

Appendix A: Answer Key for POP Case Studies

Answers to Question Set A

1. How do POPs prevent pregnancy?

POPs work primarily by making the cervical mucus thick, which prevents sperm from entering the uterus and fertilizing an egg. They also work by preventing the release of eggs from the ovaries.

2. What are some of the advantages of taking POPs?

- They are very effective contraception.
- Fertility returns quickly after stopping use of the pills.
- They can be stopped at any time without a provider's help.
- They do not interfere with sex.
- Painful cramping and heavy bleeding during periods is reduced.
- They provide protection from symptomatic PID.
- Safe for breastfeeding women and their infants.
- Safe for women who cannot use estrogen.

3. What are some of the limitations of taking POPs?

- Some users experience side effects.
- The pills must be taken correctly and consistently at the same time each day; otherwise they are not as effective.
- They provide no STI/HIV protection.
- On extremely rare occasions, complications may occur.

4. How does breastfeeding affect her eligibility to use POPs? What additional information about the effect of POPs on breastmilk should you offer to breastfeeding women who are considering POPs?

- Use of POPs during breastfeeding has no impact on the quantity or quality of breastmilk or the duration of lactation. It also has no impact on the health of the breastfed infant. As a result, the WHO medical eligibility categories regarding POPs for breastfeeding women are as follows:

Condition: Breastfeeding	WHO Category	Category Explanation
< 6 weeks postpartum	2	Generally, use the method
> 6 weeks to < 6 months postpartum	1	Use the method
≥ 6 months postpartum	1	Use the method

- Layla is able to start POPs anytime.

Answers to Question Set B

1. What information should you discuss with Layla?

- Make sure she understands how to take the pills and the importance of taking a pill every day—it is necessary for the pill to be effective and it will reduce the likelihood of spotting.
- Link pill-taking to daily activities to improve compliance (e.g., take the pill every evening just after dinner or before going to bed).
- Discuss what to do if she misses pills, possible side effects, and warning signs of rare complications of POPs.

2. What should you tell her about missing her pills or starting a new pack late?

Carefully review these instructions with Layla and provide her with a client brochure, if available, that explains how to use pills.

- Take one pill each day at the same time each day
- You can reduce nausea by taking a pill with food or right before going to bed.
- If you miss a pill or are more than three hours late taking it, or start a pack late, and you are not breastfeeding or are breastfeeding and your menses has returned:
 - Always take a pill as soon as you remember and continue taking one pill each day. Depending on when you remember that you missed a pill(s), you may take two pills on the same day—one at the moment you remember and the other at the regular time—or even at the same time.
 - Use a backup method or abstain from sex for two days.
 - If you had unprotected vaginal intercourse in the last 5 days, consider taking emergency contraception
- If you miss a pill or are more than three hours late taking it, or start a pack late, and you are breastfeeding:
 - Always take a pill as soon as you remember and continue taking one pill each day. Depending on when you remember that you missed a pill(s), you may take two pills on the same day—one at the moment you remember and the other at the regular time—or even at the same time.
 - No need for a backup method.

3. How will you help Layla prepare for possible side effects?

- Review the possible side effects with her.
- Remind her that side effects are not signs of illness and they usually lessen or diminish with time; that they are common but not all women have them.
- Tell her to return to the clinic if she has any questions or concerns about side effects.

4. What will you tell her about follow-up and resupply?

- Instruct Layla to return anytime she has questions or concerns or if she experiences any warning signs of complications. If she experiences any of these symptoms, she should stop taking the pills, use a backup method, and return to the clinic immediately.
- Tell her it is important to return for resupply before she runs out of pills.

Answers to Question Set C

1. What tool would you select to help screen for medical eligibility?

The *Checklist for Screening Clients Who Want to Initiate Progestin-Only Pills (POPs)* identifies clients who have conditions or characteristics that prevent the safe use of POPs.

1. Do her current medical conditions affect her eligibility for POPs?

No, her current health conditions have no effect on her eligibility for POPs.

- *Antibiotic treatment:* Antibiotics taken for a urinary tract infection would not have any effect on POP effectiveness. The only two antibiotics which may diminish the effectiveness of POPs are rifampicin and rifabutin, which are used for tuberculosis treatment.
- *Anemia:* Presence of anemia is classified by WHO medical eligibility criteria as Category 1 for POPs (use without any restrictions).

Answers to Question Set D

1. What information should you gather from Layla?

- Ask probing questions and make detailed notes about the side effects that Layla is experiencing to determine the severity of the bleeding irregularities, headaches and nausea to ensure that these are not caused by underlying problems or that she has developed migraines with aura.
- Check if she is taking pills consistently and correctly and ask about the time of intake.

2. How will you address Layla's concerns?

2. First, reassure Layla that mild headaches, nausea, and spotting are normal side effects of POPs, are not harmful or signs of illness and usually diminish over time.
 3. Reassure her spotting is a normal side effect of POPs. Other causes of spotting include missed pills, taking pills at a different time each day, vomiting or diarrhea, or taking anticonvulsants or rifampicin.
 4. To reduce spotting, advise Layla to take pills at the same time each day, perhaps with the evening meal or at bedtime, which will also reduce nausea. Inform her that taking pills in the morning or on an empty stomach may increase nausea.
- If the headaches bother her, she may use aspirin, ibuprofen, paracetamol, or other pain relievers.
 - If the nausea or headaches continue to persist and are bothersome, she may try using another formulation of POPs, or you could help her choose another contraceptive method. Now that she is no longer breastfeeding, she has more options for methods.
 - Remind her to return immediately if headaches are preceded by a bright area of lost vision in one eye (aura).

3. What information would you give her about continued POP use now that she is no longer breastfeeding?

- POPs are most effective in breastfeeding women. Once a woman stops breastfeeding, POPs are less effective than other hormonal methods of family planning. If women are happy with POPs as their family planning method, they can continue using the method, but should be counseled that it is even more important to take the pill at exactly the same time each day. She may also return to the clinic for a new method.

Note: The recommendations provided in the Answer Key comply with the guidance in *Family Planning: A Global Handbook for Providers (2017 update)*. If national guidelines are available

and provide guidance on these topics, participants should follow the recommendations in the national guidelines.