

@-Newsletter

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Message from the ESC Secretary

Dear ESC members, dear colleagues,

I would like to thank those who renewed their ESC membership for 2005 and who paid their contribution of 50 euro. We ended the year 2004 with 1264 members and I am sure we can do even better this year. There always has been a strong interest from members in the Society and the dynamics are still alive. The increasing success of the Newsletter is a good example that there is a need to strengthen the communication within the professional community. The European Society offers you a platform and a network. The greater the numbers, the stronger our voice is in the outside world. May I invite you to check whether you already renewed your membership. You should have received, in January, a specific form to complete and to return. If not, please contact our Central Office. Enjoy this Newsletter and give us some feedback in the form of questions, support or criticism.

Kind regards, Olga Loeber

Contribution to this newsletter

Family planning in Turkey: what has changed in recent years

Traditional attitude of the Government toward population growth began to change in the late 1950s. This change was due mainly to medical problems, especially related to high maternal mortality caused by illegal abortions. The first anti-natalist Population Planning Law was enacted in 1965. In 1983, the law was revised, and a more liberal one was accepted. This new law legalized voluntary surgical contraception and abortion up to the 10th week of pregnancy. The last Turkish Demographic Health Survey (TDHS) was conducted in 2003 (1). The present state of family planning in Turkey, according to TDHS, 2003, and some changes put into effect within 10 years are summarized.

A woman in Turkey will give birth to an average of 2.2 children during her reproductive years. This is lower than the rate recorded in 1998 which was 2.7. Childbearing in Turkey is concentrated in the 20-29 age group and fertility levels decline after the age of 30.

Education has an important impact on fertility. The higher the education level, the lower the number of children in the family. According to surveys, a steady

increase in the median age of first marriage has been observed over the past decades. The rising age of marriage is one of the factors that has contributed to the decline in fertility. The median age of marriage is 21 for women aged 25-29 in the TDHS, 2003 compared with 20 for the same age group in the 1993 survey. The median age of first marriage among women with at least high school education is 7 years older than women with primary school education.

Knowledge of both modern and traditional family planning methods is high among women. The pill and IUD are the most widely known methods (98%). The least known modern methods are female condom and emergency contraception.

There have been significant changes in the levels of contraceptive use in the last 10 years, especially for modern methods. Use of contraception has increased from 63% in 1998 to 71% in 2003. The level of use of modern methods has increased from 35% in 1993 to 43% in 2003. There has also been an increase in the use of female sterilization and male condoms. The level of use of contraception increases with the education level. Withdrawal is the most popular method among married women, at 26%.

In Turkey, two out of five contraceptive users stop using the contraceptive method within 12 months of starting. For some methods, the discontinuation rate is very high. It is 79% for injections and 54% for the pill. The rate of discontinuation is an indicator of the quality of services and counselling. Only one fifth of the discontinuations are due to the desire to become pregnant.

The major source for the contraceptive methods is the public sector providing 58%. The support from the public sector is very important, especially for low income groups.

Among ever married women, 24% had an induced abortion. More than half of the women who had an abortion wanted to space or limit their births at the time of the abortion. Nearly 80% of women who had an abortion experienced it at a private doctor's clinic or at a private hospital or clinic.

There is a strong relationship between the mother's pattern of fertility behavior and her children's survival chances. The mortality rate is higher for infants born of a mother who is older than 34, who already had at least three births and short birth intervals.

More than 20 years have passed since the last law on family planning was put into practice. We observe a better picture on family planning from the DHS's conducted every five years. But we are still far from

the ideal. The progress made so far in family planning should not be ignored, but it must be realized that much still remains to be done to improve the family planning services and thus mother and child health levels.

The current goal in Turkey must be to make high-quality family planning services more accessible and affordable. The government sources must be supported by community support and NGOs working in this area.

By Prof. Dr. S. Sinan Ozalp, Osmangazi University, Fac. of Medicine, Unit of Ob&Gyn, Eskisehir, Turkey

(1) Hacettepe University, Institute of Population Studies, Turkey Demographic Health Survey 2003, Key Findings, Hacettepe University, Institute of Population Studies, General Directorate of Mother and Child Health / Family Planning, Ministry of Health, State Planning Organization and European Union, Ankara Turkey

9th ESC congress 2006 3-6 May 2006, Istanbul, Turkey

Dear Friends and Colleagues,

We are delighted to invite you to attend the 9th ESC Congress. We are looking forward to your participation in an exciting scientific programme. The main aim of the congress is to improve life quality through contraception and reproductive health care. We will share current knowledge, practice and thoughts about contraception, reproductive health care and family planning from all over the world and exchange experiences during discussions, debates and forums.

Following the tradition of ESC Congresses, the scientific programme covers all aspects of reproductive health and contraception from basic to clinical research. The topics will contain the newest data for contraception, reproductive health and sexual health and will aim to increase the success rate of family planning through the countries. The problems of adolescents and their health will be discussed as well. The programme outline will consist of plenary sessions, congress sessions, sponsored symposia, a best poster session, sessions from national and international societies and forums. Expert meetings and free communications will give us the opportunity of discussing controversies. The congress will gather scientists from specific fields of contraception and reproductive health care all over Europe and abroad.

The venue of the congress will be the Istanbul Lutfi Kirdar Convention & Exhibition Centre, which is located in the very heart of Istanbul, with view of the

legendary Bosphorus straits. Istanbul is the only city in the world situated both in Europe and Asia, bridging the two continents over the Bosphorus. Istanbul, once known as the capital of capital cities, is at the crossroads of Western and Eastern civilizations and is a mosaic of cultures and civilisations. Istanbul, the city of empires, being one of the world's most magical and exciting cities, offers you a magnificent visit.

