

# Final report form

for a granted project

## **Date project actually started:**

maandag, november 2, 2020

## **Date of completion:**

vrijdag, april 30, 2021

## **Please provide a report of your findings and data.**

Between 01 November 2020 and 30 April 2021, we conducted a prospective cohort study at the University of Abuja Teaching Hospital, Gwagwalada, Nigeria. The institution serves as a reference hospital for the FCT and surrounding states; during the study period, there were 812 deliveries, of which 526 were vaginal and 286 cesarean sections.

For this study, we defined immediate postpartum IUD insertion as placing a copper IUD in the uterine cavity within 48 hours of childbirth; the standard definition is more suitable for high-income regions where most births occur in healthcare facilities. We recruited convenience samples from pregnant women (potential users of the PPIUD service) who attended antenatal clinics and obstetric personnel (potential service providers) for the study. We also conducted a Service Availability and Readiness Assessment (SARA) of the institution's facilities, human resources, and assets.

Potential immediate PPIUD Service Providers  
Thirty-seven Obstetric staff members completed a self-administered structured questionnaire, of which 25 were doctors, 12 midwives, 19 females, and 18 males. Most participants (23) were between 30 and 59 years old, with 14 participants declining to state their age. Almost half (46%) graduated/completed their basic professional training over 20 years ago. Twenty-one (57%), including three midwives, were trained in IUD insertion; 94% of those not trained cited a lack of training opportunities as the primary reason for not being trained. Doctors trained eighteen participants, and midwives trained three to fit IUDs. The time interval since training to fit IUDs ranged from 1 to 15 years, with a mean of 7.7 years. Thirty-two (86%) participants regularly

discussed IUDs when counselling pregnant or postpartum women about family planning. They gave various answers regarding the most suitable contraceptive methods for postpartum women; 29 (91%) felt the most appropriate period to counsel pregnant women about postpartum family planning was during antenatal clinic visits. Twenty-two (59%) participants felt that pregnant or postpartum women make decisions about family planning during antenatal clinic visits, while eight felt it was during postnatal clinic visits. Thirty-one felt that counselling for PPIUD should start during the antenatal clinic visits. Twenty-eight participants (76%), 21 trained and 16 untrained, had not inserted an IUD in the previous six months, with 27 citing a lack of experience and opportunity; only three of the nine who were trained and had inserted IUDs in the last six months, including a midwife, had inserted PPIUDs. One participant felt a PPIUD was unsafe for postpartum women.

#### Study Participants

The pregnant women completed a five-part questionnaire that included background information, obstetric characteristics, knowledge assessment, and attitude and were counselled about PPIUD insertion within 48 hours after delivery. Healthcare providers completed a birth, discharge, and two and 6-week postpartum follow-up data form for each participant who had a PPIUD inserted.

Of the 129 potential immediate PPIUD users approached and counselled about the immediate postpartum copper IUD insertion research, 95 (74%) consented to participate and have immediate PPIUD insertion and 34 (26%) consented but declined a PPIUD insertion. Forty-nine women (52%) had immediate PPIUD, while the rest did not for various reasons, such as delivering outside the institution or declining its use after birth. Of the 49 women who had an immediate PPIUD insertion, 33 (67.3%) attended two follow-up appointments, with the majority complying with the follow-up intervals, 7 (14.3%) attended only one follow-up appointment, while 9 (18.4%) did not attend any follow-up appointments.

Reasons for not attending follow-up appointments included religious obligations. Two IUDs were removed 10 and 21 days after insertion due to a partner's discomfort caused by the IUD strings, while the other patient felt the strings outside the vagina and insisted on the IUD's removal. Most women with an immediate PPIUD insertion had a positive experience and would recommend it to others.

## Institutional Service Availability and Readiness Assessment (SARA)

We assessed the institution's facilities, human resources, equipment, drugs, estates and ancillary services using a structured two-part questionnaire. This assessment indicated it had adequate resources to establish the service, but potential providers require appropriate training and institutional support.

