

Coitus Interruptus in Female Patients Seeking Services at Obstetrics and Gynecology Department in Rajavithi Hospital

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Objective: To study the using rate and demographic characteristic of female patients attending in Rajavithi Hospital who used coitus interruptus (CI) as a contraceptive method.

Material and Method: Two hundred sexually active, reproductive age (15-44 years) female patients attending family planning, postpartum or gynecologic clinic in Rajavithi Hospital between March 1, 2004 and May 31, 2004 were interviewed to obtain demographic data and CI using designed questionnaires.

Results: One hundred and forty out of 200 women were using CI as a choice of contraception (70%). The mean age of the CI groups was 27 years. Most were occupied as private sector employees (49.3%). Friend was the most common route for obtaining information about CI (46.4%). The women and their partners were satisfied with CI 68.6% and 34.3%, respectively.

Conclusion: Seventy percent of the female patients seeking services at Obstetrics and Gynecology Department in Rajavithi Hospital used CI as a choice of contraception. Friends were the most common route for obtaining information regarding this contraceptive method (46.4%).

Keywords: Coitus interruptus, Female patient, Sexually active

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Coitus interruptus (CI) is one of the common contraceptive methods used, as people believe that it is reliable, healthier, easier or more convenient than other methods⁽¹⁾. However, failure of CI can occur for two reasons 1) some inexperienced men do not withdraw the penis soon enough before ejaculation 2) sperm spillage from the urethral glands of Littre and Cowper's gland before orgasm and ejaculation⁽²⁾.

The authors planned to conduct a cross-sectional descriptive study to find out the using rate and demographic characteristic of female patients seeking services at the Obstetrics and Gynecology Department in Rajavithi Hospital who used CI compared with those who did not use CI as a contraceptive method.

Material and Method

The present study recruited female patients attending family planning, postpartum or gynecologic

clinics in Rajavithi Hospital between March 1, 2004 and May 31, 2004. The inclusion criteria were reproductive age 15-44 years, sexually active, the use of CI with/or without other contraceptive methods. Each case was interviewed by one of the researchers using the same questionnaires. The patients were not divided into two groups at the first time because their CI using status could not be known before. Information obtained was recorded in the questionnaires. The questionnaires were tested for reliability and validity by three experts from the Department of Epidemiology, Faculty of Public Health, Mahidol University. The hospital ethics committee approved the present study and written informed consent was obtained from the patients. The data were analyzed using percentage, arithmetic mean, range and standard deviation.

Definition

Coitus interruptus

A contraceptive method used by male where one withdraw the penis before ejaculation. This method is independent of frequency, duration of using and combination with other contraceptive methods.

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Results

Two hundred female patients were interviewed and 140 cases met the inclusion criteria. Seventy percent of the patients were using CI as a contraceptive method. Some data of the non-coitus interruptus using group (NCI) were recorded. The mean age and SD of the CI were 27 and 6.5 years while those of the NCI groups were 29 and 6.4 years, respectively. The most common marital status was marriage in both CI and NCI groups (95.7% and 96.7%, respectively). The mean family income was 12,666 baht and 10,528 baht in CI and NCI groups, respectively. Table 1 shows the occupation of the CI and NCI groups. In both the CI and NCI groups, 49.3% and 63.3%, respectively, were employees in the private sector. Ninety-five percent in CI group and 96.7% in NCI group were married. Buddhism was the most common religion in both groups (96.4% and 98.3%, in CI and NCI groups, respectively).

Secondary school (30%) and primary school (38.3%) were the most common school levels in CI and NCI groups, respectively (Table 2). Information from a friend was the most common route in the CI group (46.4%) (Table 3).

The women and their partners were satisfied with this method in 68.6% and 34.3%, respectively. The oral contraceptive pill, condoms, safety period, and other contraception were the combined contraception used by these female patients (42.9%, 20%, 13.7%, and 1.3%, respectively). Twenty-two percent used CI alone and 28.6% of all women used CI regularly. The failure rate of CI alone and/or combined with other contraception was 11.5%. Fifty percent of the patients knew that sperm could come out from the urethral opening before orgasm and ejaculation.

