

# Creating Schedule 3 entries for oral contraception

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Children by Choice Submission to the  
Therapeutic Goods Administration on  
over the counter oral contraception provision

December 2014



**CHILDREN BY CHOICE**  
ASSOCIATION INCORPORATED

*40 Years • 200,000 Women • Still Supporting Choice*

## About Children by Choice

Children by Choice provides counselling, information and education services on all options with an unplanned pregnancy, including abortion, adoption and parenting. We provide a Queensland-wide counselling, information and referral service to women experiencing unplanned pregnancy, deliver sexual and reproductive health education sessions in schools, and offer training for GPs and other health and community professionals on unplanned pregnancy options.

We also advocate for improvements to law and policy that would increase women's access to reproductive health services. We are recognised nationally and internationally as a key advocacy group for the needs and rights of women in relation to access to reproductive and sexual health services.

In 2013-14 we received a total of 2724 client contacts, ranging in age from under 14 to over 50.

## Contact

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## Policy statement

Children by Choice is broadly supportive of measures to increase women's access to contraception. Many barriers exist to contraceptive access for some groups of women in Australia, and addressing these barriers is essential if women are to have full control over their fertility. As such, we are pleased the Therapeutic Goods Administration is considering a change to the scheduling of oral contraception to allow over the counter provision by pharmacists.

We do however have some reservations around shifting provision of oral contraception to a pharmacy model in entirety, and urge the TGA to consider these issues as part of the deliberation of this proposal.

We recognise that the proposal being considered by the TGA includes potential conditions of:

- A minor questionnaire by the pharmacist regarding family history of heart problems, hypertension and stroke; and
- An in-pharmacy blood pressure test/results from another recent blood pressure test to ensure suitability for medication.

We believe these conditions to be suitable for the pharmacy provision of repeat prescriptions; however, in cases of women starting an oral contraception for the first time, or taking up oral contraception after some length of time has elapsed since last use, a thorough consultation by a clinician should be sought.

This consultation should include the above measures as well as reviewing whether oral contraception is the best option for that patient given their lifestyle and childbirth intentions, and ensuring the best formula of oral contraception is chosen for that patient. Physicians involved in the provision of oral contraception also report to us that in cases of first uptake of oral contraception, or restarting after some time, a significant education session with the patient must be undertaken so women understand factors which increase or decrease the efficacy of contraception pills – ie, being aware that antibiotics reduce efficacy, etc.

Given these additional considerations for patients taking up oral contraception for the first time or after a lapse in usage, it is our position that this consultation is best undertaken by a clinician in general practice. While pharmacists have the professional capacity to undertake this work with appropriate guidelines and training, the reality of the pharmacy setting is that they are not reimbursed for time spent with patients in lengthy consultations, and that privacy in these situations is compromised.

We also note that over the counter provision of emergency contraception is sometimes compromised for young women aged under 16 years, so barriers remain for this vulnerable group which would likely be mirrored if oral contraception was made available through pharmacy provision.

We therefore submit that repeat oral contraceptive supply via pharmacy provision should be endorsed by the TGA, but initial takeup of oral contraception should remain in the domain of general practice and other clinicians.

