Local contraceptive practice in Sub-Saharan Africa

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Abstract

Although modern contraceptive options are becoming more widely available, even in the developing world, women still use traditional contraceptive methods. Other reports of the use of non-medical devices for contraception and abortion are available. With this report, we discuss a patient seeking treatment for the removal of a traditional contraceptive intrauterine device.

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Case Report

A 35-year-old G2P2 patient attended our clinic and described intense pain in the genital region due to foreign body retention—which she used for contraception—and requested its removal. During her gynecologic exam, the outer genitalia appeared normal but, upon speculum examination, a foreign body resembling a leaf was detected at the external cervical os (Figure 1).

A transvaginal ultrasound showed hyperechogenicity extending throughout the entire uterine cavity (Figure 2). The foreign body was removed.

This traditional birth control method involves placing a branch of a tree (called the ‘skin tree’ by locals) into the uterine cavity (Figures 3 and 4). Traditional midwives or healers from the community provide this service. Ultrasonography was then repeated, and the endometrium appeared to be normal on repeat evaluation. The patient was given antibiotics, and more healthy and effective contraceptive methods were explained and offered.

Discussion

Foreign bodies in female genital organs
are seen among women of reproductive age and are typically intended to prevent pregnancy.\textsuperscript{1} Foreign bodies can be placed per vagina or rectum by women, their partners or traditional healers. While foreign bodies in the vagina are occasionally found in children as a result of the child herself placing the object therein during play, in adults, foreign objects found in the uterine cavity are often placed purposefully for contraception. Such actions can lead to dangerous intraabdominal infections.\textsuperscript{2} Roy et al. reported a case of a wooden stick used as contraception which was retained in the uterine cavity for 12 years.\textsuperscript{3}

Figure 1: View of a part of the leaf seen at the external cervical os

Figure 2: Ultrasonographic image showing the foreign body in the uterine cavity

Figure 3: Leaves from the ‘skin tree’ used for intrauterine contraception

Paradise et al. reported cases of foreign bodies found in adults that were related to masturbation and sexual abuse. In our case, we believe that poverty and lack of access to modern medical care caused the patient to seek alternative, local healers to obtain contraception.
Conclusion

Women in developing countries still use traditional methods for contraception when access to trained, modern care providers is constrained. Some methods are invasive and put individuals at risk for pelvic infections and the many complications that can occur as a result. Educating women around the world about safe contraception and making it available to all should be a major healthcare priority.

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References


