Study to evaluate the long-term use of the NFP-DAG method in The Netherlands

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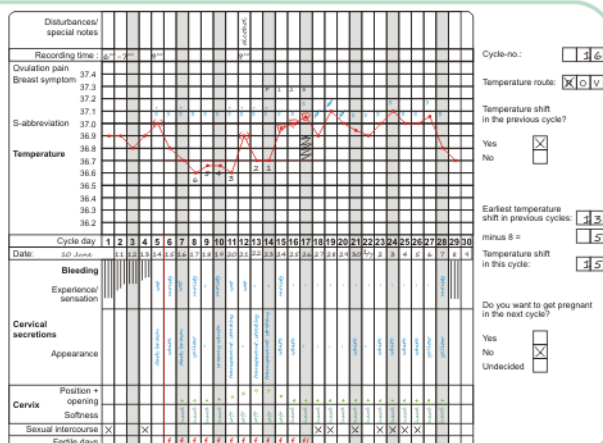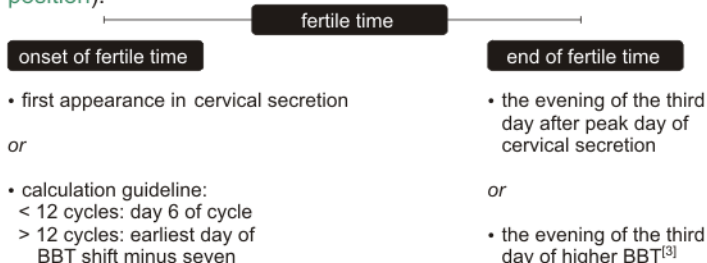contact: r.vansteinvoorn@inter.nl.net

Objectives

- to examine the efficacy of NFP-DAG
- to gain access to the user profile (age, education, fertility, contraceptive history, motivations)
- to obtain information on user satisfaction

Methodology

Enquiry with 20 questions about personal information/situation, fertility, daily use and satisfaction send by e-mail to all users in our database. From our start-up in 1996, about 800 couples have completed the NFP-DAG course of 4 lessons during three menstrual cycles. For this study, we have been able to trace 480 users by email.

Background of NFP-DAG

NFP according to the guidelines of the 'Deutsche Arbeitsgruppe' (NFP-DAG) comprises a well-studied and effective double-check method[1,2] to determine the fertile time in a menstrual cycle by observation and interpretation of the changes in the primary fertility signs (basal body temperature (BBT) and cervical mucus or cervical position).

fertile time

onset of fertile time

- first appearance in cervical secretion

or

- calculation guideline:
  - < 12 cycles: day 6 of cycle
  - > 12 cycles: earliest day of BBT shift minus seven

end of fertile time

- the evening of the third day after peak day of cervical secretion

or

- the evening of the third day of higher BBT[3]

Results

By means of the enquiry, it was possible to obtain information about the efficacy, user profile and satisfaction. The response rate was 51%, with an average user experience with the NFP-DAG method of 4.8 years. The average age of the woman at the start of the course was 27.8 (within the range of 19-49 years of age).

motivation

religion/view of life	65%
side-effects of other contraceptives	49%
health reasons	22%
reliability	20%
ecological reasons	6%
other (incl. child-wish)	16%

note: the respondents could select multiple answers to formulate their motivation to choose for NFP-DAG.
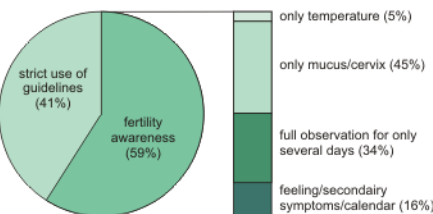
One notable fact is that 62% of the former contraceptive pill users indicate that (hormonal) side-effects are the main reason to switch to NFP.

