

Publication Summary



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

Year ending 31st March 2014

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About this Release

This publication reports on the proportion of women of reproductive age using long-acting reversible methods of contraception (LARC) in each NHS board.

Key Points

- The total uptake of very long acting methods (the contraceptive implant, IUDs (the coil) and Mirena[®] (IUS)) in Scotland increased slightly from 61.9 per 1,000 women aged 15-49 in 2012/13 to 62.1 per 1,000 women in 2013/14.
- The contraceptive implant (Nexplanon[®]) is the most popular method of LARC and uptake in 2013/14 shows it has continued to rise.
- Use of Mirena[®] Intrauterine System (IUS) has continued to rise.
- IUDs (the coil) remain the least utilised and have shown a slight decrease in the dispensing rate from last year.
- Uptake of these very long acting or 'lasting' methods has increased in eight NHS boards.

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

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