“Continuation of Prescribed Compared With Over-the-Counter Oral Contraceptives”  
(Joseph E. Potter, PhD, Sarah McKinnon, PhD, Kristine Hopkins, PhD, Jon Amastae, PhD,  
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1. Review the project information at the National Institutes of Health (NIH) Research Portfolio  
Online Reporting Tools (RePORT) web site. Have the investigators achieved their original  
objectives with this and other publications?  

2. Read the description of recruitment of study participants in Reference 11 (Potter JE, White K,  
Hopkins K, Amastae J, Grossman D. Clinic versus over-the-counter access to oral contraception:  
choices women make in El Paso, Texas. Am J Public Health 2010;100:1130–6). Discuss the  
definition of “convenience sampling” and contrast with “probability sampling.” What are the  
avantages and disadvantages of each? Discuss why the authors chose convenience sampling for  
this study.  

3. What is indication bias, and how does it apply to this study? How did the authors compensate for  
this bias? Were they successful?  

4. Were all women using oral contraceptive pills (OCPs) for contraceptive purposes? If not, how  
would that affect continuation rates?  

5. Review the authors’ definition of discontinuation of OCPs. Discuss whether this definition for  
discontinuation would apply to your practice and your patients’ typical use of OCPs for  
contraception.  

6. Explain the basic concepts of Cox proportional hazards modeling. Review the three different  
models used by the authors. How do the models differ, and why were three different models  
used? Explain why the authors were so careful to test for non-proportional effects.  

7. Review Table 2. Are there differences between groups in characteristics of OCP users? How did  
the authors adjust for any differences while analyzing the effect of OCP provision on  
continuation? Do these adjustments succeed?  

8. What do we know about the women who were lost to follow-up or had missing or incomplete  
data? Should their characteristics have been reported in this paper? Does their exclusion  
introduce any bias in the models?  

9. Was there a difference in the cost of the pills to the clinic and over-the-counter users? What  
alternative forms of contraception were available to the participants? Only 1.5% of OCP users  
switched to another method of contraception during the 9-month period of observation. Is that  
typical for your patients—both for new starters and continuing users? How would costs and  
alternatives affect continuation rates?  

10. Are the authors’ findings relevant to your patients? How will you use the authors’ report to  
change your practice? Review the articles by Grossman et al and Foster et al in this issue. To  
enhance continuation, should the number of pill packs dispensed be increased, or should pills be  
available over the counter? Look at the Quick Poll at www.greenjournal.org to view the current  
practice of the respondents.