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Fertility Return after long acting reversible contraceptives discontinuation and associated factors amongst women attending the obstetric units of 2 hospitals in subsaharan Africa ; Cameroon.

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BACKGROUND

Global concerns exist regarding fertility return after discontinuing long acting reversible contraceptives (LARCs). Limited evidence in sub-saharan Africa, including Cameroon on a potential link between the usage of long acting reversible contraceptives and a delay to return to fertility after discontinuing long acting reversible contraceptives has led to speculations on modern contraceptives delaying return to fertility or causing infertility. Our research assessed the return to fertility after discontinuing long acting reversible contraceptives among women attending 2 obstetric units in Cameroon.

METHODS

We conducted an analytical cross-sectional study from February 2024 to April 2025 among women aged 15-49 years who conceived after LARC (Copper IUCD, Implants) discontinuation. Ethical clearance was obtained and Data collection done using pretested and structured questionnaire. Bivariate and multivariate binary logistic regressions were done to determine the predictors of a delayed fertility return.

RESULTS

Among 218 participants, the proportion of fertility return after discontinuing LARCs within 12 months was 84.4% (95% CI :79.5%-89.5%). In multivariate binary logistic regression, Participants aged 35 years (AOR=3.429, 95% CI :1.469-8.799) and a duration of usage of LARCs above 36 months (AOR=2.913, 95% CI :1.311-6.473) were positively associated with a delay in return to fertility (above 12 months).

CONCLUSION

This study reinforces high rate of fertility return following LARCs discontinuation, however it highlights the need for enhanced counseling, particularly for women of advanced reproductive age and those with extended use of LARCs, to address misconceptions. Integrating fertility awareness into family planning services in Cameroon is critical to promoting informed contraceptive choices.

KEY WORDS

Return to fertility, Long-acting reversible contraceptives, discontinuation, infertility, copper intra-uterine contraceptive device, Implants and Reproductive health

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