

ILLINOIS STATE MEDICAL SOCIETY

**Resolution 12.2022-32
(A-23)**

Introduced by: Nellie Roberts, ISMS Member

Subject: Supporting Access to At-Home Injectable Contraceptives

Referred to: Council on Medical Service

1 Whereas, nearly half of all pregnancies in the United States are unplanned¹; and

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3 Whereas, unplanned pregnancy costs within the healthcare system alone reach
4 over 4.5 billion dollars annually²; and

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6 Whereas, improper contraceptive adherence is cited as the cause of over half of
7 these unplanned pregnancies²; and

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9 Whereas, increased access to reliable methods of contraception would target this
10 failure and therefore decrease the number of unplanned pregnancies; and

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12 Whereas, injectable contraceptives are more than 99% effective when given on
13 time³; and

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15 Whereas, the necessity of clinic visits every 3 months is a barrier for many
16 women to access this form of contraception; and

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18 Whereas, other forms of injectable medications have been trusted to patients,
19 such as insulin, migraine medications, and fertility treatments, among others; and

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21 Whereas, multiple studies have found women prefer to do contraceptive
22 injections themselves as opposed to visiting an office and have maintained similar
23 efficacy as compared to in-office treatment^{4, 5}; and

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25 Whereas, there is now a sub-cutaneous form of injectable contraceptive treatment
26 available with the same efficacy as intramuscular injections, allowing easier and less
27 painful use by patients at home^{6, 7}; therefore, be it

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29 RESOLVED, ISMS adopt a policy in support of access to at-home injectable
30 contraceptives for women across Illinois; and be it further

31 RESOLVED, that the Illinois delegation to the AMA submit a resolution
32 directing the AMA to support access to at-home contraceptive injections as a method of
33 birth control for women across the nation.

Fiscal Note:

None

Existing ISMS policy related to this issue:

The Illinois State Medical Society recommends elimination of the requirement for a physician's prescription to purchase birth control pills (BCP) and OTC hormonal contraceptives and allow OTC purchase, and advocates for the revocation of FDA and/or Congressional regulations requiring a prescription for OTC hormonal BCP. (2021 Annual Meeting; BOT 2020-OCT; Last BOT Review 2020)

It is the policy of ISMS to 1) condemn age-based, cost-based, and other non-medical barriers to contraceptive drug access 2) support equitable access to over-the-counter (OTC) contraceptives, including those forms of contraception recommended for OTC sale, forms of screening, and prescribing by non-physicians 3) prohibit cost-sharing obstacles to OTC contraceptive drug access, and full coverage of all contraception without regard to prescription or OTC utilization, since all contraception is essential preventive health 4) advocate for simpler FDA OTC drug approval applications and registration, as well as regulations that promote access to sufficient varieties of OTC contraception in the marketplace 5) advocate for the legislative and/or regulatory mechanisms needed to grant these improvements to OTC contraceptive drug access and quality care. (HOD 2017)

Existing AMA policy related to this issue:

Development and Approval of New Contraceptives H-75.990

Our AMA: (1) supports efforts to increase public funding of contraception and fertility research; (2) urges the FDA to consider the special health care needs of Americans who are not adequately served by existing contraceptive products when considering the safety, effectiveness, risk and benefits of new contraception drugs and devices; and (3) encourages contraceptive manufacturers to conduct post-marketing surveillance studies of contraceptive products to document the latter's long-term safety, effectiveness and acceptance, and to share that information with the FDA.

Reducing Unintended Pregnancy H-75.987

Our AMA: (1) urges health care professionals to provide care for women of reproductive age, to assist them in planning for pregnancy and support age-appropriate education in esteem building, decision-making and family life in an effort to introduce the concept of planning for childbearing in the educational process; (2) supports reducing unintended pregnancies as a national goal; and (3) supports the training of all primary care physicians and relevant allied health professionals in the area of preconception counseling, including the recognition of long-acting reversible contraceptives as efficacious and economical forms of contraception.

Over-the-Counter Access to Oral Contraceptives D-75.995

Our AMA: (1) encourages the US Food and Drug Administration to approve a switch in status from prescription to over-the-counter for oral contraceptives, without age restriction; (2) encourages the continued study of issues relevant to over-the-counter access for oral contraceptives; and (3) will work with expert stakeholders to advocate for the availability of hormonal contraception as an over-the-counter medication.