European Society of Contraception and Reproductive Health
ESC Central Office - Opalfeneweg 3 - 1740 Ternat - Belgium
Tel. + 32 2 582 08 52 - Fax +32 2 582 55 15
info@escrh.eu - www.escrh.eu

Grant application form Second half year 2015
Seeking ESC support for a PROJECT

Introduction

The ESC will provide funding to support an individual, group, institute or organisation with a project related to the aims of the ESC. Examples include: research, audit, review, needs assessment. The money MUST be used for a definite project within a definite time period.

Application
Please use this application form. Note sections with a maximum word count. Forms will be returned if the word count is exceeded.

If granted, the project must start within 12 months and must be completed within 3 years, with a final report sent to ESC within 6 months of completion.

A maximum of 10,000 euro per project application can be requested. A detailed budget including salary costs, overheads etc should be attached as an appendix to the application form.

Who can apply?
Applicants must be paid-up ESC members.
Applicants should be Europeans. However, a European applicant is allowed to submit a project that will take place outside Europe.

Deadline
Applications MUST be received at ESC Central office by **31 December 2015.**

Budget
A maximum of 10,000 euro per project application can be requested for projects received between 1 July and 31 December 2015. The The ESC may not be in a position to fully fund all applications**.**

Part A Name of the applicant requesting the funding

Name of applicant: Kirti Sharad Iyengar
Job title: PhD Scholar
Address: WHO Centre, C1:05, Karolinska University Hospital, Solna
Stockholm- 17176, Sweden
Tel no.: 076423 9478 (Sweden), 0919799498350 (India)
Email: Kirti.iyengar@ki.se; kirtiiyengar@gmail.com
Date of submission of this form: 28 December 2015

Part B Proposed project

Name of the person responsible for the project (If different to the person named in box A):

Same as in box A

Contact details of the person noted in this box B:
name of person, job title, address, tel no. email: Same as in box A

Part C Background of the project – narrative summary

Title of the project: **Levonorgestrel-Intrauterine System (LNG-IUS) and Copper Intrauterine Device Insertion in the Postpartum Period: a Pilot study**

Comprehensive description of the project (max 200 words):

Background: Long acting reversible contraceptives (LARCs) are an important strategy to areduce the burden of unintended pregnancies[1]. Postpartum intrauterine device (IUD) has been actively promoted by many countries to reduce unmet need[2,] Concerns related to immediate postpartum IUD insertion remain in developing country settings[3], since postpartum hemorrhage and anemia are important causes of maternal mortality and morbidity. Immediate postpartum insertion of Levonorgestrel intrauterine system (LNG-IUS) has been associated with significant reductions of bleeding and a longer period of amenorrhea than the copper-IUD[4], however a few studies have reported that it could be associated with shorter duration and less exclusive breast-feeding[5].

The aim of this pilot study is to compare effect of immediate postpartum insertion of LNG-IUS and Copper-IUD at 12 months after delivery in a primary care setting in India

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1 Blumenthal P. D., Voedisch A., and Gemzell-Danielsson K. Strategies to prevent unintended pregnancy: increasing use of long- acting reversible contraception

2 Jhpiego. Revitalising Postpartum Family Planning Services in India. Fact sheet: Nov 2014.

3 Muthal-Rathore A. Immediate postpartum insertion for intrauterine devices: RHL commentary (last revised: 1 September 2010). The WHO Reproductive Health Library; Geneva: World Health Organization.

4 Elsedeek MS. Puerperal and menstrual bleeding patterns with different types of contraceptive device fitted during elective cesarean delivery. Int J Gynaecol Obstet 2012; 116: 31 – 4.

5 Chen B.A., Reevesa M. F., Creinina M. D., Schwarz E. B. Postplacental or delayed levonorgestrel intrauterine device insertion and breast-feeding duration. Contraception 84 (2011) 499–504.

Methods: This will be a pilot of a randomised controlled trial conducted at 2 health centres in India. Women will be counseled on contraceptive options during pregnancy, and those interested in postpartum IUD will be assessed for eligibility. Fifty eligible women will be randomized to either Copper-IUD or LNG-IUS, to be inserted in immediate postpartum period. Participants will be blinded about the type of IUD, and removal will be offered on demand. Follow-up will be at 8 weeks, 6 months and 12 months after delivery.