Further information on the congress is available at www.contraception-esc.com

We are looking forward to welcoming you in Istanbul!

by Prof. Dr. S. Sinan Ozalp, congress president, and Prof. Dr. Hakan Satiroglu, president scientific committee

Does anyone have a question?

We changed the original title of this chapter from « Does anyone have an answer ? » to the above to offer you the opportunity to ask a question to the professional community through the next Newsletter. Keep in mind that your question will reach more than 2000 readers. The answers might be of great help to support your publication, your personal interest, your study ...

From Dr Olga Loeber
Please send questions to:
esccentraloffice@contraception-esc.com

Facts & figures - News

AIDS Strategy Failing as Disease Becomes a Female Epidemic

Global efforts to curb the increases in HIV/AIDS rates are failing because the world has not recognised that it is a female epidemic. The annual report on the AIDS epidemic, published by UNAIDS and the World Health Organization (WHO) said that in 2003 AIDS claimed 3.1 million lives, the highest ever, and the rate at which women and girls are affected is accelerating. The spread of the virus shows no sign of slowing, despite billions of pounds invested in treatment and prevention.

Globally, the fastest increase in infections is among women and girls. They account for 57 per cent of all those infected in sub-Saharan Africa, the worst-hit region, and for 75 per cent of those aged 15 to 24.

In every region of the world, rates of infection in women are rising faster than among men.

The report from UNAIDS is critical of the 'ABC' approach and of organizations who promoted the strategy saying it was "insufficient" and left "serious gaps." "The prevention strategies are missing the point." Said Kathleen Cravero, Deputy

Executive Director of UNAIDS. "They are not responding to the realities of women's lives. Women do not have the economic power or social choices over their lives to put the information [about HIV prevention] into practice."

Women are biologically twice as likely to become infected during sex as they are exposed to a larger dose of virus, and are more prone to be cajoled or forced into sex because of their lack of social power. When sex is violent and non-consensual, abstinence is not an option.

The emphasis on women is a major shift for UNAIDS, which up to now has focused on changing the behaviour of men. But the feminization of the epidemic has forced it to confront the failure of that strategy.

"The report makes clear that too many strategies assume a greater level of choice about sex, particularly among women, than exists," said Alvaro Bermejo, head of the International HIV/AIDS Alliance. "Everyone must recognise this in their programmes - and work to change these economic and social realities. If we don't, we cannot have the greatest impact on the epidemic."

Source: The Independent – 24 Nov 2004
Read more on:
http://news.independent.co.uk/world/science_technology/story.jsp?story=586049

Safe sex or bust?

With condom sizing it is width, not length, that matters. According to World Health Organisation (WHO) guidelines on the male latex condom, the key to a good fit is a good match of the relative circumferences of condom and penis. If a condom is too big, or too small, the risk of failure rises. The WHO says that for the less endowed a standard sheath with a 96mm circumference will suffice, while a 112mm one should fit the larger man. The standard Western condom has a 104mm circumference; the standard Asian is 98mm.

All condoms sold in the UK should have the European safety CE mark. The Family Planning Association says this will guarantee safety, but packs that carry the BSI kitemark have passed more stringent tests.

Research shows that you can reduce significantly your chances of a condom break by using a water-based lubricant as well. Oil-based lubricants - Vaseline or baby oil - greatly weaken the latex.

Many condom breakages are caused by trying to rip a condom out of its tight foil package in the dark, so keep the light on. The other common error is trying to put the condom on the wrong way round. If it doesn't roll on easily, it's back-to-front and more likely to fall off during sex. Older condoms, and those which have been exposed to light or heat, are more likely to tear. Most instructions advise

squeezing air out of the teat before rolling it on.

Source : The Times (UK), 18 Dec 2004

World fertility Report 2003 Women and men in developing countries are marrying later, having children later, according to UN report

Median Contraceptive Prevalence in Developing Countries Has Risen to 40 Per Cent in Just Two Decades

Source : online News section of UN website (<http://www.un.org/News/>), UN Dept of Economic and Social Affairs Population Division – 25 Jan 2005
read more on:

http://www.un.org/esa/population/publications/worldfertility/World_Fertility_Report.htm

Plug offers men a reversible method of birth control

A private American company hopes to launch the world's first implantable male contraceptive.

Dr. Neil Pollock, the Vancouver-born co-founder of Shepherd Medical Company, told a news conference yesterday that the Intra Vas Device is as effective as a vasectomy but less invasive.

"We have the potential to make a huge impact on the future of contraception," said Pollock.

He showed slides of the insertion of the 2.5-centimetre silicone plug into the tubes that take sperm to the penis. Clinical trials have shown that the device effectively stops the flow of sperm, but normal function would resume if it were removed, said Pollock.

Source : The Record (Canada) – 1 Feb 2005

Read more on
www.pollockclinics.com/mcleans.html

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Chief editor: Olga Loeber
Contributors to this newsletter: O. Loeber, S. Ozalp, H. Satiroglu
All materials to be included in the ESC Newsletter should be submitted (electronically) to the ESC Central Office / Peter Erard:
esccentraloffice@contraception-esc.com
Opalfeneweg 3, 1740 Ternat, Belgium
T. +32 2 582 08 52, F. +32 2 582 55 15

All Newsletters are also to be found on the website of the Society:

<http://www.contraception-esc.com>
(go to 'News')