Influence of user age and contraceptive history on satisfaction with NuvaRing

ML Vree, GR Lounsbach

N.V. Organon, Oss, The Netherlands

Objective : NuvaRing is a new vaginal method of hormonal contraception, which has been very well received by users in the large clinical studies. We were interested to see whether age and starter/switcher status had any influence on user satisfaction with NuvaRing.

Methods : We assessed data from the large (n=2322), one-year clinical studies by age category (18–20, 21–25, 26–30 and >30 years) and by starter/switcher status. Items included 'satisfaction with the method', 'recommending NuvaRing to others' and 'reasons for liking and starting the method'.

Results: Satisfaction with NuvaRing was rated very highly across all age categories (94–98% at cycle 13). This was also reflected by the finding that women of all ages would recommend the ring to other women (94–98% at cycle 13), even the women discontinuing the method (70–76%). More than 80% of women (completers) found NuvaRing to be the best contraceptive method at cycle 13, irrespective of age and starter/switcher status. Age did not appear to influence the reasons given for liking the ring (assessed at cycle 3), although 'not having to remember anything' was mentioned slightly more often by women aged below 30 rather than above (48% vs 38%). In addition, more switchers than starters gave 'not having to remember anything' as the most important reason for liking the ring (51% vs 36%), whereas 'ease of use' was more important for starters (32% vs 26%). When asked about their reasons for starting with NuvaRing, more starters than switchers mentioned 'problems with their old method' (24% vs 13%), whereas 'doctors advice' seemed to be more important for switchers (22% vs 13%).

Conclusions : Satisfaction with NuvaRing as a contraceptive method was extremely high and not related to age or starter/switcher status. Slight differences were observed between starters and switchers with regard to reasons for liking and starting the method.