

Publication Summary



Long Acting Reversible Methods of Contraception (LARC) – Key Clinical Indicator

Year ending 31st March 2012

Publication date – 25th September 2012



About this Release

This is the fifth publication of the long acting reversible methods of contraception (LARC) Key Clinical Indicator (KCI) which monitors the proportion of women of reproductive age using long-acting reversible methods of contraception in each NHS board.

Key Points

- The uptake of LARC has shown a decrease.
- The uptake of very long acting methods (the contraceptive implant, IUDs (the coil) and Mirena[®] (IUS)) in Scotland decreased from 60.6 per 1000 women aged 15-49 in 2010/11 to 55.4 in 2011/12.
- Half (7 out of 14) of NHS boards have increased their uptake of these very long acting or 'lasting' methods.
- The contraceptive implant continues to be the most popular method of LARC.

Background

[Respect and Responsibility: Strategy and Action Plan for Improving Sexual Health](#)

published in 2005, states that the full range of contraceptive methods should be available to all patients. In typical use, the 'long-acting' or 'lasting' methods of contraception have a lower failure rate than alternative reversible methods (for example, the contraceptive pill or condoms).

The NICE guideline on LARC for England and Wales published in October 2005 suggested that increased uptake of long-acting methods would reduce unintended pregnancy and be cost-effective for the National Health Service. Although this guideline was written for England and Wales, the findings are equally pertinent for Scotland.

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Further Information

Further information can be found in the [Full Publication Report](#) or on the [ISD website](#)

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