

Increasing Accessibility to Birth Control: Over the Counter Oral Birth Control

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Abstract

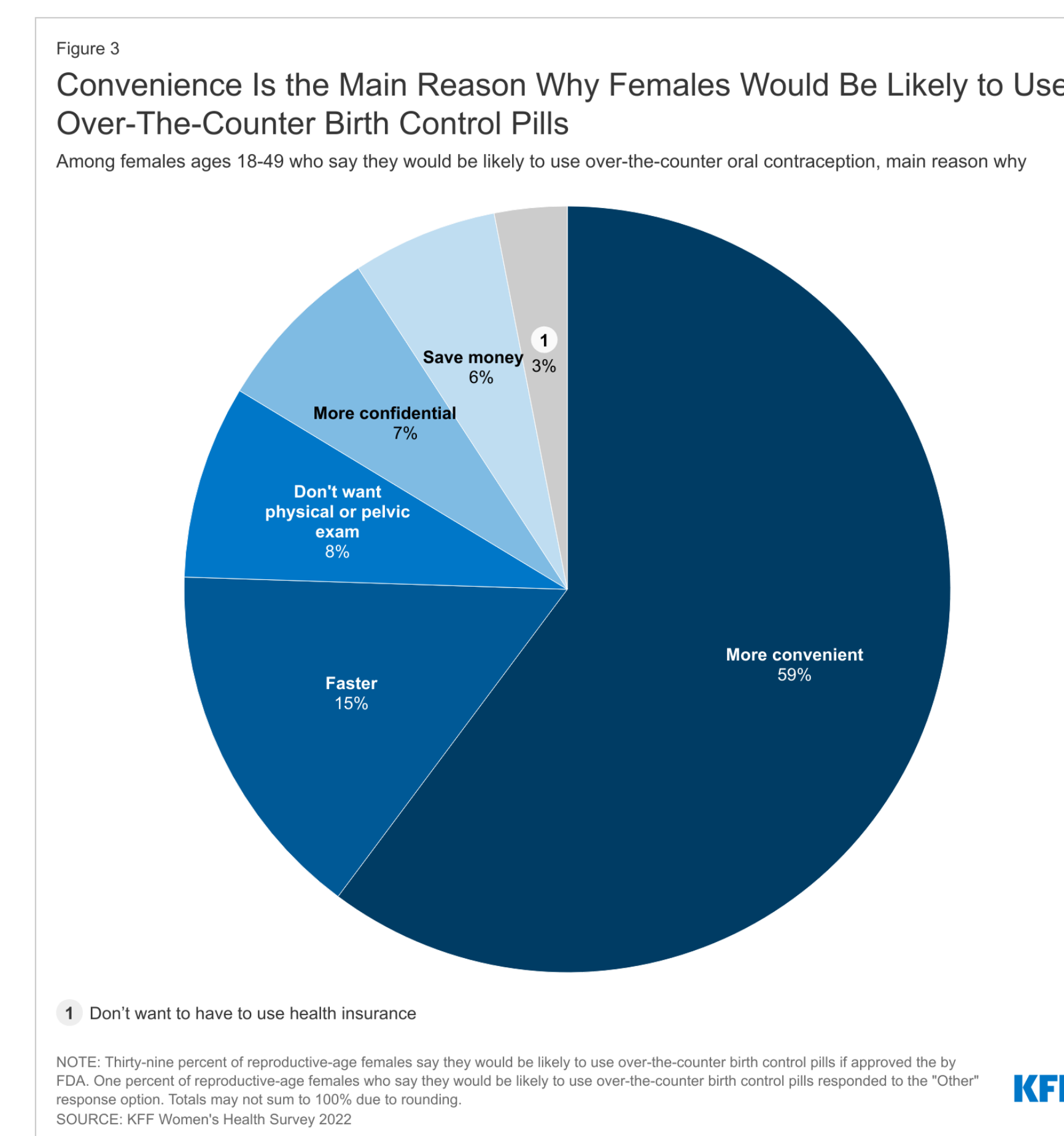
The increasing barriers to the accessibility of birth control have prompted a need for a solution. One long standing solution suggested to diminish the barriers is by removing the prescription requirement of oral contraceptives. Removing the prescription requirement not only breaks down barriers for women without healthcare access but also allows women an opportunity to control their reproduction with more accessibility. Although this solution appears to be concise, the reality is there are many different views regarding offering birth control over the counter, including some healthcare professionals who believe the health risks outweigh the access benefit. On the contrary, those in support of removing the prescription barrier for oral contraceptives, including the American Medical Association, argue that the risks women undergo through pregnancy outweigh the risks of consuming oral contraceptives. Throughout this review article, research investigating both the advantages and disadvantages of the suggested solution is discussed assessing the potential outcomes of having oral contraceptives offered over the counter.

Introduction

In the United States, there are many barriers to obtaining oral contraceptives whether that is lack of accessibility to health care, unaffordable health insurance and copays, or limited pharmacy hours, amongst many others. With these barriers in place, obtaining oral contraceptives has become even harder for patients, putting them at risk for unplanned pregnancies, family planning restrictions, and the inability to regulate their menstrual cycles. A proposed solution to the barriers many women face is offering oral contraceptives over the counter. By removing the restrictions put in place through the requirement of a prescription, this solution would help eliminate the many barriers' women face across the nation and increase the overall accessibility to birth control.

Benefits

Having oral contraceptives available OTC knocks down barriers such as unaffordable copays, or lack of access. Another benefit is that oral contraceptives will help to decrease the chance of unintended pregnancies and offer women the ability to control their menstrual cycles. The pill that would be offered OTC is a progestin-only pill that has a lower risk of thromboembolism compared to other oral contraceptives.



