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**Transcript:** AMA President, Dr Michael Gannon, with Kathryn Robinson, ABC News, 13 December 2017

**Subject:** Women's health and contraceptive devices

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**KATHRYN ROBINSON:** The medical profession has been accused of using outdated abortion statistics to help promote the use of controversial long-acting contraceptives. It comes after an ABC investigation revealed growing fears around serious side effects from two popular contraceptive devices.

Dr Michael Gannon is National President of the Australian Medical Association and he joins us now from Canberra. Dr Gannon, good morning to you.

**DR MICHAEL GANNON:** Good morning, Kathryn.

**KATHRYN ROBINSON:** If we can first start with these abortion statistics today announcing that there's been a huge decline in those numbers. What do you make of that comment and what do you think is behind the decline, if indeed, there has been one?

**MICHAEL GANNON:** This is a good news story. If fewer are women going through the psychological and potentially physical trauma of undergoing termination of pregnancy, there are not many of those women that would be happy about having to undergo that procedure. In many ways it probably points to the success of access to decent family planning services, to long-acting, reversible contraception.

**KATHRYN ROBINSON:** Well on that, there are suggestions that the medical profession is using outdated statistics to promote these long-acting contraceptions. Is that a fair assessment?

**MICHAEL GANNON:** I was very disappointed by the report on ABC Television yesterday. It was full of gross inaccuracies. The reality is that long-acting, reversible contraceptions are a success story. They are- for many women, they provide not only adequate contraception, but prevention of anaemia, treatment of endometriosis, prevention of uterine cancers. In many ways they're safer than the combined oral contraceptive pill. They're safer than sterilisation. They're part of the story which has seen a threefold reduction in the hysterectomy rate in the past generation or so. So the numbers of terminations performed in Australia every year are in many ways a sign of a failure of contraception. We want to improve those services available to women wherever possible.

**KATHRYN ROBINSON:** If I can take you back to that story that you said contains gross inaccuracies; the key points of that story were that the products that are known as these long-acting reversible contraceptives have grown in popularity, but there are claims that some women have had a huge impact on their mental health for taking these medications for the first time. What inaccuracies did you find in the story?

**MICHAEL GANNON:** Well, it's important to acknowledge side effects do occur with various forms of hormonal contraception. Now that's true whether you take a tablet every day, whether you have an injection once every three months, whether you have a subcutaneous implant that's changed every three years, or you have an inuterine device that lasts five years. If you have side effects, you discuss them with your doctor, and it may be appropriate to remove the device. When it comes to oral contraception, you stop taking the pill, it's out of your system

within 24-48 hours. When it comes to a device inside the uterus or inside your arm, in 90-odd per cent of cases removal is simple, uncomplicated and the hormone's out of your system within 48-72 hours. Unlike major surgery like hysterectomy, unlike an operation like a vasectomy or a tubal ligation, they are reversible. That's part of their beauty.

**KATHRYN ROBINSON:** So the numbers quoted in that story was that the TGA had received more than 1000 reports from treating doctors and specialists of the side effects of these two types of long-form contraceptives after 954,000 Implanon devices were inserted. Is that a reasonable number for the side effects that you were talking about?

**MICHAEL GANNON:** Well, I wish we had more treatments that had only a one in 900 side effect rate. That is an acceptable rate of complications, especially when we're talk about side effects that, while very distressing to patients, are completely reversible with removal of the implant. That's true of both devices; whether you're talking about a subcutaneous implant that ideally stays in for three years, or an interuteron device which lasts up to five years. These are a success in women's health.

**KATHRYN ROBINSON:** So the Mirena and the Implanon, they are safe in your opinion?

**MICHAEL GANNON:** They are overwhelmingly safe. If we're talking about complication rates that you measuring in one or two per 1000, they are fabulous success stories. The alternatives have higher failure rates and potentially much greater side effects.

**KATHRYN ROBINSON:** Are you aware of family planning groups having accepted hospitality and going to events from the makers of these popular contraceptives, and if so, is that an acceptable practice?

**MICHAEL GANNON:** Certainly the rules in terms of hospitality from pharmaceutical companies, prosthesis and implant manufacturers have changed over the years. It is appropriate that industry provides education to doctors. It's appropriate that hospitality might be provided occasionally. What's so important is that those arrangements are completely transparent; that doctors who are paid to promote these devices disclose that. But if we're talking about these two devices, the Implanon and Mirena, are well and truly established. They don't need a good deal of promotion to the medical profession. They're very, very good devices that have served Australian women and women overseas for now something like 20 years.

**KATHRYN ROBINSON:** President of the Australian Medical Association Dr Michael Gannon, thank you for your time today.

**MICHAEL GANNON:** Pleasure, Kathryn.

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