

June 2006 Newsletter

2 Brattle Square
4th Floor
Cambridge, MA 02138
Phone: 617-349-0040

admin@ibisreproductivehealth.org
www.ibisreproductivehealth.org

PO Box 1985
Parklands 2121
Johannesburg, South Africa
27-11-447-1346

c/o Bixby CRHRP
3333 California Street, # 335
San Francisco, CA 94143
415-502-4076

Preventing unsafe abortion: The potential role of medication abortion

In May 2006, Ibis Reproductive Health, in collaboration with l'Office National de la Famille et de la Population (ONFP), Gynuity Health Projects, and le Centre de Formation aux Techniques de la Santé Reproductive, co-organized a symposium dedicated to medication abortion in the francophone Arab world. Entitled "The prevention of unsafe abortion: the potential role of medication abortion methods," the three day conference was held in Tunis and included more than 30 clinicians and researchers from Mauritania, Morocco, Algeria, Tunisia, and Lebanon.

The symposium offered participants the opportunity to discuss the status of abortion in the region and provided detailed information about the clinical provision of medication abortion services. The regional symposium also showcased the Tunisian experience of integrating medication abortion into the national family planning program. Tunisia remains the only country in the Arab world to have fully legalized first trimester abortion and is the only country in the region to have registered mifepristone.

The symposium included a visit to one of the first Tunisian facilities to provide medication abortion services. The meeting concluded with country-specific strategic planning sessions dedicated to ways of reducing unsafe abortion in the region. The official opening of the meeting included remarks by Dr. Nabiha Gueddana, Director of the ONFP, Dr. Marcel Vekemans, International Planned Parenthood Federation, Dr. Beverly Winikoff, President of Gynuity Health Projects, Dr. Angel Foster, Ibis Associate, and Dr. Danielle Hassoun. The regional symposium was funded by The William and Flora Hewlett Foundation.



Symposium participants and organizers

Study shows health professional training deficient in abortion care



Advanced practice clinicians (APCs) — nurse practitioners, physician assistants, and certified nurse-midwives — play an increasingly important role in the delivery of a range of health services in the US, yet many of the programs that train these health professionals do not

provide didactic or clinical education about abortion services. To examine the inclusion and extent of abortion education in APC programs and to explore ways to expand coverage, this study asked program directors at 486 US accredited APC programs to provide information about institutions' reproductive health curricula.

Of the programs that responded to the survey (202 overall) slightly more than half reported that their programs provide didactic instruction on surgical, manual vacuum aspiration, or medication abortion, and only 21% reported including at least one of these three procedures in

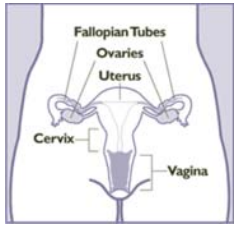
their routine clinical curricula. Only 44% of programs offer multifaceted didactic instruction in abortion care — defined as the inclusion of pregnancy options counseling, post-abortion care, and one or more abortion procedures — and only 17% of programs offer students multifaceted clinical exposure to abortion care. "Given the important role of pregnancy termination in women's health in the United States, these are striking findings," said Dr. Angel Foster of Ibis Reproductive Health. "The high rate of unintended pregnancy in the United States necessitates that all future APCs receive comprehensive exposure to family planning and abortion. As integral components of women's health care, abortion, pregnancy options counseling, and family planning merit incorporation into routine didactic and clinical APC education."

The study was jointly conducted by Ibis Reproductive Health, the National Abortion Federation, and the Abortion Access Project. (Foster A, Polis C, Allee M, Simmonds K, Zurek M, Brown A. Abortion education in nurse practitioner, physician assistant, and certified nurse-midwifery programs: A national survey. *Contraception*. 2006;73:408-414.)

Attitudes, perceptions and knowledge about the vagina

Nappi RE, Liekens G, Brandenburg U.
Contraception. 2006;73(5):493-500.

Background: The International Vagina Dialogue Survey examined women's attitudes, perceptions and knowledge regarding the vagina. Methods: In total, 9441 women (18–44 years) from 13 countries underwent online interviews during April/May 2004. Results: The majority of the women thought that vaginal health did



not receive the attention it deserves (66%) and that society has too many misconceptions about the vagina (65%); indeed, 78% agreed that society's taboos surrounding the vagina contribute to women's ignorance. Only 39% of the women had ever read an in-

formative article on the vagina, though 83% would like to read such an article. Although 79% of the women relied on advice from healthcare professionals (HCPs) when choosing a contraceptive, <50% were comfortable talking to HCPs about vagina-related issues. Conclusions: A more open and informative approach is needed with regard to the subject of the vagina in order to empower and educate women about their bodies and in matters such as choice of contraception.

