



# Contraception and abortion in Slovenia

Barbara Mihevc Ponikvar, Sonja Tomšič  
National Institute of Public Health, Slovenia

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# Reproductive health care in Slovenia

- At primary health care level specialist in obs-gyn is woman's personal physician (available without referral), responsible for treatment of reproductive health problems and for preventive activities according to reproductive health programme:
  - **Family planning, contraception counselling and prescription** (In Slovenia all hormonal contraception except urgent is prescribed by medical doctors, mostly personal gynecologists in an out-patient settings at primary health care level),
  - STI prevention and treatment,
  - National cervical cancer screening programme,
  - Preventive medical examinations in pregnancy and after delivery or abortion,
  - Health promotion and education (antenatal classes...).
- Primary reproductive health teams operate in the framework of public health care institutions (community health centers, hospitals) or as private practice doctors incorporated into the public health network on the basis of concessions.

# Available data sources

- Databases operated by National Institute of Public Health:
  - National database on prescription drugs,
  - Reports from primary reproductive health teams,
  - Information System on Fetal Deaths (national registry),
  - Perinatal Information System (national birth registry).
- European Health Interview Survey 2014 data (special module about sex behavior and contraception use).
- Data provided by pharmaceutical sales representatives (for emergency contraceptives – available without a prescription).

# Methodology

- Assumptions:
  - Women use hormonal contraception all year (13 cycles = 364 days).
  - IUD users use IUD for 5 years.
- Rates are calculated per all women in reproductive age although all women do not need contraception because:
  - they do not have partner or heterosexual intercourse,
  - they are pregnant or plan pregnancy,
  - they are infertile.
- Consequently, the contraception use in couples that need contraception is higher than calculated from routine databases.
- Use in couples that need contraception can be calculated from surveys.

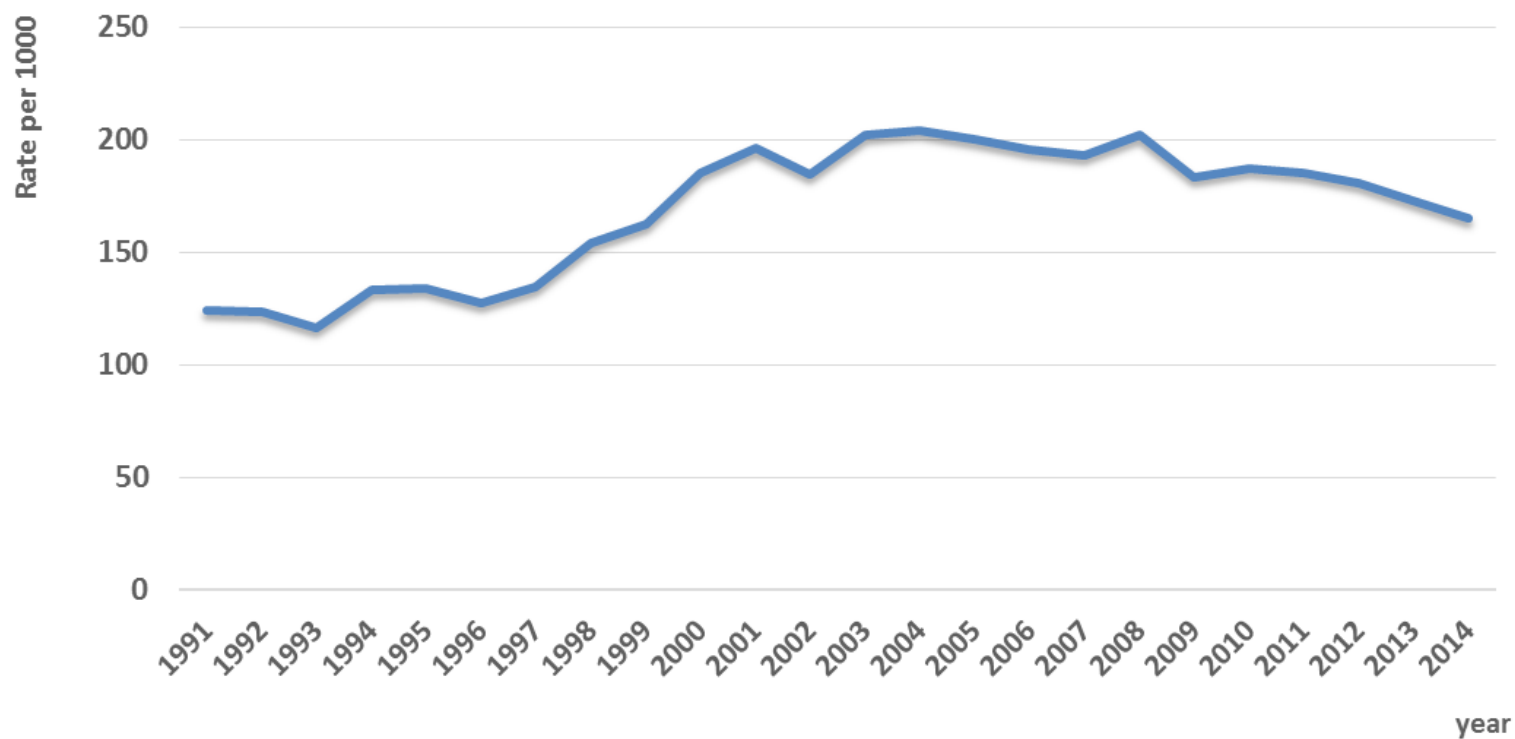
# Hormonal contraception



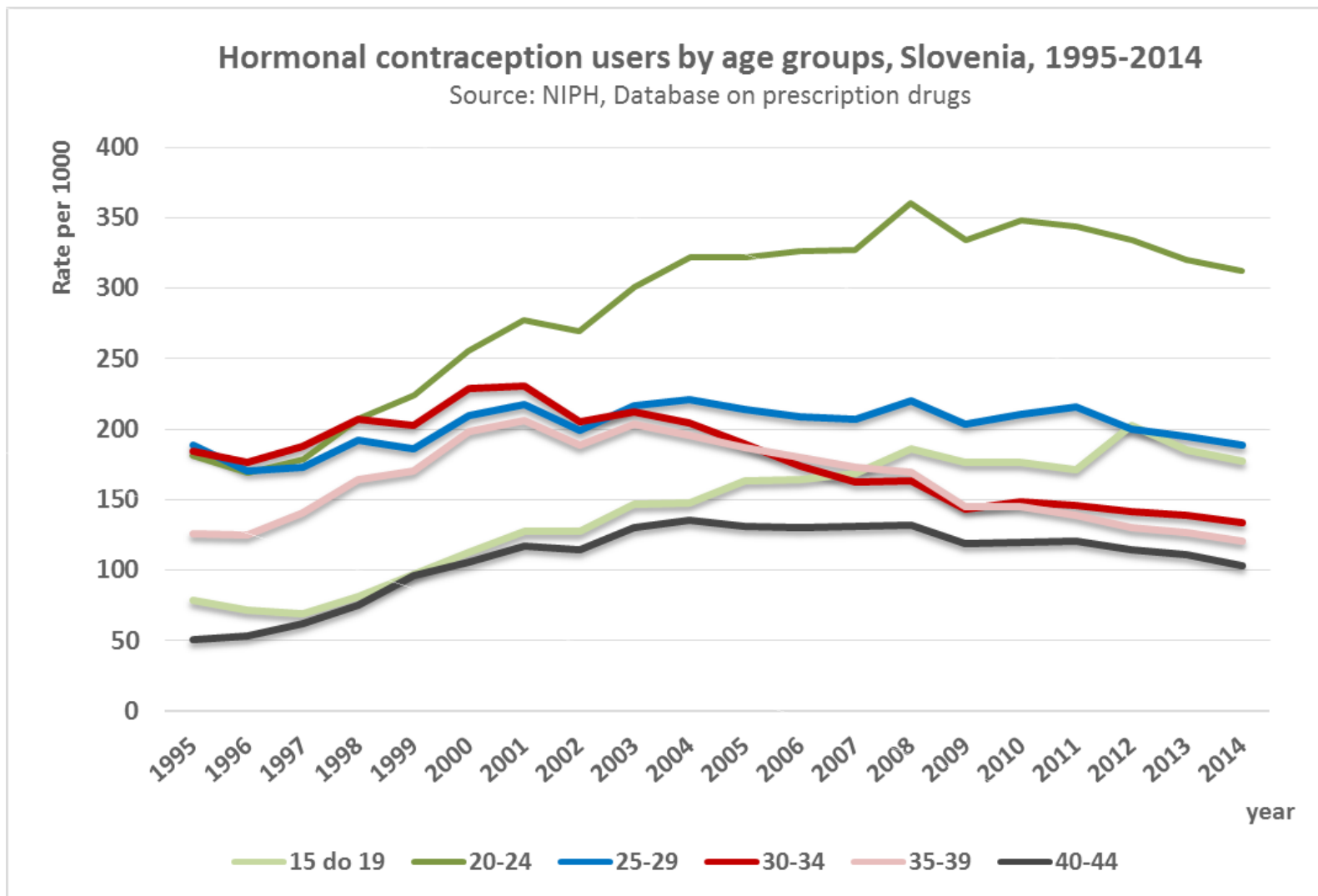
- Nowadays the most wide-spread form of contraception in Slovenia, although since 2008 a decrease in number of user was observed (19 % decline between 2008 and 2014).
- In 2014 there were ~ 68.000 users
  - 148 per 1000 women aged 15 - 49,
  - 164 per 1000 women aged 15 - 44.
- Among contraceptive pills 89 % were combined hormonal contraceptives, most commonly with a combination of ethinylestradiol and drospirenon.

