What is a LARC?

LARC is an acronym for Long-Acting Reversible Contraception. In other words, LARC is reversible birth control that provides long-lasting pregnancy prevention. LARCs are more than 99% effective, last from three to 10 years, and require no further effort after insertion. There are two types of LARCs:

- **IUDs (intrauterine devices)** – small, T-shaped devices that are put into the uterus to prevent pregnancy.
- **Implants** – matchstick thin plastic rod that is inserted under the skin of the upper arm to prevent pregnancy.

Figure 1: How Well Does Birth Control Work?¹

![Birth Control Effectiveness Chart](image)

Figure 2: Types of LARCs²

<table>
<thead>
<tr>
<th>INTRAUTERINE DEVICES (IUD)</th>
<th>IMPLANT</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Placed by health care provider</td>
<td>- Placed by health care provider</td>
</tr>
<tr>
<td>- Copper IUD lasts up to 10 years</td>
<td>- Lasts up to 3 years</td>
</tr>
<tr>
<td>- Progestin IUD lasts 3-5 years</td>
<td></td>
</tr>
</tbody>
</table>
Unintended Pregnancies in Kansas

ACOG (American College of Obstetricians and Gynecologists) recognizes that unintended pregnancies are a major public health issue and advocate increasing access to LARCs (as they are the most effective contraceptive method at preventing unintended pregnancies) as a part of the solution. All women of reproductive age and women of all income levels, regardless of education and/or marital status are at risk for unintended pregnancies. However, some populations disproportionately experience unintended pregnancies: women 24 and younger, low income, less educated, unmarried, and some minority populations.

The prevalence of unintended births in Kansas can be estimated from the Kansas Pregnancy Risk Assessment Monitoring System (PRAMS). PRAMS is a survey of women who have recently had a live birth. More than 1 in 4 mothers who had a live birth in 2017 (26.7%) reported that their pregnancies were unintended – that is, that just before becoming pregnant with their new baby, they either had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

Figure 3: Pregnancy Intendedness Among Kansas Women Who Had a Live Birth in 2017 – Kansas PRAMS, 2017

26.7% of Kansas women who had a live birth in 2017 reported that their pregnancies were unintended.
Pregnancy In Kansas

Figure 4: Proportion of Mothers Who Had Unintended Pregnancies by Federal Poverty Level During the Year Before Delivery – Kansas PRAMS, 2017

Federal poverty level was determined by questions about income and household size, and is based on poverty thresholds established by the Census Bureau for the year 2016.

Pregnancy was considered unintended if the mother reported that just before becoming pregnant, she had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

Figure 5: Proportion of Mothers Who Had Unintended Pregnancies by Age – Kansas PRAMS, 2017

± Denominator < 60 respondents, may be unreliable.

Pregnancy was considered unintended if the mother reported that just before becoming pregnant, she had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.
Figure 6: Proportion of Mothers Who Had Unintended Pregnancies by Marital Status – Kansas PRAMS, 2017

Pregnancy was considered unintended if the mother reported that just before becoming pregnant, she had wanted to be pregnant later, or did not want to be pregnant then or at any time in the future.

LARC as a Prevention Effort

Unintended pregnancy is associated with an increased risk of poor birth outcomes. Increasing the use of LARC as a prevention effort can help:

- Reduce unintended pregnancy
- Reduce teen pregnancy
- Support adequate/safe birth spacing
  - Reduce preterm birth and low birthweight
  - Reduce risk of maternal and infant morbidity and mortality
- Reduce incidence of substance exposure to infants in utero
- Support strong families and good outcomes for children (timing/planning)

How can LARCs cut costs?

- In Kansas, in 2010, the federal and state governments spent $166.1 million on unintended pregnancies. Of this, $115.7 million was paid by the federal government and $50.4 million was paid by the state.
- Publicly funded family planning centers in Kansas helped avert 7,900 unintended pregnancies in 2014, which would have resulted in 3,800 unplanned births and 2,800 abortions.
- By averting unintended pregnancies and other negative reproductive health outcomes, publicly funded family planning services provided by safety-net health centers in Kansas helped save the federal and state governments $81.3 million in 2010.

Unintended pregnancies contribute to significant health care costs. If the delivery is premature or results in a low birth weight infant, costs are greatly multiplied.
Health Plan Costs Related to Pregnancy Can Be Substantial

Figure 7: Mean Cost of Pregnancy Outcomes (2012)$^{12}$

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Full-term vaginal delivery</td>
<td>$10,363</td>
</tr>
<tr>
<td>Cesarean section</td>
<td>$14,478</td>
</tr>
<tr>
<td>Premature delivery</td>
<td>$36,597</td>
</tr>
<tr>
<td>Ectopic pregnancy</td>
<td>$4,399</td>
</tr>
<tr>
<td>Miscarriage</td>
<td>$841</td>
</tr>
<tr>
<td>Elective abortion</td>
<td>$1,950</td>
</tr>
</tbody>
</table>

Figure 8: Average Health Plan Cost from Birth Through First Year of Life$^{13}$

<table>
<thead>
<tr>
<th>Outcome</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Premature/Low Birth Weight</td>
<td>$54,149</td>
</tr>
<tr>
<td>Uncomplicated Birth</td>
<td>$4,389</td>
</tr>
</tbody>
</table>
Are LARCs Cost Effective?

Figure 9: Total Estimated Three-year Costs per 1,000 Patients by Contraceptive Method

- Etonogestrel Implant: $1,751,753
- Levonorgestrel IUD: $1,981,799
- Quarterly Injectable: $3,705,428
- Oral Contraceptive: $3,708,301
- Transdermal Contraceptive: $4,545,717
- No Contraceptive: $8,724,495

Did You Know?
On Average, Women Spend Three Decades Trying to Avoid Pregnancy.

Figure 10: Total Estimated Three-year Costs per 1,000 Patients by Contraceptive Method

- 0.6 years trying to become pregnant
- 0.6 years postpartum
- 1.5 years pregnant
- 2.7 years

~3 decades spent avoiding pregnancy
Figure 11: Consistent Contraception Use\textsuperscript{16}

**Contraception is highly effective**

Among U.S. women at risk of unintended pregnancy...

- the 68% who use contraception consistently and correctly account for only 5% of unintended pregnancies
References

1. (Trussel J., Contraception, May 2011;www.cdc.gov/reproductivehealth/unintendedpregnancy/contraception.htm)