Appendix E: Answer Key for COCs Module
Applied Learning Case Studies

Note to the Facilitator: This section should not be graded as part of the post-test. It is an extra section, which will give you an indication of whether the trainee is able to apply what he/she has learned.

Case 1

Ester is a healthy 27-year-old mother of a six-month-old infant. She has been exclusively breastfeeding, and her menses have not yet returned. She is planning to start giving her baby supplementary foods this week and begin weaning the baby off breast milk. Ester has come to the clinic and asks about COCs. She is somewhat informed about them and wants to start using them as soon as possible.

1a) Is Ester eligible to initiate COCs? Why or why not?

Yes, Ester is healthy and her baby is already 6 months old, so she doesn't have any contraindications for COCs. Also, a provider can be reasonably sure that she is not pregnant because of the contraceptive effect of LAM.

1b) What are the key counseling messages you should share with Ester?

Reassure her about the safety of COCs and explain that effectiveness depends on the client's ability to take the pills on schedule. Explain how COCs work, side effects, and signs of complications. Provide instructions on how to take COCs and what to do if pills are missed. Explain when to return.

Case 2

Joyce is a 25-year-old mother of two children; her youngest child is 11 months old. Joyce has been using COCs for two months. She returns to the clinic for resupply and complains of mild headaches. Joyce quit smoking before her last pregnancy, but she has recently begun smoking again, as many as five cigarettes a day. Other than the headaches, she has no health problems.

2a) Is Joyce eligible to continue COC use? Why or why not?

Yes, Joyce does not have any conditions that would prohibit her continued COC use, although some follow-up discussion is needed. Mild headaches and being young while smoking should not prevent her from using COCs—unless she finds headaches unacceptable and wants to discontinue.

2b) Describe your course of action.

Reassure Joyce that mild headaches may be experienced by women using COCs. They are not harmful and not signs of disease. Remind her that headaches usually diminish after the first few months of COC use. Advise her to try aspirin, ibuprofen, or paracetamol if the headaches bother her. If the mild headaches continue to be bothersome, she can try a different formulation of COCs or choose another method. Advise her that if headaches become severe, she should come back for evaluation. Also discuss harmful effects of smoking on general health and encourage her to quit.