CHIEF SCIENTIST OFFICE

CODE: PCL/22/01

RESEARCH PROJECT BRIEFING

Preventing Unintended Pregnancy In The Post-Covid-19 Era.

AIMS

The focus of the lectureship was to:

1) develop and evaluate novel pathways for access to effective contraception, including post-abortion
2) evaluate the impact of Progestogen-only Pills (POP) delivered by community pharmacy
3) continue trials to develop novel male methods of contraception.

KEY FINDINGS

1) With colleagues at Usher Institute (University of Edinburgh) I completed a project to develop a co-designed framework for post-abortion contraception in Scotland
2) With partners at Public Health Scotland, I conducted an evaluation of POP via community pharmacies as a method bridging contraception (where a 3–6-month supply is provided to patients from a pharmacist without a prescription and free of charge).
3) I completed the conduct of a Phase 2b novel male contraceptive gel trial.

WHAT DID THE STUDY INVOLVE?

For the 3 aims of the lectureship, I used different methods:

1) Post-abortion contraception – co-design project (SCOPE)

This project was primarily funded by the Scottish Government Sexual Health and Bloodborne Virus (SHBBV) framework fund. With partners at Usher Institute (University of Edinburgh) we used an adapted evidence-based co-design methodology, incorporating synthesis of existing literature, patient/public and staff workshops, a final co-design workshop and development of a recommendations framework.

2) Progestogen-only pill at community pharmacy project

This project, conducted with Public Health Scotland (PHS), used reimbursement data from community pharmacy prescriptions of emergency hormonal contraception and progestogen-only oral contraception. Reimbursement codes were obtained centrally for the first 18 months of the new bridging contraception pathway and I analysed de-identified data.

3) Contraceptive gel trial

This project (funded by the US National Institute for Child Health and Human Development and the Population Council) was an open label single arm phase 2b clinical efficacy study of a novel male contraceptive gel. I conducted all aspects of the clinical trial including recruitment, clinical visits, data collection and contributed to report writing and conduct and write up of a substudy.

WHAT WERE THE RESULTS AND WHAT DO THEY MEAN?

1) Post-abortion contraception – co-design project (SCOPE)

With colleagues in Usher, I helped to synthesise existing evidence, based on prior Scottish research, and developed three post-abortion contraception (PAC) service model options (online, pharmacy-based, and self-management approaches). These are supported by practical resources including key principles and implementation considerations. We completed eight co-design workshops with diverse stakeholders, including people with lived experience of abortion and contraception and providers across multiple health boards. Partner organisations included the Young Women's Movement, Back Off Scotland, Borders in Recovery and KWISA – Women of African Heritage, ensuring representation of young women, rural communities, people in recovery, and Black women. Insights from these workshops informed refinement of the model options.

A follow-on implementation study has been funded by SHBBV to continue this work.

2) Progestogen-only pill at community pharmacy project

I identified that a small proportion (1.8%) of all emergency oral contraception prescriptions from community pharmacies were accompanied by a prescription of 'bridging' progestogen-only pill – a much lower proportion than indicated from previous clinical trials. This indicates that further implementation work is required with community pharmacists and public awareness.

3) Contraceptive gel trial

The results of the study are currently under review and are embargoed. However, the Phase 3 clinical trial application is currently underway and I anticipate further involvement in the next study phase with a move towards a leadership role. I have also linked in the impact document to publications that have arisen from this work (although not yet the final results).

WHAT IMPACT COULD THE FINDINGS HAVE?

1) Post-abortion contraception:

Abortion rates continue to increase and due to limited access to contraceptive services through general practice, new ways of delivering post-abortion contraception are important to provide patients with a full range of reproductive choices.

2) Progestogen-only pill at community pharmacy:

This project has highlighted that there is an implementation 'gap' between the approval of POP for bridging contraception and provision from community pharmacies versus the reality of clinical provision of this method and has highlighted a need for further training and implementation support in pharmacies.

3) Male contraceptive gel trial:

Male contraceptives are urgently needed to diversify the range of methods available to individuals and couples. The gel could be the first to reach a phase 3 trial and become first in class for novel male methods.

HOW WILL THE OUTCOMES BE DISSEMINATED?

1) Post-abortion contraception:

Work on the pilot design for a PAC intervention is ongoing and is being shaped by ongoing consultation with key stakeholders and informed by the findings of the SCOPE project. As the evidence did not support a single preferred model, but rather identified core components across a range of online, pharmacy-focused, and self-management approaches, we are continuing to refine the pilot concept.

One manuscript has been published, with a second in progress and a completed stakeholder workshop. The final project report and summary is available here: SCOPE (Service Co-Design to Enhance Post-Abortion Contraception Access in Scotland) Study final report: Findings and recommendations for improving post-abortion contraceptive services in Scotland.

2) Progestogen only Pill:

This work was presented at the College of Sexual and Reproductive Health Annual Scientific Meeting and at the International Federation of Obstetrics and Gynaecology (FIGO) world congress. A related study that I am leading, is ongoing examining women's self-reported real world use of POP when purchased via a pharmacy online or in person as compared with via a GP.

3) Male contraception gel:

The primary manuscript is currently under review at a major international journal. I co-authored a manuscript on a sub-study using a sperm concentration self-check device that could be used to support confident use of male methods in the future.

CONCLUSION

This clinical lectureship has supported my development and allowed me to apply for a bridging position with University of Edinburgh which will in turn give me opportunity to apply to an intermediate fellowship and continue to develop as a clinical academic.

RESEARCH TEAM & CONTACT

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This project is a postdoctoral clinical lectureship that supported me to continue as a clinical academic while completing my clinical training in community sexual and reproductive health.