Residents Across Specialties Have Limited Education Regarding Family Planning and Contraceptive Use For Patients with Severe and Persistent Mental Illness

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Objectives
Survey residents from multiple specialties across the United States to assess perceived adequacy of education regarding the reproductive health needs of patients with severe and persistent mental illness (SPMI).

Methods
• A survey was created using REDCap to assess resident education on reproductive health in the SPMI population.
• Survey questions assessed resident training, knowledge, attitudes, and barriers regarding contraception and family planning for patients with SPMI.
• Residents from a convenience sample of residency programs in internal medicine, family medicine, obstetrics/gynecology, and psychiatry within the United States participated in the survey.
• Emails were sent to program coordinators of each program with a request to send the survey invitation to their respective residents.
• The survey included an online consent to participate, which was required for the data to be used in the study.
• Participants did not have to answer all of the survey questions.
• The University of Kansas Human Subjects Committee approved the conduct of the study and its design.

Results
• Responses were collected over a two-month period in 2016; 791 residents consented to participate.
• The percentages of responses from each specialty and postgraduate year are shown in Figure 1.
• Over 60% of respondents reported inadequate training on prescribing contraceptives for patients with SPMI. (Figure 2)
• More than 88% agree there should be coordinated care between primary care and mental health providers regarding contraceptive use. (Figure 2)
• The majority of participants disagreed or were neutral when asked about contraindications to prescribing hormonal birth control for patients taking anti-epileptic or anti-psychotic medications. (Figure 2)
• Over 51% of participants stated they were willing to prescribe contraception for SPMI patients if they had adequate training. (Table 1)

Discussion
Residents across specialties agreed education and training on family planning and contraception in the SPMI patient population was lacking. They also agreed that discussion regarding contraception should be coordinated amongst primary care and mental health providers. The willingness of most residents to prescribe contraception is encouraging.

Residents are also unsure regarding the special healthcare needs of patients with SPMI including drug-drug and drug-disease interactions.

One limitation of our study was the inability to calculate a response rate; program coordinators with access to email listings sent the survey link to an unknown number of residents, which could have biased the sample.

Future Considerations
Results indicate the need for additional education and training regarding contraceptive use in the SPMI population. We hope that by identifying this gap in knowledge, education and training that residency programs will modify their curricula to allow additional training regarding the health care needs of the SPMI population.

Disclosure
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