## Hormonal contraception users (per 1000 women aged 15 - 44), Slovenia, 1991-2014

Source: NIPH, Database on prescription drugs

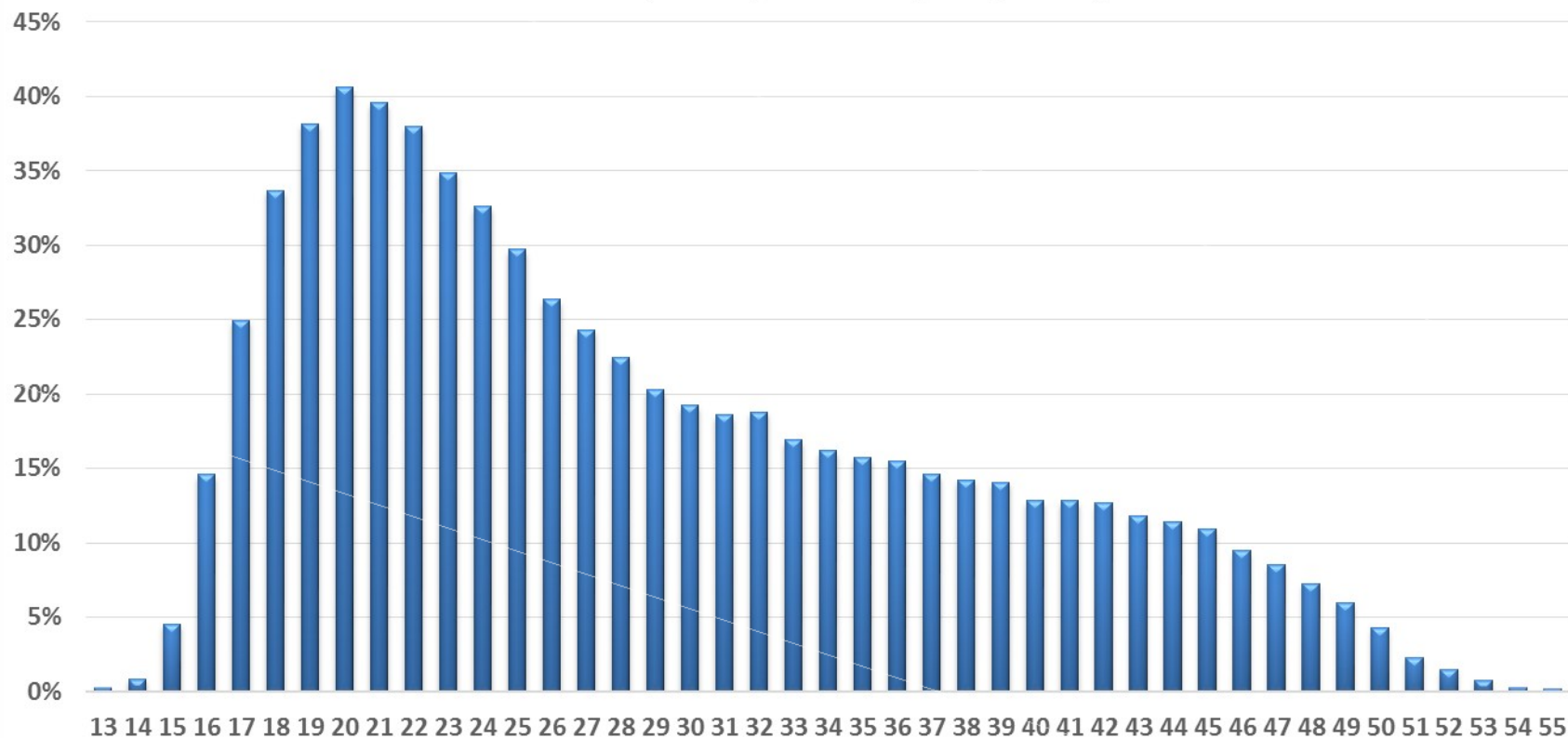


**Hormonal contraception use is most prevalent in the age group 20 - 24 years.**



## Percentage of women with at least one prescription of hormonal contraception, by age, Slovenia 2014

Source: NIPH, Slovenia, Database on prescription drugs



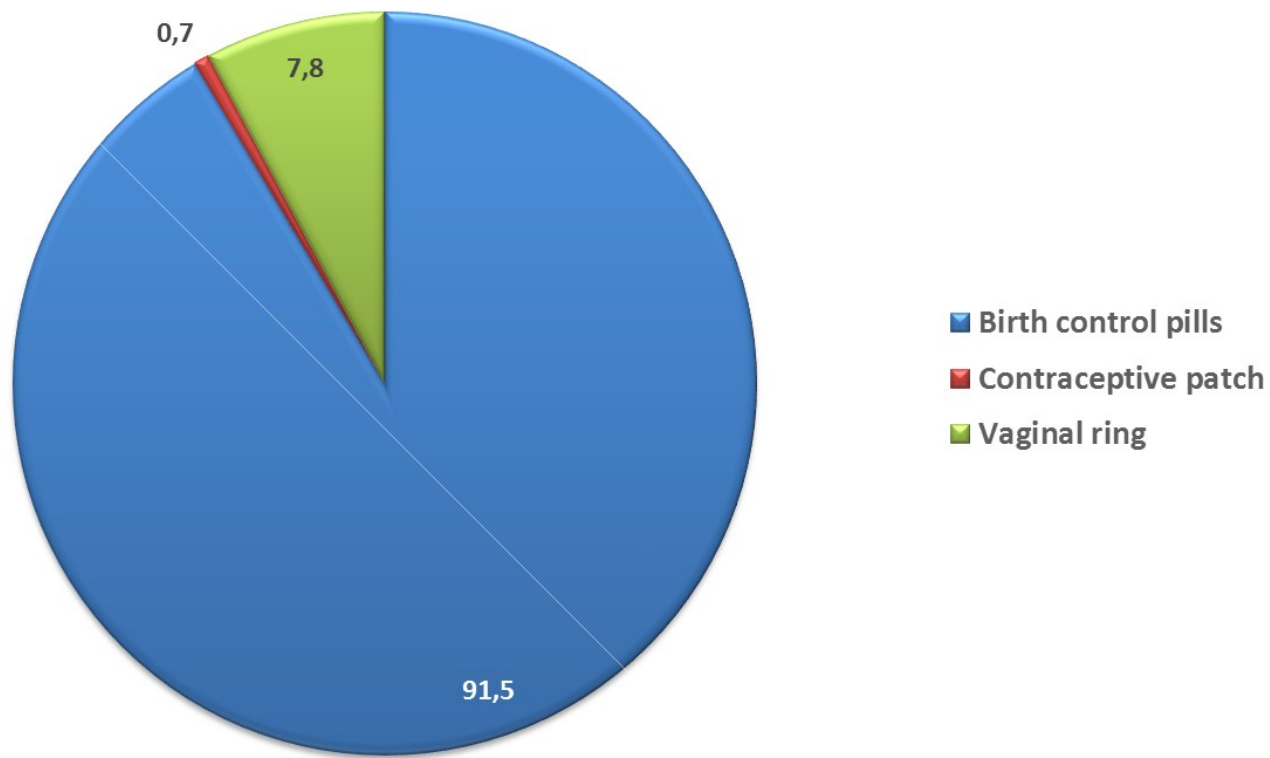