Risks

Incidence of thromboembolism with use of hormonal contraceptives.

Hormonal Treatments Are Depicted in Descending Order of Thrombogenicity.

Hormonal Treatment	Risk of Thrombosis
First-generation OCs (the progestins norethynodrel, norethisterone, norethisterone acetate, and ≥ 50 μg ethinyl estradiol)	6-12/10 000 women
Third-generation OCs (the progestins desogestrel or gestodene norgestimate < 50 μg ethinyl estradiol)	9-12/10 000 women
Fourth-generation OCs (the progestin drospirenone, dienogest, or nomegestrol acetate < 50 μg ethinyl estradiol)	Similar
Second-generation OCs (the progestins norgestrel or levonorgestrel and < 50 μg ethinyl estradiol)	5-7/10 000 women
Progestin-only (norethisterone, ethynodiol diacetate, levonorgestrel, desogestrel, lynestrenol)	2-3/10 000 women
Oral contraceptives	
Injectable	
implantable intrauterine devices (IUDs) with progestins (levonorgestrel)	2/10 000 women

Conclusion

Lack of access, unaffordable copays, and other barriers to oral contraceptives continue to be unresolved issues for women specifically low-income women. Addressing these barriers and removing the prescription requirement for oral contraceptives, will help reduce the number of unintended pregnancies. In addition to unintended pregnancies, preventing high-risk pregnancies is another concern that oral contraceptives can help address. Healthcare providers are split on whether to provide oral progestin-only pills OTC stating that their biggest concern is safety. This concern can be addressed by having a self-screening tool such as a medical checklist that patients can fill out for possible contraindications to taking oral contraceptives. This can help to address the safety concerns that providers have with the risks of taking oral contraceptives. Having oral contraceptives available OTC will help improve access to oral contraceptives, but it will not solve all the barriers that women must go through to obtain them.

Future Directions

With the very controversial topics regarding birth control accessibility and usage in our nation, it is imperative to continue research for alternative methods and advocacy for the lack of accessibility to birth control. Further research should focus on ways to break down the concerns regarding the health risks involved in oral contraceptives. Understanding the impact that birth control barriers have on women is essential when attempting to resolve them. Through education and advocacy, our nation's rules and guidelines can diminish the established barriers.

Sources

- Bajos N, Leridon H, Goulard H, Oustry P, Job-Spira N; COCON Group. Contraception: from accessibility to efficiency. *Hum Reprod*. 2003;18(5):994-999. doi:10.1093/humrep/deg215
- Dennis A, Grossman D. Barriers to contraception and interest in over-the-counter access among low-income women: a qualitative study. *Perspect Sex Reprod Health* 2012;44:84-91. doi:10.1363/4408412
- Gialeraki A, Valsami S, Pittaras T, Panayiotakopoulos G, Politou M. Oral Contraceptives and HRT Risk of Thrombosis. *Clin Appl Thromb Hemost*. 2018;24(2):217-225. doi:10.1177/1076029616683802
- Grossman D, Fernandez L, Hopkins K, Amastae J, Garcia SG, Potter JE. Accuracy of self-screening for contraindications to combined oral contraceptive use. *Obstet Gynecol*. 2008;112(3):572-578. doi:10.1097/AOG.0b013e31818345f0
- Grossman D, Grindlay K, Li R, Potter JE, Trussell J, Blanchard K. Interest in over-the-counter access to oral contraceptives among women in the United States. *Contraception*. 2013;88(4):544-552. doi:10.1016/j.contraception.2013.04.005
- Guillard H, Laurora I, Sober S, Karapet A, Brass EP, Glasier A. Modeling the Potential Benefit of an Over-the-Counter Progestin-Only Pill in Preventing Unintended Pregnancies in the U.S. *Contraception*. Published online October 2022. doi:10.1016/j.contraception.2022.10.006
- Howard DL, Wall J, Strickland JL. Physician attitudes toward over-the-counter availability for oral contraceptives. *Matern Child Health J*. 2013;17(10):1737-1743. doi:10.1007/s10995-012-1185-6
- Interest in Using Over-the-Counter Oral Contraceptive Pills: Findings from the 2022 KFF Women's Health Survey. KFF. Published November 3, 2022. Accessed March 11, 2023. <https://www.kff.org/womens-health-policy/issue-brief/interest-using-over-the-counter-oral-contraceptive-pills-findings-2022-kff-womens-health-survey/#:~:text=Convenience%20is%20the%20leading%20reason>
- Landau S, Besinque K, Chung F, et al. Pharmacist interest in and attitudes toward direct pharmacy access to hormonal contraception in the United States. *J Am Pharm Assoc* (2003). 2009;49(1):43-50. doi:10.1331/JAPhA.2009.07154
- Starbird E, Crawford K. Healthy timing and spacing of pregnancy: reducing mortality among women and their children. *Glob Health Sci Pract*. 2019;7(suppl 2):S211-S214. <https://doi.org/10.9745/GHSP-D-19-00262>
- Tepper NK, Whiteman MK, Marchbanks PA, James AH, Curtis KM. Progestin-only contraception and thromboembolism: A systematic review. *Contraception*
- White K, Potter JE, Hopkins K, Fernández L, Amastae J, Grossman D. Contraindications to progestin-only oral contraceptive pills among reproductive-aged women. *Contraception*. 2012;86(3):199-203. doi:10.1016/j.contraception.2012.01.008