**Family planning method that 'raises risk of HIV'**

**The eye of the storm:** The World

Health Organisation has convened a

meeting to discuss the findings of a

research that links popular hormonal

contraceptive Depo-Provera to

a higher risk of HIV transmission

between couples. Health experts,

however, say there is no proven

scientific connection in the claims,

and that somebody is taking the

condom business a bit too far. Will

pharmaceutical giant Pfizer survive

this onslaught? What about the

millions of women on the drug?

**BY EDITH FORTUNATE**

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A recent **report that linked**

injectable family planning

**methods to increased HIV**

inf**ection "was nothing but**

**a ploy by condom manufacturers to**

**sell more of their products", health**

experts have said.

The report, published in the health

**journal *Lancet Infectious Disease,***

**indicates that continued use of**

**Depo-Provera exposes women to a**

higher risk of HIV infection, and that

**the best way to shut out the virus is**

to go the dual protection way - that

**is, to use Depo\*Provera, a hormonal**

**contraceptive, and condoms at the**

same time.

**Health experts, however, have**

**dismissed the recommendations of**

**the report, saying there is no proved**

scientific link between HIV and Depo**Provera.**

Prof Joseph Karanja, chairperson

of Kenya Obstetrician Gynaecologist

Society (KOGS), told *DN2* last week

**that hormonal contraceptives are still**

**safer than condoms, and that "unless**

**there is a scientific link (to the claims**

**advanced in the report), I do not see**

**any cause for worry".**

**When you are prone to HIV:' Prof**

Karanja added, "you definitely will

**have to use condoms and hormonal**

**contraceptives at the same time. This**

**is what we call 'dual protection' because**

**condoms alone are not enough**

**surety against unwanted pregnancies,**

even though they are highiy effective

**in the prevention of transmission of**

**diseases?'**

**Countries where pregnancy rates**

are highest are also ravaged by HIV,

**the virus that causes AIDS. So the evi**dence suggesting that the injectable

**contraceptive has biological proper·**

**ties that may make women and men**

**more vulnerable to HIV infection is**

particularly troubling.

**Injectable hormones are very popular. About 12 million women between**

the ages of 15 and 49 in sub-Saharan

**Africa, roughly 6 per cent of all women**

**in that age group, use them.**

**While the study involved only**

**African women, the *New York Times***

**reported, Scientists said biological**

effects would probably be the same

**for all women. But they emphasized**

**that concern was greatest in Africa**

**because the risk of HIV transmission**

**from heterosexual sex was so much**

**higher there than elsewhere. 'The**

best contraception today is injectable

**hormonal contraception because you**

**don't need a doctor, it's long-lasting, it**

**enables women to control timing and**

spacing of birth without a lot of fuss

andtravel;' said Isobel Coleman, direc**tor**

**of the women and foreign policy**

**progranune at the Council on Foreign**

**Relations in the US. It is now proven**

**that these contraception are helping**

**spread the AIDS epidemic, we have a**

**major health crisis on our hands."**

**The study, which several experts**

said added significant heft to previous

**research while still having some limita**tions,

has prompted the World Health

**Organization to convene a meeting in**

**January to consider if evidence is now**

**strong enough to advise women that**

**the method may increase their risk of**

getting or transmitting HIV.

**uWe are going to re-evaluate WHO's**

**clinical recommendations on contra**ceptive

use;' said Mary Lyn Gaffield,

**an epidemiologist in the World Health**

**Organization's department of reproductive**

**health and research.**

**Before the meeting, scientists will**

**review research concerning hormonal**

**contraceptives and women's risk**

**of acquiring HIV, transmitting it to**

**men, and the possibility that hormonal contraceptives accelerate HIV's**

**severity in infected women, *The New***

***York Times* reported.**

**"We want to make sure that we warn**

**when there is a real need to warn, but**

**at the same time we don't want to come**

up with a hasty judgment that would

**have far-reaching severe consequences**

**for the sexual and reproductive health**

**of women," she said. "This is a very**

**difficult dilemma!'**

The study involved 3,800 couples

**in Botswana, Kenya, Rwanda, South**

**Africa, Tanzania, Uganda and Zarn-**

It is important that all clients seeking family

**planning services are assessed with regard**

to their risk of STls, including HIV/Alds, re**membering**

**that all persons at risk of getting**

**infected with an STI are also at risk of getting**

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Aids is largely a sexually transmitted disease."