Ibis staff teach Harvard course

Ibis staff members were approached this spring by a group of students from the Harvard School of Public Health about putting together an eight-week course on current issues in international reproductive health. The course, "International reproductive health issues: moving from theory to practice," covered topics including emergency contraception, abortion, family planning, and HIV/AIDS in a variety of international settings. Feedback from the students has been extraordinarily positive, and Ibis has been asked to continue the course next year.

New Ibis Staff Member

Ibis is excited to welcome **Deborah Kacanek** as our new **Senior Associate**. Dr. Kacanek is a social epidemiologist with a Doctor of Science degree in Health and Social Behavior and Master of Science in Health Policy and Management from Harvard School of Public Health. Prior to joining Ibis in April she was an NIAID fellow in HIV/AIDS at Tufts-New England Medical Center and Tufts University Medical School, where she still teaches medical students in the MPH program. She has conducted research on HIV risk behaviors among young incarcerated women and men. Welcome Deb!

Doctors, researchers meet to discuss safety of medication abortion

Current and former US Food and Drug Administration (FDA) officials said during a House Reform hearing that the agency does not know if the use of the medication abortion drug Mifeprex™ increases a woman's risk of becoming infected with the rare and potentially fatal bacterium *Clostridium sordellii*. According to a report published in the 12/1/05 issue of the *New England Journal of Medicine (NEJM)*, the deaths of four California women who took Mifeprex™ (known generically as mifepristone--along with misoprostol to induce a medication abortion) were linked to toxic shock caused by *C. sordellii*. However, the researchers found no direct link among the deaths of the women and said that the risk of infection in conjunction with taking the drug is low.

In July 2005 the FDA issued a public health advisory warning physicians to watch for any signs of sepsis or other infections among women taking Mifeprex™. The

The FDA received reports of 4 women who died after taking Mifeprex, and the agency determined those deaths to be unrelated to use of the drug.

agency in March reported that two other women who took the Mifeprex™-misoprostol regimen had died and issued a public health advisory urging physicians and patients to follow approved instructions for the drugs and watch for symptoms warranting medical attention. A fifth death involving use

of the medical abortion drugs has been linked to an infection by a similar bacterium, *C. perfringens*, Reuters reports.

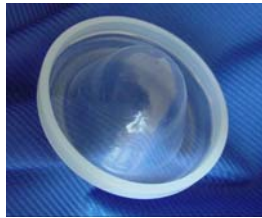
Janet Woodcock, the agency's deputy commissioner for operations, said the FDA has received reports of another four women who died after taking Mifeprex™, and the agency has determined those deaths to be unrelated to use of the drug, *CQ HealthBeat* reports. One of the women had an undiagnosed ectopic pregnancy, one woman had an unsuccessful medical abortion and an unsuccessful surgical abortion before having a successful surgical abortion, one woman was determined to have died of causes unrelated to mifepristone and misoprostol use, and the fourth case is still under investigation, according to Woodcock.

In December 2005 and April 2006, *NEJM* published studies and letters from researchers that linked *C. sordellii* infection to the deaths of eight women who recently had delivered infants either vaginally or by caesarean section, two women who had miscarriages and one woman who was infected during her menstrual period.

Ibis Participates at Microbicides 2006

The Microbicides 2006 (M2006) conference was held in Cape Town, South Africa from April 23-26. This was the fourth bi-annual meeting and the most heavily attended with 1,300 participants from around the world. The conference provided the opportunity for discussion across four distinct areas: basic science, clinical trials, social sciences, and community and advocacy.

Ibis was an active participant at M2006: President Kelly Blanchard co-chaired the panel presentation *Barrier Methods and Dual Protection for HIV Prevention*, which included an update on several cervical barrier studies. One study among U.S. women found that two candidate microbicides, Acidform™ and BufferGel™, were safe to be used with a diaphragm. Researchers in Zimbabwe found that Cellulose Sulfate gel, another potential microbicide, when used with the diaphragm was shown to be safer than K-Y Jelly® used with the diaphragm. Another research trial demonstrated that the BufferGel Duet, a cervical barrier that is combined with the candidate microbicide BufferGel™, was easy to insert and remove, validating the idea that a cervical barrier can be prepackaged with a microbicide. One of the most exciting pieces of news from the panel were the results presented by Kurt Barnhart of the University of Pennsylvania showing that BufferGel™ used with the diaphragm is as effective as the diaphragm used with nonoxynol-9 spermicide for contraception.



