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<th>ID: 1426</th>
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<td><strong>Congress:</strong> The First International &amp; 4th National Congress on health Education &amp; Promotion, 2011</td>
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<td><strong>Title:</strong> Continuation rates and reasons of discontinuation for cyclofem and Depo-provera in rural areas of East Azarbaijan province, Iran 2010</td>
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| **Abstract:** Background: Depo-provera and cyclofem are only available injectable methods in Iran that are used by 2.6% of married women in Iran.  
Cyclofem has been provided by the public health system since 2007 However there is no study about its continuation published in Iran, and all of published studies about DMPA in Iran were in urban areas.  
The aim of this study is to compare continuation rate and reasons of discontinuation of Depo-provera and cyclofem.  
Methods: A retrospective cohort study was conducted with 422 women who had been started getting cyclofem (202 women) or Depo-provera (220 women) from selected Azarbaijan health houses 12-24 month before data collection. Data were collected by a questionnaire by interviewing, then data were analyzed by SPSS software using Kaplan Mayer.  
Result: The mean age of participants was 33(SD=7). One tenth of participants had high school education or higher. 92.5% were housewife.  
The continuation rate for Cyclofem over first 24 months was less than Depo-provera significantly.  
Continuation rate for Cyclofem over first 24 months was less than Depo-provera significantly.  
The most common reason for discontinuation was menstrual changes (as a combined reason) in the both groups(85% for Depo-provera versus 72% for cyclofem) with amenorrhea (as a individual reason) among Depo-provera users about twice as cyclofem users(50% versus 22%).  
Conclusion: Continuation rate was higher for Depo-provera than for cyclofem. By attention to low continuation rate of injectable methods in comparison with studies in other countries and this fact that menstrual changes were main reasons for discontinuation of them. As the menstrual changes and the other reported reasons for the discontinuation are not health threatening effects, health providers can help to improve continuation rate by appropriate consultation.  
**discontinuation reason, Depo-provera, Cyclofem.** |
| **Presentation:** Poster |