**- Prof** Joseph Mati

**In each couple, either the man**

**or the woman was already infected**

**with HIV. Researchers followed most**

**couples for two years, had them report**

**their contraception methods,**

and tracked whether the uninfected

**partner contracted HIV from the in**fected

partner.

**Pfizer, the manufacturer of the**

**branded version of the injectable,**

**Depo·Provera, declined to comment**

on the study, saying officials had not

**yet read it.**

**According to the Kenya Demo·**

graphic Health Survey (2008-2009),

**the current contraceptive prevalence**

**rate for married women aged between**

15 and 49 is slightly less than half (46

**per cent).**

**Modem methods of contraception**

are more commonly used 09 per cent)

than traditional methods (6 per cent).

Of the modem methods, injectables

**are the most widely used, while the**

rhythm method is the most popular

traditioual method.

In a paid-for advert in the papers last

week, Dr Shariff Shahnaz, the Director

**of Public Health, said his department**

was already advising dual protection

**methods to couples at a higher risk of**

**HIV infection. ....**

**"It is important to note that other**

than the male and female condom," Dr

140 ,000,000

Number of women globally who take hormonal contraceptive methods,

including daily oral pills and long-acting injectables. During the past two

decades, epidemiological and laboratory studies have suggested that hormonal

contraception could alter the risk of HIV-l acquisition in women. However, results

have been inconsistent. Only one study has addressed the effect of hormonal

contraception and risk of HIV-l transmission from women to men

The bad news

Hormonal contraceptives mlght have physiological actions beyond pregnancy

prevention. including possible risks of bone-density loss, cervical cancer, and

Chlamydia trachomatis. Clinical and laboratory studies have suggested possible

mechanisms by which hormonal contraception could influence HIV-' susceptibility

and infectiousness, including changes to vaginal structure.

That means...

Contraceptive counselling should be combined with HIV-' counselling and testing,

with joint scale·up of both approaches essential for optimisation of reproductive

health and HIV prevention choices for women and couples. Additionalty, as national

HIV prevention programmes begin to incorporate antiretroviral pre-exposure

prophylaxis, this new HIV prevention method could be offered to women using

contraceptives or their partners.

Sharif said, "none of other contraceptive

methods provide any protection

against HIV or STIs. This requires that

we provide condoms to couples who

are at a risk of HIV infection in addition

to another contraceptive method"

On whether it is true that injectable

methods heighten the risk of infection,

Dr Shariff said his department was

closely monitoring incoming scientific

evidence to confirm the association

of hormonal contraception and the

increased danger.

Dr Nelly Mugo, a research scientist

who was part of the team that produced

the report, told a gathering at

the Kenyatta National Hospital. Nairobi

that they had identified a potential

risk of the transmission of the HIV

virus through honnonal contraception,

especially injectables.

Non-hormonal or low-dose hormonal

contraceptive methods should be

considered for women with - or at

risk of - HIV, she added.

Dr Mugo's choice of venue for the

delivery of the message couldn't have

been better. The injectable method is

available in most government and

private hospitals at the affordable fee

of Shl00, and Kenyatta National Hospital

happens to be the biggest referral

hospital in this part of the world.

Such alarming news is likely to

dent Kenya's family planning efforts,

especially because many men do not

consider family planning to be their responsibility

and, as such, will scarcely

use the condom should their wives decide

to discontinue hormonal therapy

methods. "Most men, especially the

semi-literate and illiterate, advise their

wives against using family planning

methods," says Ann Njoki, a mother

of four. "They are totally against the

idea of contraception and some even

get violent when the issue is brought

up for discussion. The injectables

save us a lot of hustle since they are

discreet."

Prof ]apheth Mati, formerly of

University of Nairobi's Department

of Obstetrics and Gynaecology, says

there is no such thing as a contraceptive

that is 100 per cent safe, and that

every method has its own perils.

