

APPENDIX I-G: CUMULATIVE TOTALS OF USE OF DMPA IN McCORMICK  
HOSPITAL FAMILY PLANNING PROGRAM SINCE START OF PRO-  
GRAM, APRIL, 1965 THRU APRIL, 1978

Total number new acceptors..... 76,538  
Total number of injections..... 711,047  
Total usage in women years..... 172,038

APPENDIX I-H: NUMBER OF PATIENTS WHO HAVE USED DMPA FOR  
MORE THAN 10 YEARS

In the McCormick Hospital Family Planning Program there have been 232 patients who have used DMPA (3 months) for more than 10 years, divided into 4 groups as follows:

Group A	56	injections =	1 case
Group B	52 - 55	injections =	12 cases
Group C	47 - 51	injections =	151 cases
Group D	43 - 46	injections =	68 cases
		TOTAL	232 cases

APPENDIX I-I: MANAGEMENT OF BLEEDING SIDE EFFECTS OF  
DMPA - MATLAB VILLAGE-BASED DISTRIBUTION OF INJECTABLES

Dr. Douglas Huber, 19 May, 1978

All new DMPA acceptors in 6 villages were given a strip of 7 oral contraceptive pills ("Norinyl 1:50") and were told to take one per day if spotting or moderate bleeding was causing a problem. Injectables were offered house-

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to-house by the Cholera Research Laboratory. After 7 months, 30% of the original acceptors had used the strip of pills. 84% of these women were satisfied with this treatment for their bleeding problems. This leaves only 5% of all acceptors who had bleeding which was not managed satisfactorily by the woman herself with 7 daily, oral contraceptive pills.

APPENDIX I-J: SUPPLY AND PRICES OF INJECTABLE CONTRACEPTIVES

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Multinational organizations (IPPF, UNFPA) can supply DMPA much easier than bilateral organizations at the present time because of political sensitivities. The International Planned Parenthood Association (IPPF) supplies about one-half the present world's supply of DMPA. At present, more than 33 countries are being supplied by IPPF, which is distributed through affiliates. These affiliates, in turn, can re-distribute this supply of DMPA to others within their respective countries. IPPF is presently considering a change of policy which would allow them to assist not only member organizations with DMPA supply, but others (voluntary organizations) - and not necessarily only those which are approved by affiliates. If this policy change is made, IPPF will be able to supply to anyone who requests DMPA. It was noted that some countries state that DMPA must have the approval of U.K. and the USFAD before they will move beyond research with this drug.

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An international price for DMPA is important. At present, IPPF purchases DMPA at about half the small supply price or US \$0.90 C.I.F. per three-months dose (their main source for this supply is Upjohn, Belgium). This, compared to the present international price of a cycle of pills (US \$0.20), makes DMPA a more costly contraceptive. It was noted that if there were more than one company manufacturing DMPA, competition would most likely bring this price down to a more equitable level as compared with oral pills. Also, if the price were lower, it might be possible

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A REPORT ON THE  
FIRST ASIAN REGIONAL WORKSHOP ON  
INJECTABLE CONTRACEPTIVES

May 15 to 19, 1978  
Railway Hotel, Chiang Mai City  
Chiang Mai, Thailand

Held under the auspices of the McCormick Hospital  
Family Planning Program, with assistance from World  
Neighbors, International Planned Parenthood Federation,  
and OXFAM

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