**91 % of prescribed hormonal contraception in 2014 was in a form of a pill.**

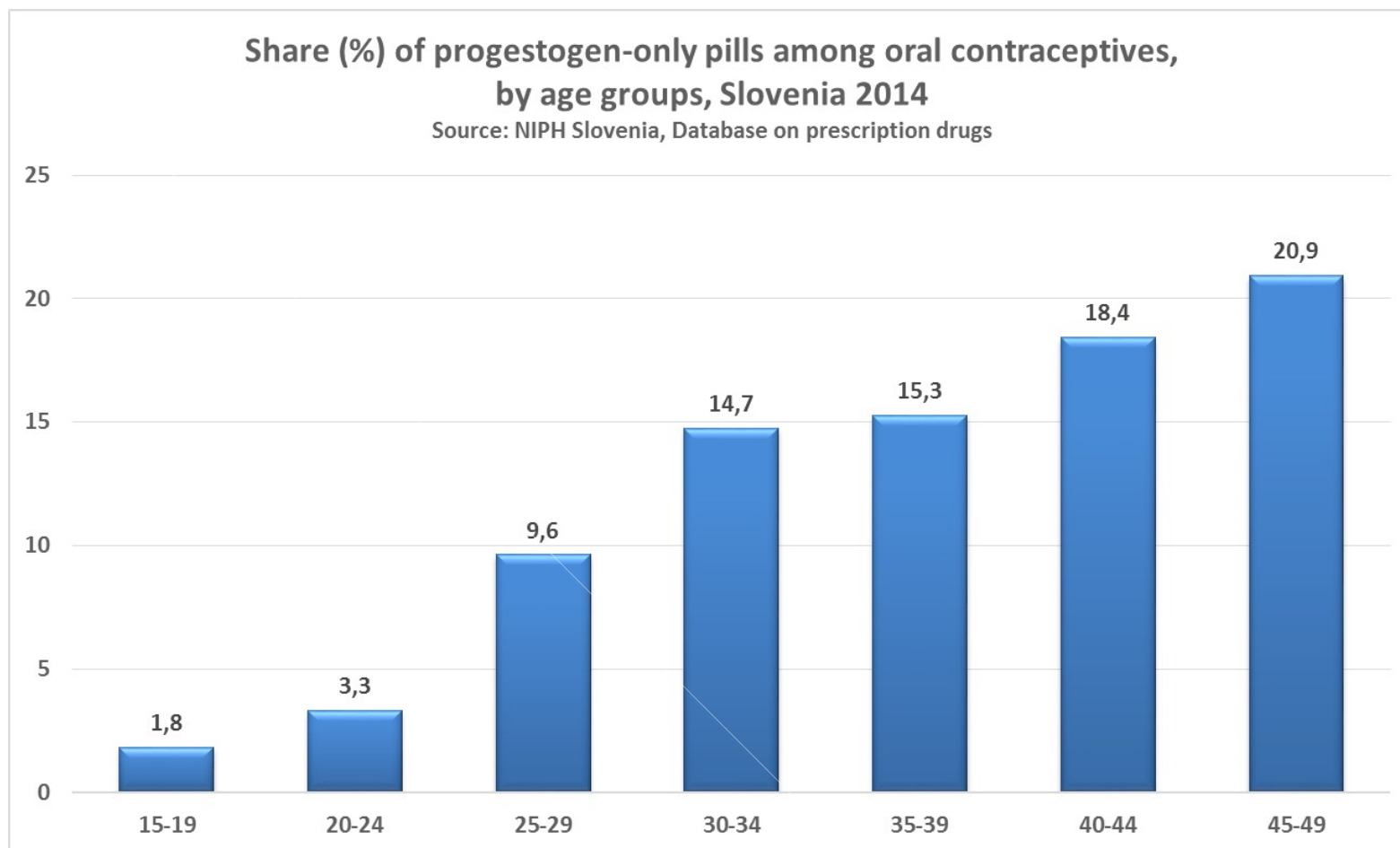


**Share (%) of different hormonal methods of birth control, Slovenia, 2014**

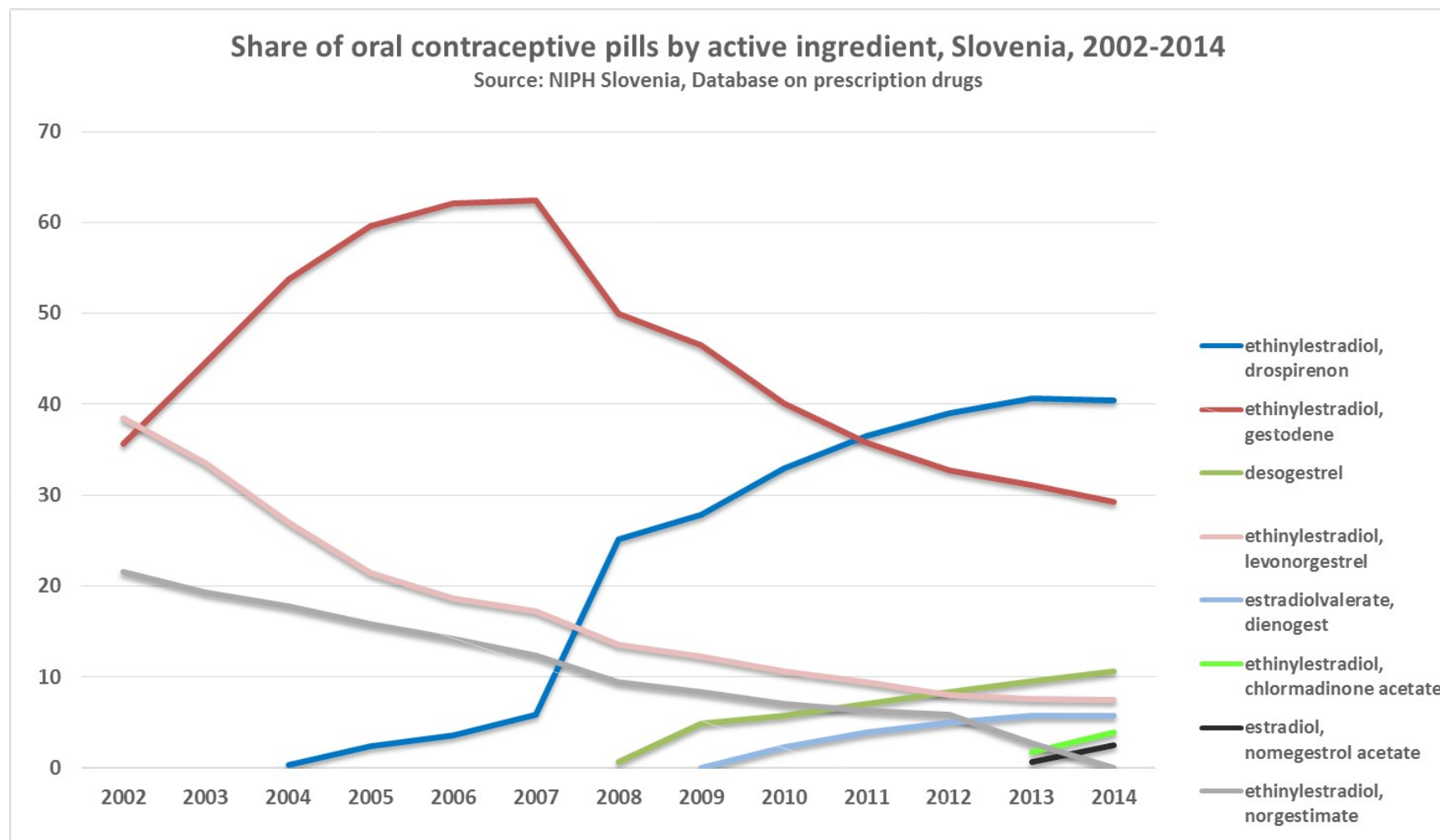
Source: NIPH Slovenia, Database on prescription drugs



**In 2014 among prescribed contraceptive pills 89 % were combined hormonal contraceptives and 11 % progestogen-only pills (desogestrel – Cerazette®). Use of progestogen-only pills is increasing since their introduction at the market.**

