

# Oral contraception among special clinic patients *With particular reference to the diagnosis of gonorrhoea*

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The continued and disproportionate rise in new cases of gonorrhoea in females reported from the treatment centres of England and Wales has led to the suggestion that the greater availability of contraceptive measures which can be practised by the female has led to an increase in promiscuity (*Observer*, 1968). On the other hand, Willcox (1965) has suggested that the general stability and safety of our society, leading to a loss of excitement and incentive, may be a factor in the recent increase in promiscuity. Support for this concept may be found in the fact that some girls deliberately become pregnant out of wedlock as a personal rebellion against the establishment (Franklin, 1966).

As Inman and Vessey (1968) pointed out, there are no accurate figures for the total consumption of oral contraceptive agents, but using their figures and taking a figure of 21 million as the total female population aged 15-44 years in England, Wales, and Scotland, the overall incidence of women on the pill would be 4 to 5 per cent.

## Material

To estimate the consumption of oral contraceptive agents among special clinic patients, the case notes of 1,000 patients attending and completing their treatment in the mid and late part of 1967 were analysed.

## Results

The numbers of patients taking oral contraceptives are shown below by marital status:

<i>Patients</i>		<i>No.</i>	<i>Per cent.</i>
Married	Total	315	31.5
	Taking pill	43	13.6
Single	Total	685	68.5
	Taking pill	75	10.8
All	Total	990	100.0
	Taking pill	118	11.8

*Note:* Married patients includes divorced and separated.

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## Conclusions

These figures suggest that the overall incidence of oral contraception amongst a presumably above-average promiscuous section of the female population is over twice the national average. A further interesting fact is that the proportion of married patients in this series is very close to that of the population at large in the same age group.

## DIAGNOSIS OF GONORRHOEA

It has been shown that the best time for taking tests in order to diagnose gonorrhoea is during or immediately following a menstrual period (Schmidt-La Baume, 1935; Wendeborn, 1935), when the blood levels of both oestrogen and progesterone are at their lowest levels. The action of a contraceptive pill of the 'Pincus' type is to damp down the endogenous hormone production and to produce an almost uniform level throughout the whole of the menstrual cycle. Falk and Krook (1967) have shown that the time in the menstrual cycle when the tests are taken is not very important, but this may have been because they were dealing with a population with a particularly high consumption of oral contraceptives.

With this in mind, it was decided to examine the 245 cases of gonorrhoea found in our series of 1000 patients to see if there was any marked difference in the use of oral contraceptive agents between the series as a whole and those suffering from gonorrhoea.

## Results

The use of oral contraceptives in patients with gonorrhoea is shown below by marital status:

<i>Patients</i>		<i>No.</i>	<i>Per cent.</i>
Married	Total	89	36.6
	Taking pill	17	19.0
Single	Total	156	63.4
	Taking pill	19	12.1
All	Total	245	100.0
	Taking pill	36	15.1

### Comment

Again, the distribution by marital status is remarkably close to that of the general population. Although the figures are too small to have any statistical significance, they would appear to suggest that more oral contraceptives are taken by the selected group of gonorrhoea patients than by the unselected clinic patients. This may be because the clinic patients who are taking the contraceptive pill are naturally more promiscuous than the rest and therefore run a greater risk of acquiring gonorrhoea, or it may be that the diagnosis of gonorrhoea is easier in women who are taking the contraceptive pill.

### MENSTRUAL CYCLE

The gonorrhoea cases were examined further to ascertain whether there was any correlation between the day of the menstrual cycle on which the diagnosis of gonorrhoea was made and the consumption of oral contraceptive agents:

### Results

The use of oral contraceptives and ease of diagnosis is related to the menstrual cycle in the following Table.

Day in menstrual cycle	Patients not on pill		Patients on pill	
	No. diagnosed	No. diagnosed at first visit	No. diagnosed	No. diagnosed at first visit
1-5	10	9	4	1
6-10	44	30	8	8
11-15	45	34	6	5
16-20	20	12	3	2
21-25	30	23	8	6
26+	20	18	1	1

Note: 28 patients who were pregnant, one who was 7 days post-partum, five who had undergone hysterectomies or were menopausal, and eleven whose precise menstrual histories were unknown are excluded from this Table.

### Comment

Although the numbers diagnosed in each 5-day period during the menstrual cycle are very small, these figures suggest that:

(1) A greater proportion of positive smears and/or cultures was obtained at the initial tests in patients on oral contraceptives.

(2) The peak of diagnoses occurring in the first half of the cycle in patients not taking the pill appears to have been evened out in those who were taking the pill.

It is therefore suggested that the diagnosis of gonorrhoea may be facilitated in patients taking oral contraceptive agents and that this requires further study.

### Summary

The use of oral contraceptive agents by patients attending a Special Clinic was found to be 11.8 per cent. The incidence among those with gonorrhoea was 15.1 per cent. The figure of 11.8 per cent is over twice that anticipated in the general population and supports the idea that the availability of oral contraceptives may be a factor in the rise in female promiscuity in recent years. That a higher incidence was observed in the patients with gonorrhoea may be due to the fact that diagnosis is easier in women taking oral contraceptives.

### References

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### La contraception par voie buccale chez les consultantes d'un dispensaire antivénérien, avec référence particulière au diagnostic de la gonococcie

#### SOMMAIRE

11,8 pour cent des consultantes d'une clinique vénéréologique employaient les contraceptifs utilisables par voie buccale. Le pourcentage était de 15,1 chez les sujets atteints de gonococcie. Le chiffre de 11,8 est deux fois plus grand que celui que l'on pourrait attendre d'après la population générale et donne le sentiment que la possibilité d'utiliser les contraceptifs oraux peut être un facteur dans l'augmentation de la promiscuité féminine observée ces récentes années. Le plus haut pourcentage observé chez des malades atteintes de gonococcie peut être dû au fait que le diagnostic est plus facile chez les femmes prenant des contraceptifs oraux.