

Clinicians' experiences and insights in conducting an intra-vaginal ring study among young women in Kisumu, Kenya, 2015 -Lessons learned



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Background

- Women account for 50% of all adults living with HIV worldwide, *UNAIDS, 2015*
- In SSA, young women between 15 and 24 years of age are twice as likely to be HIV infected than their male counterparts
 - Overall adult HIV prevalence in Kisumu County is 18.7%, with prevalence among women at 20.5% compared to 14.2% among men
- There is need for an integrated approach to women's sexual and reproductive health,
 - Multipurpose prevention technologies (MPTs) may offer the best immediate solution

Figure 1: Africa, Kenya- Study area



Issue

- No intravaginal rings (IVRs) are currently licensed for use in Kenya and pelvic examinations are not routinely done in family planning clinics.
- Clinicians in Kenya often lack experience with introducing MPTs,
 - However, current microbicide trials are using novel biomedical technologies and procedures, while testing use of technology in HIV infection prevention.

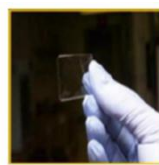
Microbicides



Vaginal gel applicator



Vaginal ring



Vaginal film

Design

- In a single arm clinical-trial of a contraceptive intravaginal ring (IVR), NuvaRing® in Kisumu Kenya.
 - To augment our understandings of IVR use, we undertook textual analysis of handwritten clinicians' notes.
- Study participants were;
 - HIV-uninfected
 - Sexually-active females 18-34 years of age
 - Documented contraceptive method
 - Undergo routine pelvic examinations.

Results

- Lack of readily available Contraceptive documentation.
- Over-the-counter purchases by women.
- Participants self-reported injectable or oral contraceptive use; while on examination, implants and other IUS were observed.
- Among those reporting oral use, Some ONLY take when sexual intercourse would be occurring ("I take pills only when my husband is around")
- Clinicians providing privacy and reassurance was useful as concerns pelvic examinations fears.
- Genital modification such as labial elongation (not commonly practiced in the region) was observed
- Preference to female clinicians was noted

Lessons learnt and Insights

- Anecdotal information is important for clinical management and understanding of participants' practices .
- Increased clinician knowledge and insights regarding motivations for omitting or providing incorrect information may have implications for study procedures and outcomes.
- Clinicians may require additional time to address patients concerns or misinformation , as well as understand how contraceptives are accessed outside of a clinic setting.
- Lastly, contraceptive use may be inconsistent, not used as intended, and change within a given period; hence, ongoing contraceptive education and monitoring may be required

The NuvaRing®



Fisher folk of the lake city- Kisumu



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