Policy implications: Results of this study will enable identifying the most suitable type of IUD for use during immediate postpartum period. Based on these results, a larger randomised controlled trial will be designed to compare the two types of IUD for postpartum insertion. We expect that the results will be highly relevant for countries to fine-tune their policies on postpartum contraception.

When would it start / finish? (Max 20 words):

The pilot study will start in July 2015 and finish in September 2016

Where will it take place – country / town, establishment? (Max 20 words)

The project will be implemented in primary care clinic of ARTH (a non-profit organization, www.arth.in), in Udaipur district, Rajasthan, India.

Objectives and needs identified. (Max 20 words)

Objectives are to compare effect of postpartum insertion of LNG-IUS or Copper-IUD on rates of anemia, infant feeding and other outcomes at 12 months after delivery

Sector in the area of contraception, sexual and reproductive health: Contraception

Is it a 'new' project? **Yes** / No

If extension of an existing programme, provide information on original programme (Max 50 words)

What outcomes will be measured? List. (Max 20 words):

Following outcomes will be measured at 12 months postpartum

(a) Change in hemoglobin
(b) Duration and exclusivity of breast-feeding
(c) Weight gain in infant
(d) Postpartum amenorrhea and menstrual bleeding
(e) Continuation rates

Do you foresee any reasons (political, climatic, etc) why this project may be adversely affected? (Max 20 words)

We do not see any reason for this project to be adversely affected, since there is no political instability or opposition to contraception in Rajasthan, India.

Part D Financial related information

Are there other partners or organisations supporting this same project? If so, list.

No

Have you already obtained any funding towards this project? (If yes or still awaiting a response, please give details) (Max 20 words)

No funding has been obtained for this project. The clinics where this project will be implemented are already operational.

How much money are you requesting (up to a maximum of 5% can be used to cover overhead costs) ? A maximum of 10,000 euro per project application can be requested. An overview of the budget must be provided here (max 50 words) and a detailed budget should be attached as an appendix to the application form.

The budget requested is 9065 Eoros. Broadly, the breakup will be as follows:

Salary- Project investigator (25% salary for 9 months):	7425
Service delivery support to provide IUD:	1100
Printing of research forms	110
Institutional overheads	430
Total	9065

Will this be part of a larger fund or stand alone? (Max 20 words)

This will be a standalone project in a service setting.

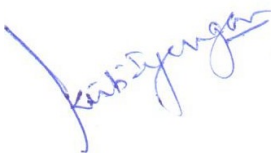
Who will oversee the budget & keep accounts?

Sandra Brogårde,
Head of administration, Department of women's and children's health,
Karolinska institutet

Part E Follow-up

I / We, as responsible agents for this project, agree to the following 6 points:

I/We agree that all monies will be spent appropriately	✓
I/We agree to advise you at the earliest time if this project is delayed or cannot be completed	✓
I/We agree to provide a report to the ESC within 6 months of the end of the project and yearly, if the project lasts longer than 1 year.	✓
I/We agree to present the ESC treasurer with a detailed budget at the end of the project. *(if the project is longer than 1 year, the funding may be awarded in stages and be dependent on appropriate reporting)*	✓
I/We agree that if you need to make any significant changes to the duration, contents or funding of the project after it has been awarded, I/we will advise the ESC Treasurer.	✓
I/We agree to acknowledge the ESC as a donor in any publications and oral communications resulting from this project. Ideally any manuscript should be sent to the ESC journal in the first instance.	✓



Signed Date 28 December 2015
Name Kirti Sharad Iyengar

Please return this form (by email) to:

ESC Central Office
Opalfeneweg 3
B-1740 Ternat, Belgium
Tel +32 2 582 08 52
Fax +32 2 582 55 15
info@escrh.eu

Appendix (Details of budget justification)

Lenonorgestrel Intrauterine System and Copper Intrauterine Device in the Postpartum Period: a pilot study

Budget justification

	SEK	Euro
Personnel		
Salary- Project investigator (25% salary for 9 months)*	67500	7425
Service delivery and operations research		
Service delivery support to provide IUD LNG-IUS (200 SEK per IUD)** Printing of research forms, instruction sheets etc.	10000 1000	1100 110
Subtotal	78500	8635
Institutional overheads (5%)	3925	430
Total	82425	9065

* The project duration is 15 months, however, the part time salary of project investigator is chaged for 9 months.
** Service delivery support includes costs of service delivery staff and consumables required to provide the service.