

**Family Planning Tasmania
Clinical Operations Protocol**



Family Planning Tasmania
sexuality education & clinical services

Document Title:

Version: 1.0

Name of Protocol	CONTRACEPTION IN WOMEN OVER AGE 50
Authors	
Date	
Aim	To support clinical decision making regarding contraception in women over the age of 50
Persons affected & Responsibility	
Definition of Terms	<ul style="list-style-type: none"> • Menopause: The permanent cessation of menstruation resulting from the loss of ovarian follicular activity • POP: progesterone only pill • LNG-IUD: levonorgestrol IUD • Cu-IUD: copper IUD • CHC: combined hormonal contraception • DMPA: depo medroxyprogesterone acetate • FSH: follicle stimulation hormone • STI: Sexually transmitted infection
Background	<p>While the chance of pregnancy after age 40 is reduced compared to the peak reproductive years some women remain fertile into their early or mid-fifties. Women in this age group are at higher risk of fetal abnormalities and complications of pregnancy.</p> <p>While contraception options may be limited by increased background health risks or the presence of gynaecological problems provision of appropriate contraceptive advice is important.</p> <p>The word menopause is commonly used to describe the last menstrual period a woman experiences and as such is a retrospective diagnosis and is said to have occurred after 12 months of amenorrhoea in a woman over the age of 50.</p> <p>The median age of menopause for Australian women is estimated to be 51 years.</p> <p>The risk of pregnancy in a woman over the age of 50 after a year of amenorrhea is estimated to be less than 1 per 100 women years.</p> <p>After age 55 pregnancy is extremely unlikely even if periods continue regularly so contraception can be stopped safely.</p> <p>Women in the 40s and 50s can be at risk of STIs, so safe sex education should be given if appropriate.</p>

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Procedure	<ol style="list-style-type: none"> 1. Discussion of STI prevention. 2. For women using a copper IUD or barrier methods of contraception. Contraception can be stopped once there has been a year of amenorrhoea since turning 50. Any copper IUD device approved for use in Australia if inserted at age 40+ can be used (off label) until menopause is determined. 3. women on the CHC or DMPA should be advised to change their contraceptive method. The contraceptive options for these women would be either to a barrier method or copper IUD and follow recommendations in point 2 above or to change to a progesterone based contraception and follow recommendations based on point 4. 4. For women on progesterone based contraception i.e. Implanon, POP and LNG-IUD continue until age 55. 5. For women using LNG-IUD if inserted at age 45 + it can be used (off label) to provide contraception until age 55. 6. If a woman is over 50 using a progesterone based method of contraception and she is amenorrhoeic for at least 12 months, then FSH levels should be taken. If FSH> 30 continue method for a further 12 months and then stop contraception. If FSH<30 continue hormonal method for a further 12 months and then repeat FSH. 7. Investigate bleeding suspicious of underlying pathology if present.

VERSION CONTROL

Document review and version tracking	
Version 1.0	Original version