contraceptive history

no contraception (43%)
contraceptive use (57%)

natural method (12%)
contraceptive pill (77%)
IUD (5%)
condom (35%)
other (3 %)
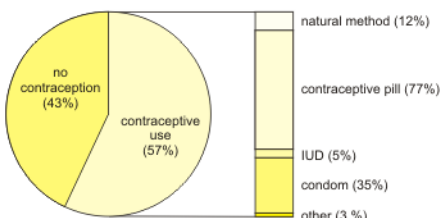
After the course, the majority exploits NFP for contraceptive purposes. Of this group, 53% abstains from intercourse in the fertile time (NFP-pure), whereas 45% uses a barrier method (NFP-mix).

general practice

strict use of guidelines (41%)
fertility awareness (59%)

only temperature (5%)
only mucus/cervix (45%)
full observation for only several days (34%)
feeling/secondary symptoms/calendar (16%)

The general practice of NFP-DAG partly depends on the user's experience with the observation and interpretation of the changes in the primary fertility signs (= fertility awareness).
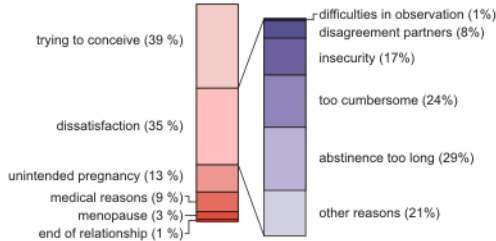
efficacy and user failure

not following guidelines (64%)
incorrect interpretation (22%)
failure of contraceptive (3%)
correct use (11%)
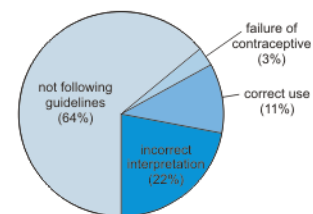
Efficacy in terms of Pearl-index (PI):
- user PI = **3.0** (1.8-2.6)[1]
- method PI = **0.38** (0.4-0.6)[1]

reasons of drop-out

trying to conceive (39 %)
dissatisfaction (35 %)
unintended pregnancy (13 %)
medical reasons (9 %)
menopause (3 %)
end of relationship (1 %)

difficulties in observation (1%)
disagreement partners (8%)
insecurity (17%)
too cumbersome (24%)
abstinence too long (29%)
other reasons (21%)

The drop-out percentage after 1 year is 9%, and 36% in 10 years. 50% of drop-outs occur in the first 3 years of use, with an average use of 3.8 years (in case of dissatisfaction).

user satisfaction

The participants give an overall rating of 8.5/10 for the NFP-DAG course (material/counseling).

The majority acknowledges the additive value of the counselor/course during the learning phase:

0% 10% 20% 30% 40% 50% 60% 70% 80% 90% 100%

(scale from 1-5, with 1 = poor and 5 = excellent)
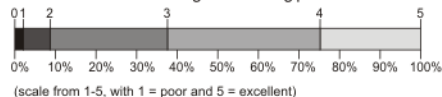
The educational level of the participants (male/female): intermediate vocational level (44%/40%), higher vocational level (39%/46%, university level (17%/14%).

Conclusions

- the efficacy of NFP-DAG in The Netherlands is in agreement with prospective, long-term studies in literature[1,2]
- NFP-DAG is highly effective in case couples abstain from sexual intercourse or use a barrier method in the fertile time
- NFP-DAG is an excellent alternative for women experiencing (hormonal) side-effects of other contraception methods
- 94% of the users is positive to very positive and evaluate NFP-DAG as a very good means for fertility awareness
- the NFP-DAG course has an additional value for most respondents in order to reach the high reliability, therefore it would be reasonable that health insurances admit the NFP-DAG course in their policy.

[1] Frank-Herrmann P, Heil J, Gnoth C, Toledo E, Baur S, Pyper C, Jenetzky E, Strowitzki T, Freundl G (2007) The effectiveness of a fertility awareness based method to avoid pregnancy in relation to a couple's sexual behaviour during the fertile time: a prospective longitudinal study. Hum Reprod 22(5), 1310-1319.
[2] Freundl G and the European Natural Family Planning Study Groups (1999) European multicenter study of natural family planning (1989-1995): efficacy and drop-out. Adv Contracept 15(1), 69-83.
[3] Gnoth C (2000) Fertil Steril 74, 1262-1263.