BufferGel Duet

In addition, Project Manager Naomi Lince presented a poster based on data collection activities in the *Methods for Improving Reproductive Health in Africa* (MIRA) research trial, which aims to determine whether the diaphragm in combination with a lubricant gel may reduce acquisition of HIV among women. As a member of the MIRA team, she described how a combination of new technologies and a well developed, site-based quality control system can potentially lead to improved data quality and quicker results release in HIV prevention trials. An advantage of these methodologies is that they may also help contain long-term costs because researchers spend less time cleaning study data, and more quality control can happen in real time.

Ibis also co-hosted an exhibition booth with the Cervical Barrier Advancement Society (CBAS). Participants expressed a great deal of interest in the various cervical barrier methods and over 100 joined the CBAS newsletter mailing list. For more information about the cervical barrier studies that were presented at M2006, go to the CBAS website at www.cervicalbarriers.org.

Will the Roman Catholic Church lift its ban on condoms?

The issue now at hand at the Vatican is not contraception, but disease prevention. As certain leaders, such as the Brazilian Bishop Rixen, and, more recently, former Italian Cardinal Carlo Maria Martini, have suggested, condoms could be seen as a lesser evil. Cardinal Martini said, in the Italian newsweekly *L'Espresso*, "Certainly the use of prophylactics can, in some situations, constitute a lesser evil. There is, then, the particular situation of spouses, one of whom is affected by AIDS." Others who have publicly spoken in favor of condom use in cases where



Male condoms

one partner in a marriage is HIV-positive include Swiss Cardinal George Cottier, Belgian Cardinal Godfried Danneels, and Cardinal Cormac Murphy-O'Connor of Westminster, England.

Both the public and Catholic priests seem to be in favor, not just of condom use in light of HIV/AIDS, but also of birth control in general. In a recent poll of Catholic priests in England and Wales, 65% of those surveyed believed condom use to curb the spread of HIV/AIDS was acceptable. Forty-three percent said it was time for the church to reexamine its view on contraception as a whole. And a 2005 Harris poll found that 90 percent of Catholics—and 93 percent of Americans—support contraception. *View the full article:* <http://www.ppfa.org/pp2/portal/files/portal/webzine/globaldispatch/gd-060517-church.condom.xml>

New Publications by Ibis Staff

- **Foster A, Polis C**, Allee MK, Simmonds K, Zurek M, **Brown A**. Abortion education in nurse practitioner, physician assistant and certified nurse-midwifery programs: a national survey. *Contraception*. 2006;73:408–414.
- **Grossman D, Ellertson C**, Abuabara K, **Blanchard K**, Rivas F. Barriers to Contraceptive Use in Product Labeling and Practice Guidelines. *American Journal of Public Health*. 2006;96(5):791-799.
- **Matthews J**. [Clinical trials examining cervical barriers as potential methods for prevention of HIV and other sexually transmitted infections](#). *The Microbicide Quarterly*. January, February, March 2006;4(1):7-11.

Upcoming Events

National NOW Conference and Young Feminist Summit: 40th Anniversary Celebration

July 21-23, 2006: Albany, NY

Feminism "then" and now. Speakers, workshops, political institutes, issue hearings, and plenary sessions devoted to discussing the feminist movement and young feminist issues. Celebrate NOW's 40th anniversary at this conference!

Reproductive Health 2006

September 7-9, 2006: La Jolla, CA

Participants of Reproductive Health 2006 general sessions will be able to discuss diagnosis, health care needs, and therapy choice for women with various reproductive health conditions, understand new technologies in family planning, including medications and devices in development for use in the United States, understand latest clinical research, including treatment guidelines for sexually transmitted infections, and discuss current social and legal issues that have impacted or are expected to impact the provision of reproductive health services.

Seminar on Ethical Issues in Reproductive Health

September 21-24, 2006: Wassenaar, Netherlands

The seminar seeks to bring together population, medical and public-health researchers, bio-ethicists, and policy makers in order to clarify these and similar ethical questions, as a contribution to the science-policy dialogue on reproductive health.

World Congress of Obstetrics and Gynecology

November 5-10, 2006: Kuala, Lumpur, Malaysia

The program is divided into four tracks: women's health issues (including psycho-social issues, general gynecology and urogynecology), maternal and fetal medicine (including general obstetrics), reproductive medicine and gynecological oncology. The scientific program will consist of keynote lectures, plenary sessions, concurrent symposia, free communication, poster and video sessions. To make the scientific program more interesting, some interactive sessions such as debates and case discussion are included. In addition, there will also be some special sessions included in the program.



Mike Keefe The Denver Post 2005