Discussion

The prevalence of CI user varied from 25-42% in some Islamic countries such as Turkey and United Arab Emirates⁽²⁻⁵⁾ and 5-60% in some Christian countries such as Romania, Czech Republic, Sri Lanka, Mauritius, Brazil, Columbia, Greece, the Philippines, Trinidad and Tobago, Zimbabwe, Spain, Italy, the former Yugoslavia, and Bulgaria^(2,6).

The women in developed countries used CI more than those in developing countries (18% vs. 9%)⁽⁷⁾. In Thailand, among married women of reproductive age, CI is currently used by only 0.9% with 5.7% ever having used this method⁽⁸⁾. The high CI using rate (70%) in the present study could not be calculated as a prevalence as the authors did not interview all the female patients of reproductive age (15-44 years) and sexually active

Table 1. Occupation of the female patients in this study

Occupation	Use CI (n = 140) n (%)	Not Use CI (n = 60) n (%)
Housewife	49 (35)	12 (20)
Private sector employee	69 (49.3)	38 (63.3)
Government employee	11 (7.9)	2 (3.3)
Other	11 (7.8)	8 (13.4)

CI = coitus interruptus

Table 2. Education of the female patients in this study

Education	Use CI (n = 140) n (%)	Not Use CI (n = 60) n (%)
Primary school	34 (24.3)	23 (38.3)
Secondary school	42 (30)	12 (20)
Bachelor degree	28 (20)	6 (10)
Other	36 (25.7)	19 (31.7)

CI = coitus interruptus

Table 3. Routes used for obtaining information about the use of coitus interruptus by female patients in this study

Routes used for obtaining information about CI	Use CI (n = 140) n (%)	Not Use CI (n = 60) n (%)
Friend	65 (46.4)	19 (31.7)
Relative	22 (15.7)	7 (11.7)
General practitioner	16 (11.4)	1 (1.7)
Obstetrician-Gynecologist	3 (2.2)	3 (5)
Mass media (paper)	22 (15.7)	14 (23.3)
Mass media (television + internet)	5 (3.6)	2 (3.3)
Know by themselves	7 (5)	14 (23.3)

CI = coitus interruptus

who visited Rajavithi Hospital during the study period. The validity of CI prevalence data was questioned because of marked underestimates of usage. Many women used more than one method, mixing contraceptive pill use with periodic abstinence or CI as they did not regard CI as a contraceptive method⁽²⁾.

There was no male side effect such as testicular pain and decreased libido as in Ghazal-Asward S, et al's

study (37.5%)⁽⁴⁾. It was postulated that only female patients were interviewed in the present study while the couple were interviewed in those study⁽⁴⁾. Therefore, underreported of male side effects could be discovered if their male partners came together in the present study. Usually

$$\frac{\text{failure rate}}{100 \text{ woman-year}} = \frac{\text{number of accidental pregnancies}^{(12)}}{\text{number of woman-years of observation}} \%$$

There was high variation in failure rate of CI, ranging from 7% to 37% of 100 woman-years of using CI as a contraceptive method⁽⁹⁻¹²⁾. However, most are retrospective have severe methodological weaknesses. The quite low failure rate of CI in the present study (11.5%) can be explained by a high rate of combination of other contraceptive methods with CI (78%). Additionally, the definition of failure rate in the present study was quite different to the standard definition⁽¹²⁾ because patients almost always forgot the exact year when they started using CI as a contraceptive methods. Therefore, the authors could not evaluate number of woman-years of observation (using CI).

So in the present study failure rate = $\frac{\text{number of accidental pregnancies}}{\text{number of woman of observation}} \%$

“The presence of sperm in pre-ejaculatory fluid makes CI an ineffective method of contraception” were generally accepted concept without adequate evidence based data supported⁽²⁾.

Zukerman et al⁽¹³⁾ in 2003 concluded that pre-ejaculatory fluid secreted at the tip of the urethra from Cowper’s gland during sexual stimulation did not contain sperm and therefore cannot be responsible for pregnancy during CI. Only 12 cases including five cases (premature ejaculation), three cases (increased secretion during foreplay), and four normal cases were enrolled in their study. However, nowadays it is generally suggested that CI should not be used as an appropriate contraceptive method.

