and any other health staff trained to offer such services. Various family planning methods are available. These methods include natural family planning methods (safe periods/calendar calculation, lactational

amenorrhoea, Billing's method and basal body temperature charting).² Hormonal family planning methods are combined oral pills, progesterone only pills, hormonal implants and hormonal injectables.³ The non hormonal family planning methods are intrauterine contraceptive device(copper T), male condoms, female condoms, diaphragm, bilateral tube ligation, vasectomy, spermicides and cervical caps.

The benefits of family planning are enormous. These are reduction of maternal and child morbidity and mortality, empowering women by lightening the burden of excessive child bearing, enhancement of environmental sustainability by stabilizing the population of the planet.⁴ Other benefits are prevention of unwanted and unplanned pregnancy, reduction of unsafe abortions,⁵ and reduction of over-population.

Nigeria had a population of 170,507,539 in July 2013 and an annual growth rate of 2.5%.⁶ with only 10% of women using modern contraceptive methods.⁷ This low family planning use has resulted in high abortion rate of 25 per 1000 women aged 15-44 years.⁸ Studies in the country on knowledge, attitude and practice of family planning methods in Nigeria show that 59.5% used male condoms, 47.0% used oral contraceptives and 27.1% used hormonal injectables in Jos, North central Nigeria.⁹ Similar study in Uyo, South South Nigeria showed that 40.4% used condom, 31% used safe period/calendar method, 18.0% used oral contraceptive, 9.3% used intrauterine contraceptive device, 2.7% used Billing's method, 1.6% used hormonal implants and 2.7% used emergency contraception.¹⁰

The aim of the study was to determine the methods of family planning commonly chosen by clients seen by the Family Physician.

Methods and Materials

The study was a cross-sectional descriptive survey of Family Physicians and residents doctors in Family Medicine in Nigeria. These

doctors attended a one week Annual General Meeting/Scientific Conference of the Society of Family Physicians of Nigeria in Uyo, Akwa Ibom State.

Semi structured questionnaires were distributed to consecutive Family Physician and resident doctors who registered for the conference. The questionnaire sought information on socio-demographic characteristics of respondents, what methods of family planning were prescribed for clients, what factors influenced the methods prescribed, what were the clients reasons for seeking family planning, what complications occurred in patients while on family planning and clients reason for discontinuation.

Family Physicians and residents doctors in Family Medicine who filled and returned the questionnaire formed the sampling size. Sampling technique was non probability, convenient sampling. Inclusion criteria were Family Physicians and resident doctors who registered for the conference and gave consent to participate in the study. Exclusion criteria were Family Physician and resident doctors who did not give consent as well as non doctors. Ethical approval has been obtained for this study from the Ethical and Research Committee of the University of Uyo Teaching Hospital.

Data processing was done using statistical package for social sciences. (SPSS 17.0) Results are presented as frequencies and proportion. The study was sponsored by the author.

RESULT.

A total of 72 Family Physicians filled and returned the questionnaire out of a hundred that registered for the conference giving a response rate of 72%. The minimum age of respondents was 29 years while the maximum age was 62 years with a mean age of 43.01 years 9.013SD. Minimum number of years of practice as physician was 3 years while maximum number of practice was 33 years with an average of 13.68 years. Majority of physicians attending the conference were

above 40 years (n= 43, 59.7%), from south south region of Nigeria (n=30, 58.8%), Males (n=57, 79.2%), practiced in a tertiary facility (n=54, 75%) and were consultants (n=35, 48.6%). This is shown in table one. The three most common methods of contraceptive prescribed by the Family Physicians were intrauterine contraceptive device (IUCD), n=58, 80.6%, condoms n=50, 69.4%, and hormonal injectables n=46, 63.9%. The least prescribed family planning method was vas deference ductal surgery n=1, 1.4%. This is summarized in table two.

