Follow-up Care and 6-month Continuation Rates for Long-acting Reversible Contraceptives in Adolescents and Young Adults: A Retrospective Chart Review

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STUDY OBJECTIVE: Describe follow-up care patterns and continuation rates during the first 6-months after initiating a long-acting reversible contraceptive device (LARC) among adolescent and young adult (AYA) women. DESIGN: Retrospective chart review among patients who had an intrauterine device (IUD) or subdermal implant placed between January 2015 and December 2016. SETTING: Urban adolescent specialty care clinic. PARTICIPANTS: Women ages 13-23 years. MAIN OUTCOME MEASURES: Follow up encounters were defined as scheduled and unscheduled phone calls, outpatient clinic visits, or emergency department visits during the 6-months after device placement. Continuation was defined as not having the device removed or expelled during the 6-months following initiation. Frequencies were calculated, and logistic regression was used to determine predictors of follow-up encounters and continuation. RESULTS: Among the 177 patients, 180 LARC devices were placed. Most were 13-17 years (56%), non-Hispanic Black (64%), publicly insured (57%), and had an IUD placed (57%). The majority (86%) had >1 clinical encounter during the 6-months: 70% attended a scheduled encounter and 53% had an unscheduled encounter. Half (45%) attended the scheduled 2-week office visit; only 6% attended the 6-month office visit. The 6-month LARC continuation rate was 92% (n=166), with most discontinuations among IUD users (n=12; 7%). CONCLUSIONS: LARC continuation rates were high in our study population. Most AYA women have at least one follow-up encounter in the 6-months following LARC placement. Clinical practices should be prepared to address issues that arise during follow-up encounters, whether in-person or by phone.

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