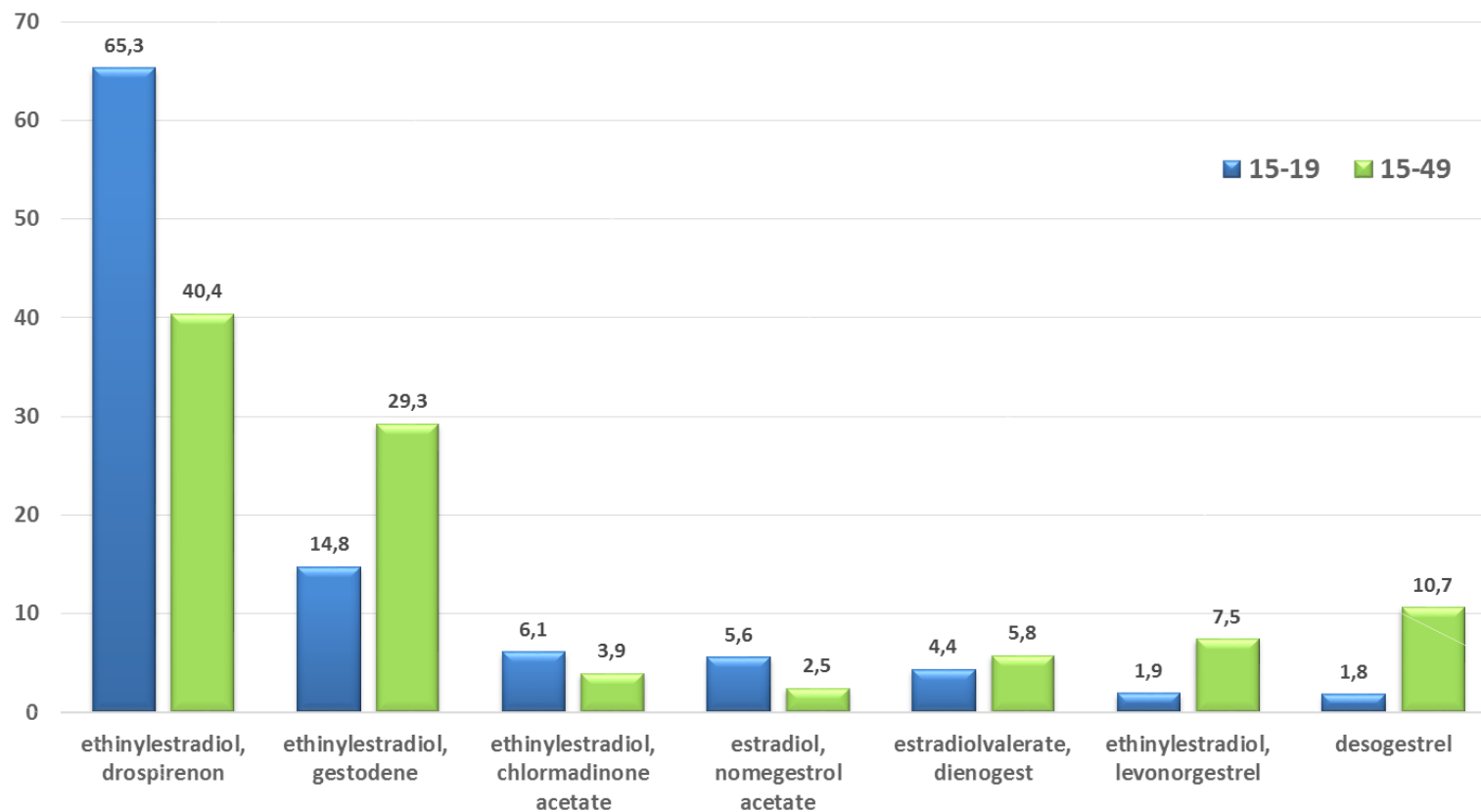


**In the last years, patterns of use of hormonal contraception are quickly changing. In 2014 most commonly prescribed contraceptive pills were a combination of ethinylestradiol and drospirenon (Yaz<sup>®</sup>, Yarina<sup>®</sup>, Yasminelle<sup>®</sup>, Daylette<sup>®</sup>, Daylla<sup>®</sup>) – 40 % of all contraceptive pills.**



## Share of oral contraceptive pills by active ingredient and age group, Slovenia, 2014

Source: NIPH Slovenia, Database on prescription drugs



# Other drugs with contraceptive effect

- Drugs with combination of ethinylestradiol and cyproterone acetate (anti-androgens, e.g. Diane 35<sup>®</sup>) – there were 10 users per 1000 women in reproductive age.
- Emergency contraceptives – 53 packings per 1000 women in reproductive age were sold in 2014 .

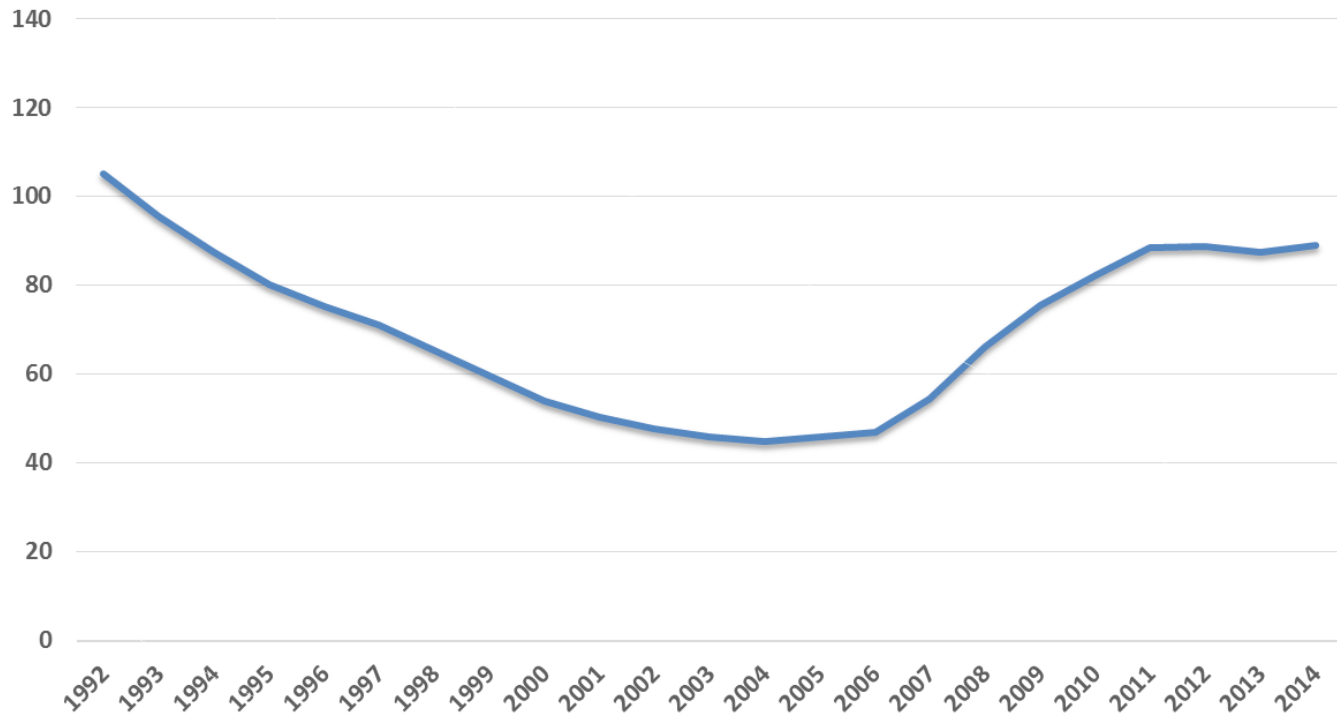


# Intrauterine contraception



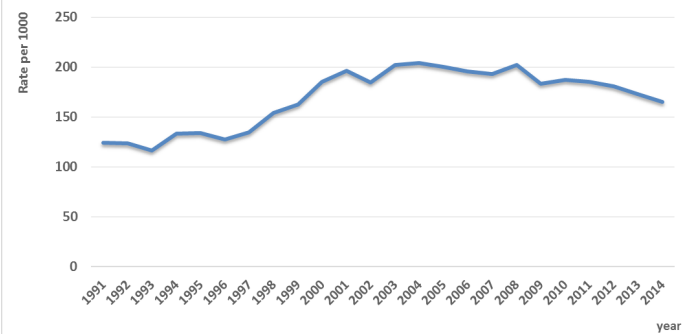
- It was the most wide-spread form of contraception in 1980s and at the beginning of 1990s in Slovenia, after that a decrease in number of users was observed.
- In the last decade intrauterine contraception is gaining its importance.
- Increasing use of intrauterine contraception was closely related to first hormonal IUD (intrauterine system Mirena®) becoming available free of charge for contraceptive use in 2007.
- Since 2014 there is a second hormonal IUD (Jaydess®) also free of charge available in Slovenia.
- Assuming that all women use IUD for five (Mirena®) or three years (Jaydess®) there are approximately 10 % of all women in reproductive age using this type of birth control.