### Conclusions

Establishing immediate Postpartum Intrauterine Device (PPIUD) services for women in the Gwagwalada area of Nigeria is achievable; immediate PPIUD insertion is acceptable to the women in this study, the resources are available and adequate, and potential service providers are undeniably keen, given adequate training and support.

**Please provide a final detailed budget on how much you have spent. Was any money not spent? Receipts may be requested.**

### ESC SCIENTIFIC PROJECT- P2016-B-06 FINANCE REPORT

Payment by ESC €5,000.00 £STERLING

EQUIVALENT £4,200.00

EXPENDITURE 01 February 2019 - 28 February 2021

Research Ethics Application Form £66.59

Commcare Software £1,154.38

Mama-U Trainer Cost £110.00

Mama-U Trainer Import Duty £34.86

Investigator's remuneration, printing and photocopying of study materials, 2-day PPIUD training workshop including meals, tea and coffee breaks. £271.00

1. N25000.00 to cover the cost of the 2 disposable Cusco's speculum per study participant for the two post-insertion F/UP checks, for the first 25 patients @N500.00 each

2. N50000.00 to cover the cost of one post-insertion F/UP ultrasound scan @ N2000.00 per patient for the first 25 patients.

3. N37500.00 for the travel expenses of the first 25 study participants.

4. Extra N40000.00 for additional catering costs

Total N152,500.00 £248.03

EXPENDITURE 01 MARCH - 30 APRIL 2021

1. N18000.00 for the 2nd post-insertion F/UP USS of 9 study participants

- @ N2000.00 each.
2. N4500.00 cost of 9 disposable specula for the 2nd post-insertion F/Up examination of 9 Study participants.
  3. N6750.00 cost of travel expenses of 9 study participants' 2nd F/UP visit.
  4. N44000.00 cost of 2 post-insertion F/UP USS @ N2000.00 each for 11 Study participants.
  5. N11000.00 cost of 2 disposable Cusco's speculum @N500.00 each for the two post-insertion F/UP checks of 11 study participants.
  6. N16500.00 travel expenses of 11 study participants.
  7. N72000.00 cost of 2 post-insertion F/UP USS @ N2000.00 each for the next 18 Study participants.
  8. N18000.00 cost of 2 disposable Cusco's speculum per study participant @N500.00 each for two post-insertion F/UP checks of the next 18 study participants.
  9. N27,000.00 cost of travel expenses of the next 18 study participants.

Total N217750.00	£340.00
Subtotal	£2,224.86
EXPENDITURE 01 MAY - 30 JULY 2021	
Dr Teddy Agida (PI) ₦250,000.00	
Research Assistant 1 ₦180,000.00	
Research Assistant 2 ₦180,000.00	
Research Nurse/ Midwife 1 ₦150,000.00	
Research Nurse Midwife 2 ₦150,000.00	
Total ₦910,000.00	£1,820.00
Total Expenditure	£4,044.86
***Unspent money £155.14**	

### How will your findings be presented?

Publication in journal

Presentation

### Was your paper published? Indicate journal and acceptance date

We are undertaking further data analysis preparatory to submitting a paper for publication within the next three months.

### Presentation – note meeting organisation and date

1. Society of Gynaecology and Obstetrics of Nigeria (SOGON) 11th International scientific conference and 56th Annual General Meeting, Abuja, Nigeria, 22-25 November 2022.
2. 16th Congress of the European Society of

Contraception and Reproductive Health, Ghent,  
Belgium, 25-28 May 2022.

**Add any other information you feel we should have**

Please let me know what to do with the unspent sum of £155.14

**Please let us know whether having a mentor has been helpful or not**

I did not have a mentor.

**Full Name**

Babatunde Gbolade

**Date**

woensdag, maart 22, 2023

Questions? ESC Central Office: [info@escrh.eu](mailto:info@escrh.eu)

**Type a question**

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