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Contraception in hypertensive women: a quality improvement study

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Background & Aim: Cardiovascular diseases are the leading cause of mortality in European population. Arterial hypertension, in turn, is a major cardiovascular risk factor.

According to World Health Organization (WHO) 2015 criteria, combined hormonal contraceptives (CHC) are not recommended (category 3) in adequately controlled hypertension or blood pressure (BP) levels $\leq 159/99$ mm Hg, and are contraindicated (category 4) for BP levels $\geq 160/100$ mm Hg or vascular disease. Progestogen-only pills or implants and intrauterine devices are adequate for hypertensive women (category 1/2).

This study aims to evaluate and improve the quality of prescription for contraceptives in hypertensive women, in a primary health care centre of Portugal.

Method: This is a quality improvement study, which includes a retrospective and descriptive study. It was performed an internal evaluation. Unit of study: physicians of the primary care centre. Patients in study: all hypertensive women receiving their management at the centre, aged between 18 and 49 years old, not pregnant nor hysterectomized or postmenopausal. Electronic patient records were consulted and registered in a Microsoft Excel® database.

Study variables: age, BP level, CHC prescription.

Intervention: results of the first evaluation were presented and discussed at a primary care centre meeting; the authors developed and distributed a decision flowchart for contraceptive prescription in hypertensive women.

Results: 73 hypertensive women were included. CHC were prescribed in 54,8% of them at first evaluation.

Conclusions: First evaluation showed the importance of an intervention at this level. Corrective measures were applied and second evaluation will be performed in May 2016.