Estimated IUD users per 1000 women, Slovenia 1992 - 2014



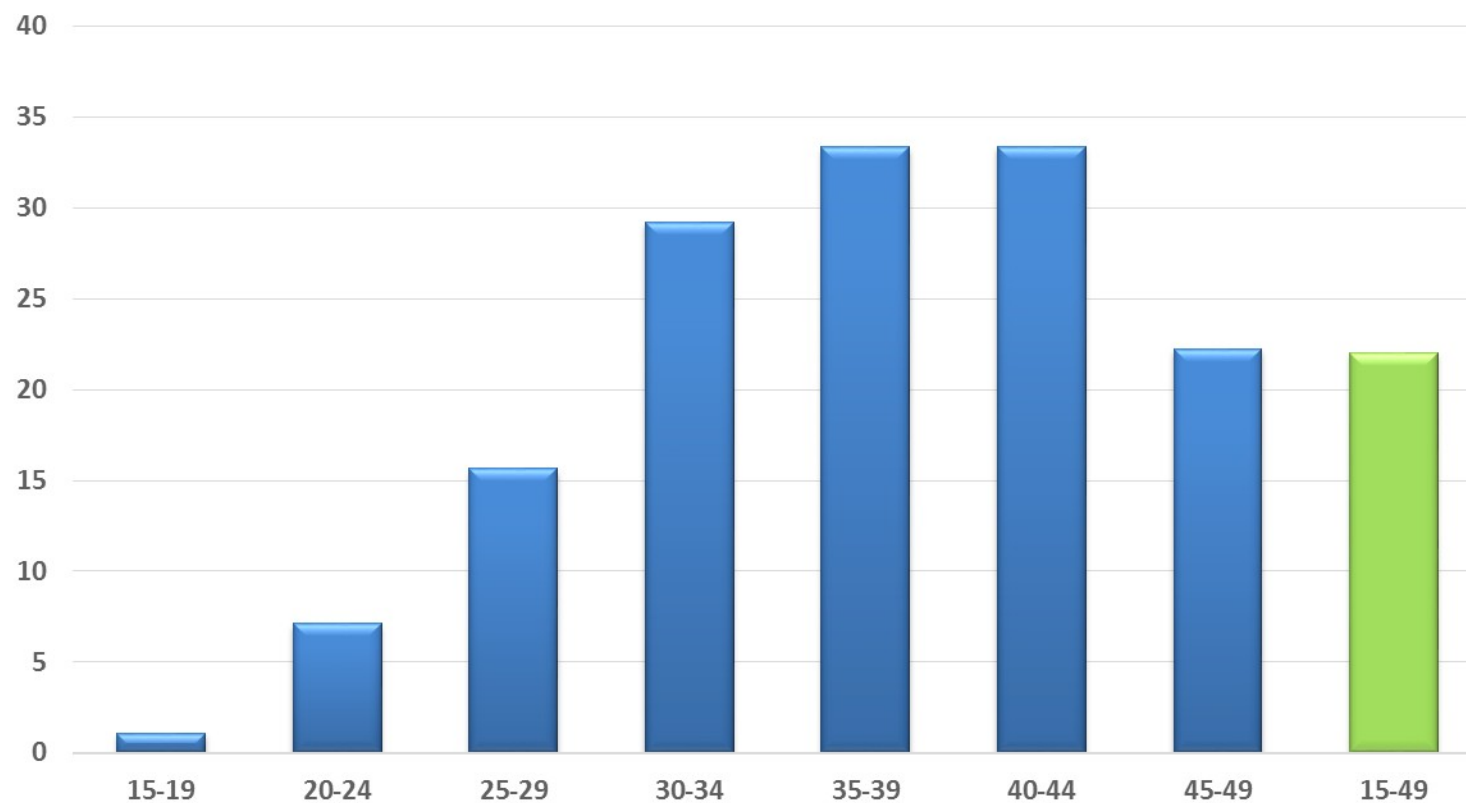
Hormonal contraception users (per 1000 women aged 15 - 44), Slovenia, 1991-2014

Source: NIPH, Database on prescription drugs



## Hormonal IUD prescriptions per 1000 women, by age, Slovenia 2014

Source: NIPH Slovenia, Database on prescription drugs





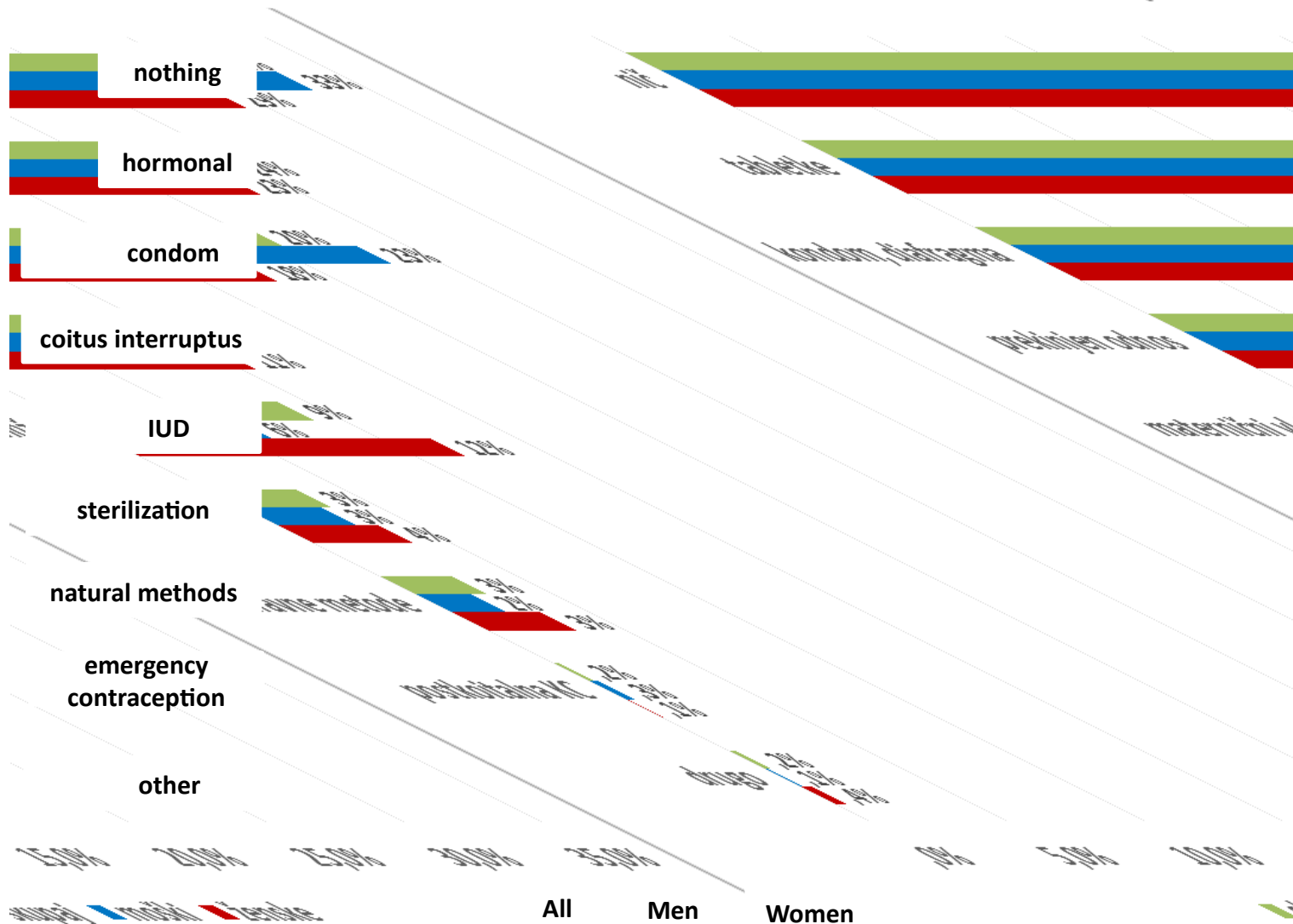
# Male and female sterilization



- They are quite rare in Slovenia:
  - In men there were 0,5 new sterilizations per 1000 men and in women there were 2,4 new sterilizations per 1000 women in reproductive age recorded in 2013.
- Mean age of women at the time of sterilization was slightly less than 40 years.
- This type of birth control is used by approximately 3 % of all pairs in reproductive age.

