

Diagnosing STIs

	Microbiology sample	Blood test	Clinical findings
Chlamydia <i>Chlamydia trachomatis</i>			
Gonorrhoea <i>Neisseria gonorrhoea</i>			
Genital warts <i>Human papilloma virus</i>			
Genital herpes <i>Herpes simplex virus</i>			
Syphilis <i>Treponema pallidum</i>			
HIV <i>Human immunodeficiency virus</i>			
Hepatitis B			
TV <i>Trichomonas vaginalis</i>			
Pubic lice <i>Pthirus pubis</i>			

UKMEC scenarios

Write down which category of UKMEC applies to each method of contraception for each woman

	IUD	IUS	Implant	Injection	POP	CHC
<p>Iris, age 33</p> <ul style="list-style-type: none"> No medical problems Is currently fully breastfeeding her 2-week-old Takes no medication Is not aware of any relevant family history Has never smoked Her BMI is 28 kg/m², BP 120/74 mmHg 						
<p>Adele, age 18</p> <ul style="list-style-type: none"> Has asthma for which she uses inhalers She does not take any other medication Is not aware of any relevant family history Smokes 10 cigarettes/day Her BMI is 20 kg/m², BP 90/60 mmHg 						
<p>Mei, age 36</p> <ul style="list-style-type: none"> No medical problems Does not take any medication Her mother had a deep vein thrombosis aged 40 Smokes 10 cigarettes/day Her BMI is 21 kg/m², BP 128/66 mmHg 						
<p>Katie, age 26</p> <ul style="list-style-type: none"> No medical problems Mentions that she has been experiencing intermittent migraines. She describes them as a throbbing pain over her right forehead and behind her right eye. Before the pain starts she loses part of her vision which later recovers. She takes ibuprofen for these migraines and does not take other medication Stopped smoking 2 years ago. Her BMI is 39 kg/m², BP 130/80 mmHg 						

	IUD	IUS	Implant	Injection	POP	CHC
Fatima, age 40 <ul style="list-style-type: none"> • Just had a mastectomy for breast cancer and is due to start chemotherapy • Has no other medical problems • Does not take any medication • Her grandmother also had breast cancer • Has never smoked • Her BMI is 27 kg/m², BP 133/72 mmHg 						
Priya, age 18 <ul style="list-style-type: none"> • Ulcerative colitis without malabsorption • Takes Azathioprine • Is not aware of any family history • Has never smoked • Her BMI is 26 kg/m², BP 100/66 • Was treated for chlamydia 6 months ago and has not had sex since she was treated 						

How to use some contraceptive methods

	How often is it taken?	Breaks?	When is it late?
COC			
Patch			
Ring			
POP			
Injection			

Emergency Contraception

The Essentials

1. What are the two basic ingredients of a pregnancy?

2. How long can sperm survive for?

3. What day in her cycle is the earliest a woman is expected to ovulate?

4. What day in her cycle is the earliest a woman with a 26- to 30-day cycle is expected to ovulate?

5. When do you need to start contraception after having a baby?

6. How long can an unfertilised egg survive for?

7. How long does it take a fertilised egg to implant?

8. How long after unprotected sexual intercourse (UPSI) should you do a pregnancy test?

9. Are there any days in a woman's cycle when UPSI is safe and EC is not needed?

Pregnancy Risk Assessment

1.

2.

3.

4.

Emergency Contraception

1. Rank the three methods of emergency contraception in terms of effectiveness:

Levonorgestrel (LNG)

Ulipristal (UPA)

Copper IUD

2. How do the following methods work?

a. Levonorgestrel

b. Ulipristal

c. Emergency IUD

3. Up to when can you give/fit:

a. Levonorgestrel

b. Ulipristal

c. Emergency IUD?

4. Which of the following are contraindications for taking Ulipristal?

a. Previous blood clot

b. Previous stroke

c. Severe asthma controlled by steroids

d. Diabetes

5. Which of the following drugs reduce the effectiveness of oral emergency contraception?

a. Some anti-retrovirals

b. Older anti-convulsants (carbamazepine, phenytoin, topiramate)

c. St John's Wort

d. Rifampicin

6. A woman can take emergency oral contraception more than once in a cycle

True

False

7. If there is a previous pregnancy risk this cycle you can still give:

a. Levonorgestrel

True

False

b. Ulipristal

True

False

8. Hormonal contraception can be started immediately after taking:

a. Levonorgestrel

True

False

b. Ulipristal

True

False

EC clinical scenarios

1. **Tara**, age 19, requests a pregnancy test. She had sex for the first time with a new male partner 3 weeks ago, then none until 2 days ago with the same partner. She did not use any contraception.
Her LMP started 9 days ago and was normal for her. She has a regular bleed every 4 weeks.

For which episode(s) of sex is emergency contraception required? Would a pregnancy test be useful in this case?

Which method(s) of emergency contraception, if any, could you offer her? If any are not appropriate state why not.

- Levonorgestrel
- Ulipristal
- IUD

Which would be the most effective method for Tara?

What other issues do you need to discuss with her?

2. **Kayleigh**, age 18, comes for advice before going travelling on her gap year. You ask her about contraception and she tells you that she has had unprotected sex with her boyfriend on days 4, 7 and 13 of this cycle.
Today is day 15. She has a slightly irregular cycle, between 27 and 30 days long.

Which method(s) of emergency contraception, if any, could you offer her? If any are not appropriate state why not.

- Levonorgestrel
- Ulipristal
- IUD

What is the latest day she could have an IUD inserted as emergency contraception this cycle?

What other issues do you need to discuss with her?

3. **Becki**, age 27, had her first baby 6 weeks ago and is asking for contraception. You discover that she has had sex once since delivery, 3 days ago. She has not had a period since her post-delivery bleeding stopped. She is not breastfeeding.

Which method(s) of emergency contraception, if any, could you offer her? If any are not appropriate state why not.

- Levonorgestrel
- Ulipristal
- IUD

Would it make any difference if she was breast feeding?

What follow-up is necessary?

What additional issues should be considered in this consultation?

4. **Zeinab**, age 17, had UPSI 10 days ago and took Levonorgestrel the following day. She returns having had sex yesterday evening, on day 14 of her 28-day cycle.

Which method(s) of emergency contraception, if any, could you offer her? If any are not appropriate state why not.

- Levonorgestrel
- Ulipristal
- IUD

Which would be the most effective method for Zeinab?

What other issues do you need to discuss with her?

Role Play

Following the exercise, write down

One thing that you did well

One thing that you would do differently next time