The commonest reason for family planning method prescribed was patient choice n=65, 90.3% while physician experience was least used to prescribed methods n=28, 38.9%. The commonest reasons for seeking family planning were child spacing n=62, 86.1% and completed family size n=57, 79.2%. The group that sought family planning most were married persons n=62, 86.1% while adolescent were the least seekers of family planning n=4, 5.6%. The commonest complication reported by the Family Physicians was amenorrhoea n=47, 65.3% while the least was pregnancy n=8, 11.1%.

Table 1. Socio demographic characteristics of Family Physicians and type of family planning prescribed.

Variables	Frequency(n)	Percentage %
Age		
Less than 40	29	40.3
40 and above	43	59.7
Practice Location		
South south	30	58.8
South east	9	12.5
South west	6	8.3
North central	4	5.6
North east	1	1.4
North west	1	1.4
Sex		
Male	57	79.2
Female	15	20.8
Practice Type		
Primary facility	7	9.7
Secondary facility	10	13.9
Tertiary facility	54	75.0
Private facility	1	1.4
Designation		
Registrar	12	16.7
Senior Registrar	25	34.7
Consultant	35	48.6

Table 2. Types of family planning prescribed and frequency.

Types of family planning prescribed	Frequency	Percentage (%)
Natural family planning method	29	(40.3)
Oral contraceptive	35	(48.6)
Hormonal implant	26	(36.1)
Injectables	46	(63.9)
Condoms	50	(69.4)
Diaphragm	4	(5.6)
IUCDCopper T	58	(80.6)
IUCDLippes Loop	4	(5.6)
Bilateral Tubal Ligation	31	(43.1)
Ductal Surgery	1	(1.4)

* multiple response

Table 3 Factors that influenced methods of family planning prescribed.

* Factors that influenced method of Family Planning prescribed.	Frequency(n)	(Percentage %)
Patience choice	65	90.3
Physicians experience	28	38.9
Patience clinical condition	53	73.6
Cultural preference	31	43.1

* multiple response

Table 4: Clients reason for seeking family planning.

Client reasons for seeking family planning	Frequency(n)	Percentage (%)
Child spacing	62	86.1
Completed family size	57	79.2
Failed contraceptive	12	16.7
Rape	19	26.4
Casual sex	16	22.2

Table 5: Clients that family physician prescribe family planning for.

Clients that physicians prescribe family planning for	Frequency(n)	Percentage (%)
Adolescents	4	5.6
Unmarried young adults	18	25.0
Married persons	62	86.1

* multiple response

Table 6: Common complications of clients while on family planning.

Common complications of clients while on family planning	Frequency(n)	Percentage(%)
Ammenorhoea	47	65.3
Weight gain	40	55.6
Pregnancy	8	11.1
Menorrhagia	37	51.4

* multiple response

Discussion

The study shows that Family Physicians prescribe family planning methods based on patient's choice. The commonest method prescribed by Family physicians was intrauterine contraceptive device (IUCD). This finding is similar to what was found in Enugu, Nigeria where majority of family planning acceptors chose IUCD.¹¹ Similarly, a study in Ibadan, Nigeria found that majority of family planning users chose IUCD also making it the most common method prescribed in the family planning clinic.¹²

It was observed that the commonest reason for seeking family planning from the Family Physicians were child spacing and completed family size as was found in 78.4% of clients attending antenatal care in Uyo.¹⁰ Married women sought family planning most as found in the study because they wanted to limit their family size. Adolescents were the least who sought family planning from the Family Physicians. This might not be unrelated to the culture and traditions prevalent in the society where it is unacceptable for adolescents to seek family planning.

The commonest complication reported by the Family Physicians was amenorrhoea. This may have resulted from high prescription of hormonal injectables by a good number of Family Physicians in this study. Moreover, hormonal injectables are known to have side effects of amenorrhoea, menorrhagia and metrorrhagia.¹³

In conclusion, Family Physicians prescribed family planning methods to clients who seek such services from them based on the client's choice. The intrauterine contraceptive device is the commonest family planning method prescribed by the Family Physician in Nigeria. The commonest reasons for seeking family planning were child spacing and completed family size. Married women sought family planning more than adolescents. So there is need to improve access and availability of family planning to adolescents because they are the ones who commonly get unwanted pregnancy and procure unsafe abortion.

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