# Contraception use at last intercourse, Slovenia 2014

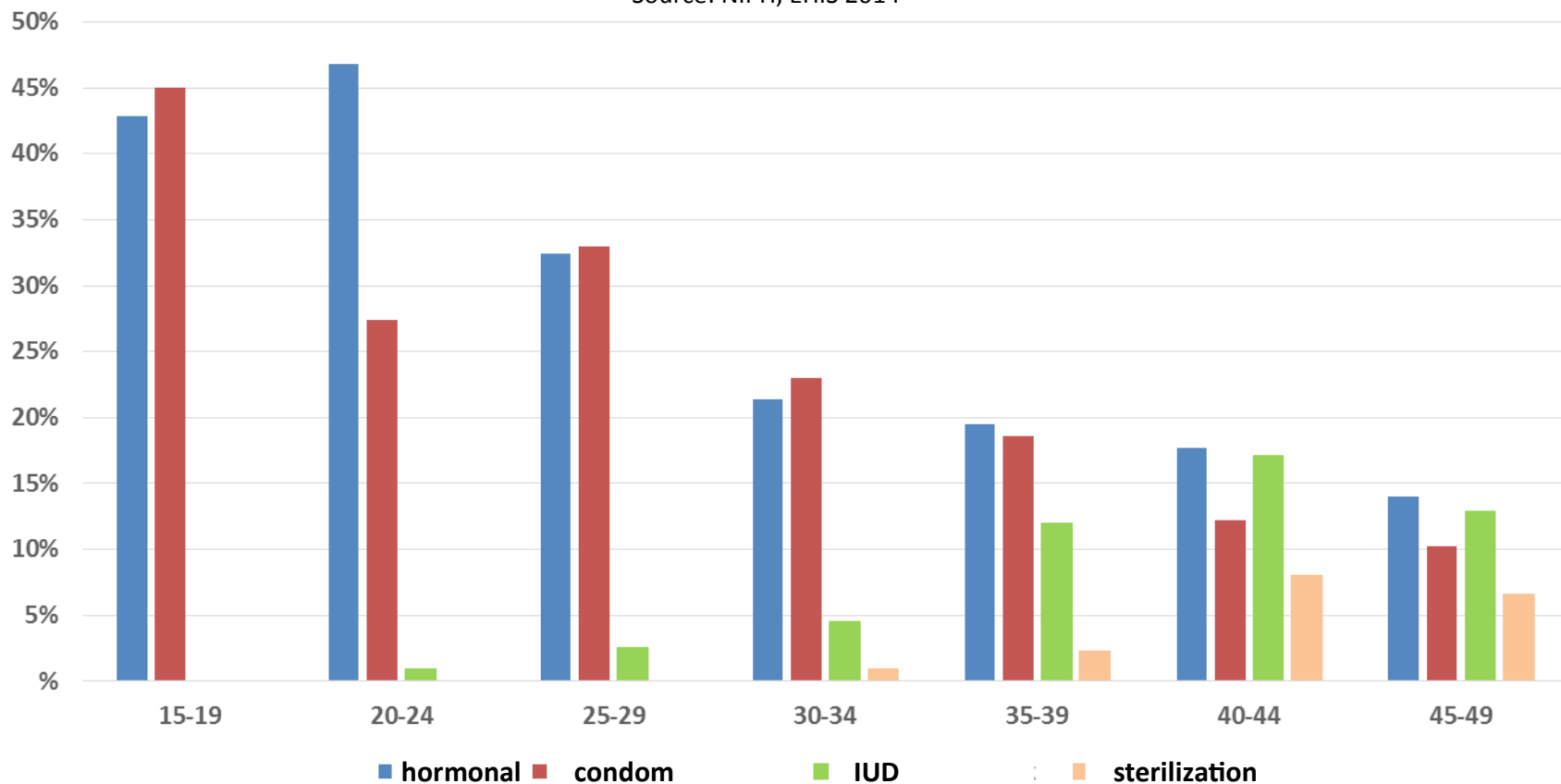
Source: NIPH, EHIS 2014



Comment: including only respondents who reported to have had sex in the last 4 weeks, are not pregnant or planning pregnancy and have not had hysterectomy.

## Use of selected types of contraception at last intercourse by age group, Slovenia 2014

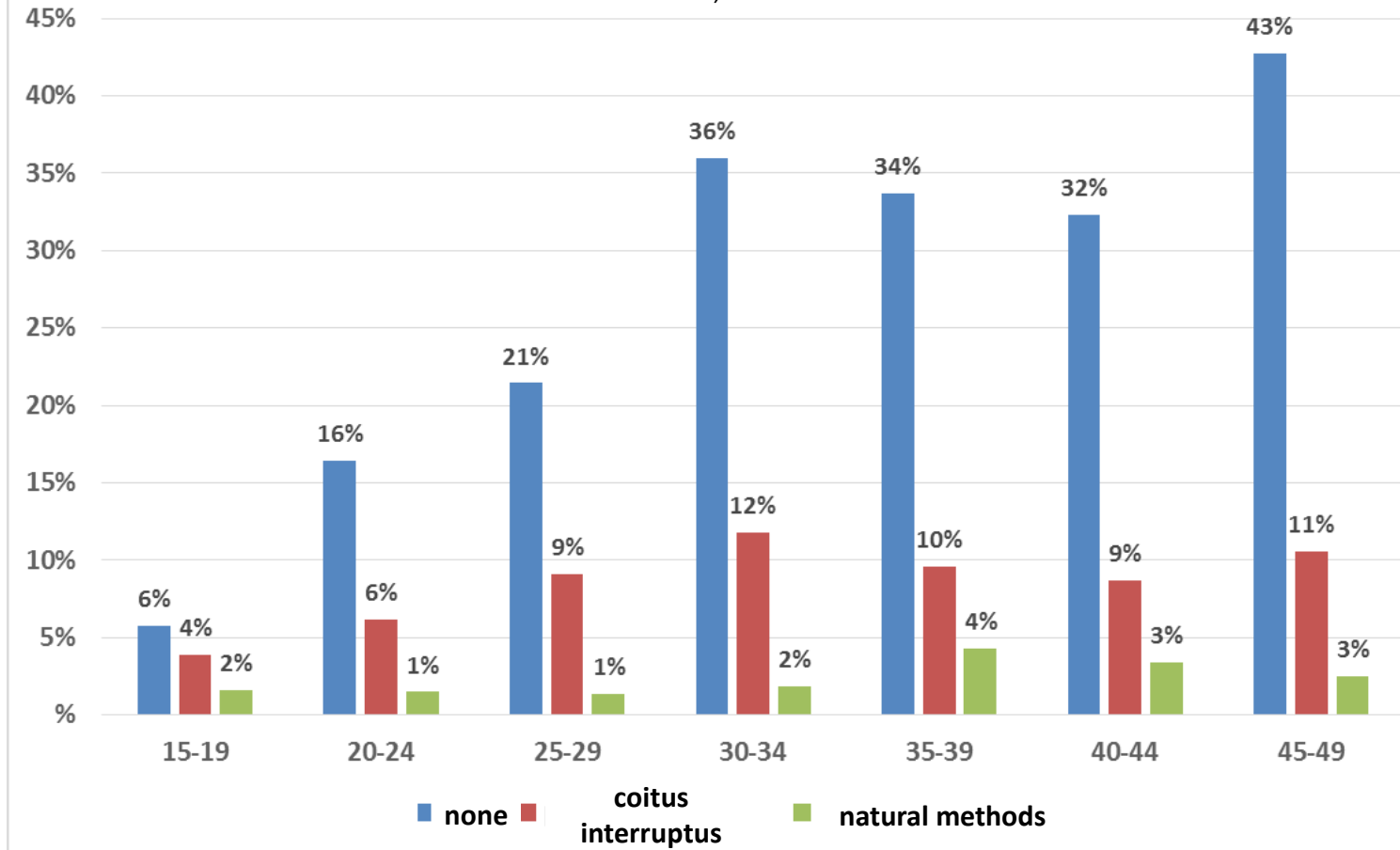
Source: NIPH, EHIS 2014



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## Use of selected types of contraception at last intercourse by age group, Slovenia 2014

