

Introduction: Post-abortal contraception is a critical aspect of reproductive healthcare, ensuring that women can prevent unintended pregnancies following abortion. In a tertiary care setting, where diverse patient populations are treated, offering timely and effective post abortal contraception is essential. However, the knowledge, practices, and barriers associated with PAC among both healthcare providers and patients remain underexplored

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Title: POST-ABORTAL CONTRACEPTION IN A TERTIARY CARE HOSPITAL: A STUDY ON PRACTICE, KNOWLEDGE, AND BARRIERS

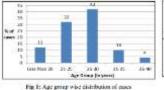


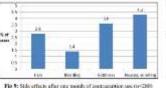


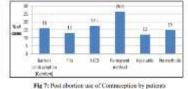
<u>Methods:</u> A cross-sectional observational study was conducted at a tertiary care hospital from January to December 2024. The study included healthcare providers and women who had undergone an abortion procedure. Data collected using structured questionnaires, interviews, and medical records review. Providers' knowledge and practices regarding PAC methods were assessed, while patients' contraceptive choices and barriers were evaluated.

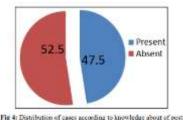
Table 1: Age group wise distribution of cases

Age group (in years)	Number	Percentage
Less than 20	48	12.0
21-25	128	32.0
26-30	168	42.0
31-35	40	10.0
36-40	16	4.0
Total	400	100.0

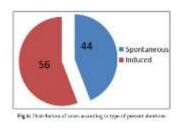


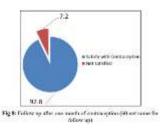






abortal contraception







Results: The study found that while most healthcare providers were aware of various contraceptive options available post-abortion, there was a significant gap in offering immediate and appropriate counseling. The most common contraceptives offered were oral contraceptives, intrauterine devices (IUDs), and implants. However, many women expressed a preference for temporary methods due to misconceptions about long-term methods. Barriers identified included lack of information, concerns about side effects, and cultural or societal stigma

Objectives: study aimed to assess knowledge and practices providers regarding post abortal contraception, identify the contraceptive offered postabortion, and understand patient preferences and barriers to adopting contraception in a tertiary care hospital.

<u>Conclusion:</u> The study highlights the need for improved training for healthcare providers regarding the importance of post abortal contraception counseling and the various contraceptive options available. Additionally, addressing patient misconceptions and societal barriers could enhance the uptake of post abortal contaception methods. The findings underscore the need for more structured post-abortal care protocols and targeted educational programs to ensure better reproductive health outcomes for women.