Sexual health education should be promoted via a variety of media such as television, radio, newspaper and internet to provide the correct knowledge of CI as it can be seen that a friend, more than any other, was the most important source of information of CI (46.4%). Fifty percent of the cases knew that sperm could be transported from the penis to the vaginal canal before orgasm and ejaculation but they still used CI for contraception. Attitude, cheapness, and comfort were suggested as the reasons for this.

The authors believe that the very high CI rate (70%) revealed in the present study indicates the need

for further investigation with a larger scale research conducted in the community to ascertain the exact prevalence rate of CI in Thai women. All the data in the present study was not statistically tested because the study design was only descriptive study.

In conclusion, 70% of female patients seeking services at the Obstetrics and Gynecology Department in Rajavithi Hospital used coitus interruptus as a choice of contraception. Half of them (35%) knew the risks of using CI as a contraceptive method. Friends were the most important source of information about CI (46.4%).

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การคุมกำเนิดโดยวิธีให้ฝ่ายชายหลั่งน้ำกามภายนอกช่องคลอดในผู้ป่วยสตรีที่มาตรวจรักษาที่ กลุ่มงานสูตินรีเวชศาสตร์ โรงพยาบาลราชวิถี

เอกชัย ไคววาริสารัช, ปริญญา สฤงคารนันต์

วัตถุประสงค์: เพื่อศึกษาอัตราการใช้และลักษณะประชากรศาสตร์ของผู้ป่วยสตรีที่มาตรวจรักษาที่โรงพยาบาลราชวิถี ที่ใช้การคุมกำเนิดโดยวิธีให้ฝ่ายชายหลั่งน้ำกามภายนอกช่องคลอด

วัสดุและวิธีการ: ผู้ป่วยสตรีวัยเจริญพันธุ์อายุระหว่าง 15-44 ปี ที่ยังมีเพศสัมพันธ์อยู่ที่มาตรวจรักษาที่คลินิกวางแผนครอบครัว คลินิกหลังคลอด หรือ คลินิกนรีเวช โรงพยาบาลราชวิถี ระหว่างวันที่ 1 มีนาคม พ.ศ. 2547 ถึงวันที่ 31 พฤษภาคม พ.ศ. 2547 ใช้วิธีสัมภาษณ์โดยใช้แบบสอบถามเกี่ยวกับข้อมูลลักษณะทางประชากรศาสตร์ และการใช้วิธีคุมกำเนิดโดยให้ฝ่ายชายหลั่งน้ำกามภายนอกช่องคลอด

ผลการศึกษา: ผู้ป่วยสตรี 140 ราย จากทั้งหมด 200 ราย ใช้วิธีการให้ฝ่ายชายหลั่งน้ำกามภายนอกช่องคลอด คิดเป็นร้อยละ 70 อายุเฉลี่ยของสตรีที่ใช้วิธีการดังกล่าวเท่ากับ 27 ปี อาชีพที่ทำมากที่สุดคืออาชีพรับจ้าง (ร้อยละ 49.3) ร้อยละ 50 มีความรู้ที่ถูกต้องที่ว่าตัวสุจิสามารถเล็ดรอดออกมาจากท่อปัสสาวะ โดยปนออกมากับน้ำหล่อลื่น ก่อนที่ฝ่ายชายจะถึงจุดสุดยอดและหลั่งน้ำอสุจิได้สตรีและฝ่ายชายพอใจกับวิธีการหลั่งน้ำกามภายนอกช่องคลอด เท่ากับร้อยละ 68.6 และ 34.3 ตามลำดับ

สรุป: อัตราการใช้วิธีการหลั่งน้ำกามภายนอกช่องคลอดในผู้ป่วยสตรีที่มาตรวจรักษาที่โรงพยาบาลราชวิถี เท่ากับร้อยละ 70 ได้รับข้อมูลเกี่ยวกับวิธีการนี้จากเพื่อนมากที่สุดเท่ากับร้อยละ 46.4