Source: NIPH, EHIS 2014



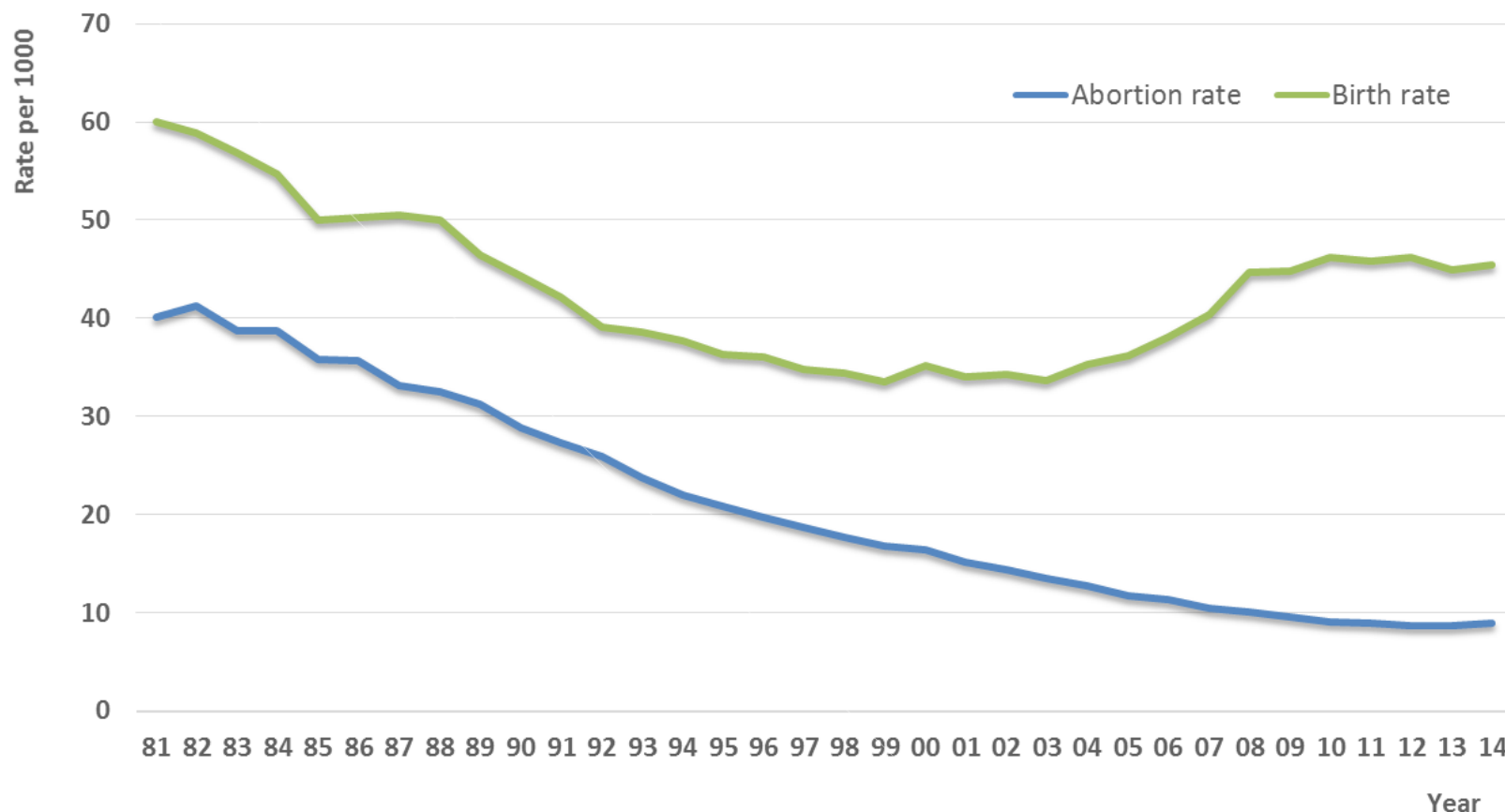
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# Induced abortion

- Knowledge about contraception, quality of family planning services and access to contraception all influence induced abortion rate.
- In Slovenia legislation regarding induced abortion was adopted in 1977 and has not changed since then. Induced abortion is available until gestational week 10 on woman's request and later only with the approval of a special committee.
- Induced abortion rate in Slovenia was declining for more than 30 years, but in recent years this trend is slowing down.
- Modern contraception use also influences birth rates which have changed significantly in the past decades. We experienced a major decline in number of births in 1980s and 1990s with a moderate increase in the last decade.

## Birth rate and induced abortion rate, Slovenia, 1981 - 2014

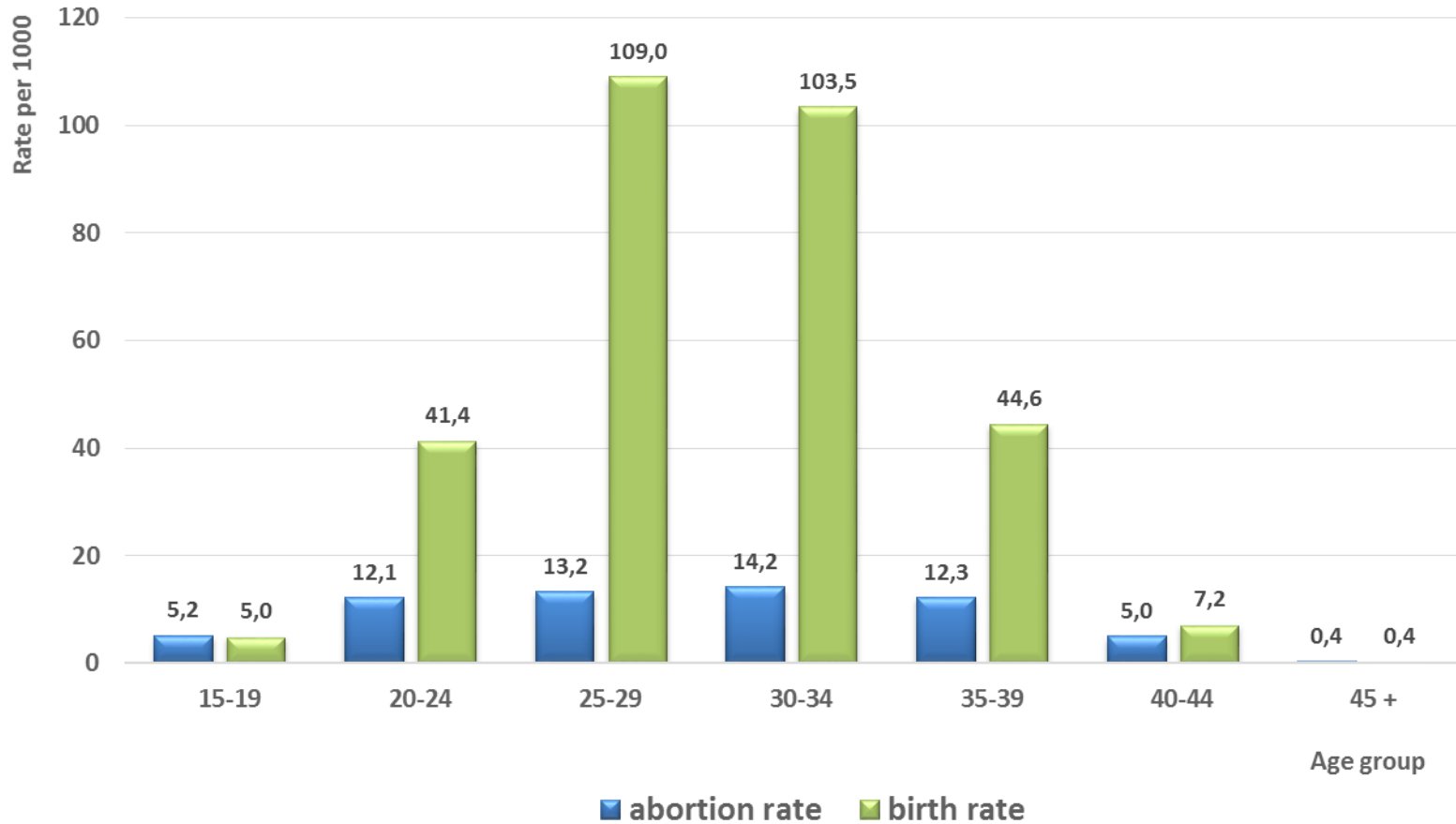
Source: NIPH Slovenia, Perinatal information system and Information system on fetal deaths