"Contraceptive practice is associated

with a variety ofrisks, depending

on the method used Family planning

service providers must assess the risk

of complications and side effects to

clients, and this assessment must be

based on the health history and nature

of the method chosen.

"It is important that all clients

seeking family planning services are

assessed with regard to their risk of

STIs, including *HIV/Aids,* remembering

that all persons at risk of getting

infected with an *BTI* are also at risk

of getting infected with HIV. It must

be realised that HIV/Aids is largely a

sexually transmitted disease;' says

Prof Mati.

If there is no scientific link between

HIVand injectable methods of contraception,

could this report have been a

ploy to sell more condoms?

No, not at all, according to researchers:

"The male or female condom is

among contraceptives that prevent

consumers from HIV and STIs, but it

is not as effective as hormonal contraceptives,

which provide a higher level

of prevention from unwanted pregnancies.

That is why we emphasize on dual

protection," says Prof Karanja.

Whatever the case, there is likely to

be a huge shift towards the prophylactic

sheaths in the coming months.

Already, Kenya has made a mark as

a ravenous consumer of condoms. A

consignment of 19 million condoms

lasted only six weeks at the start of

this year, for instance.

"The demand was eight million per

month, then it went to 12 million and

currently stands at around 20 million.

That gives you the number of encounters

people have in this country:' said

Dr Shariff in an interview at a time

when the country was experiencing a

shortage of the prophylactics.

As debate rages on whether the injectables

are safe, the government has

assured all that it is reviewing the situation

and will advise accordingly.

"After a planned review by the World

Health Organisation in]anuary 2012,

the Ministry (of Health) will update, if

necessary, our guidelines and update

our clients, providers and programmes

to reflect the new scientific evidence:'

says Dr Shariff.

As you wait for January, you will have

to live with one headache, and that

is whether the use of hormonal contraceptives

has inadvertently fuelled

the *HIV/Aids* pandemic - a "tragic"

situation, if true, according to Charles

Morrison, PhD, andKavila Nanda, MD,

both of Family Health International

in Durham.

Take this.••

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HIV prevention programmes begin to incorporate antiretroviral pre-exposure

prophylaxis, this new HIV prevention method could be offered to women using

contraceptives or their partners.

Women likely to opt

for other methods

Since the early 1980s,

there had been a steady

increase in family planning

use among married

women. The contraceptive

prevalence rate then

remained the same between

1998 and 2003, according

to the survey but increased

again between 2003 and

2008-09 at the same

momentum as between

1993 and 1998-

Analysis of trends by

method shows that the

increase in the overall

contraceptive prevalence

rate is fuelled by increased

use of modern methods.

Between 2003 and

2008-09, use of modern

methods increased from 32

to 39 per cent of married

women, while use of

traditional methods over

the same period decreased

from 8 to 6 per cent of

women. Use of female

sterilisation, IUD, implants

and pill remained fairly

constant between 2003 and

2008-09, while there was

a notable increase in use of

injectables.

**\_that contraceptive prevalence peaks among**

married women in the 30 to 34 age--group and

is Iowest for women aged 15 to 19 years? As

expectedJ female sterilisation is used more

commonly by women ages 40--49J while married

women at the peak of childbearing age (20-39)

are most 6kely to use injectables and pills. Use of

male condoms is particularly high among sexually

active unmarried women. Well. now you know.

THESE RESEARCH findin9s

fault Kenya's most effective

and commonly used family

planning method, though

authorities and experts in

the country claim there is

no scientific link to back the

evidence.

At least 22 per cent of

Kenyan women, both in

urban and rural areas, use

Depo-Provera, according

to the Kenya Demographic

Health Survey of 2009.

Contraceptive prevalence

peaks among married

women in the 30-34 age

group and is lowest for

women aged 15-19.

Already the government

has made its stand clear

that, for prevention of HIV

and STls. there is need tor

dual protection.

The Lancet report

threatens the gains made

by Kenya to ensure that

its citizens plan their

families well in line with the

Millennium Development

Goals.

It also threatens the

livelihood of mothers, as

births that are not properly

planned lead to matemal .

mortality.