**Induced abortion rate in Slovenia has reached its peak in 1982 when there were 41 induced abortions per 1000 women in childbearing period. In 2014 it was 8,9/1000.**

## Age specific birth rate and induced abortion rate, Slovenia, 2014

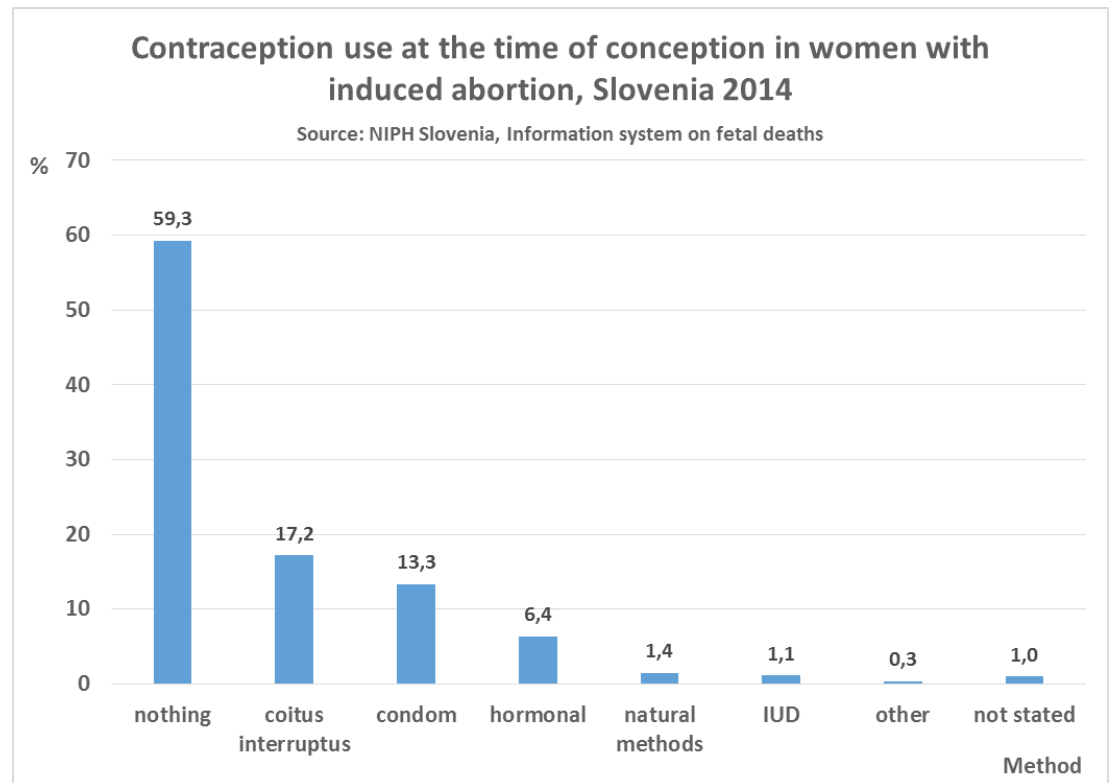
Source: NIPH Slovenia, Perinatal information system and Information system on fetal deaths



**The highest abortion rate is among women in the age group 25-34 years.**

# Some facts about induced abortions in Slovenia in 2014

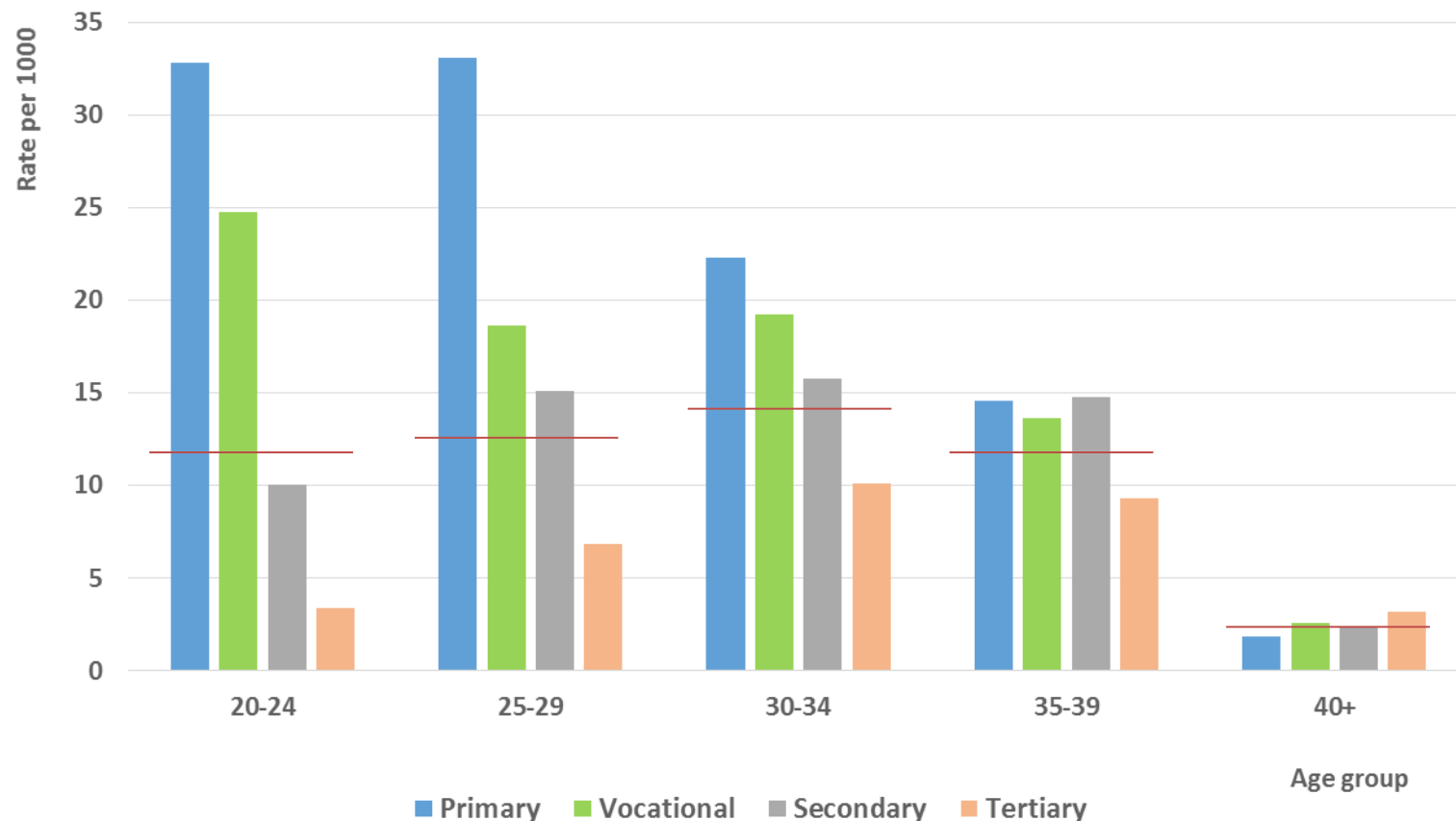
- More than 90 % were done before the 10<sup>th</sup> gestational week.
- 30 % of women had induced abortion before.
- 2/3 women already have children.
- In 2/3 of cases medical abortion and in 1/3 surgical abortion was performed.





## Induced abortion rate by educational and age groups, Slovenia, 2014

Source: NIPH Slovenia, Information system on fetal deaths and Statistical office of RS



**There are big differences in abortion rate between Slovenian regions**

**(In 2014: 5,2/1000 Goriška region, 11,2/1000 Podravska region) and between women from different socio-economic groups.**

Thank you for your attention and have a nice day!

