



Adolescent Medicine

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May 24, 2005

Lester M. Crawford, DVM, PhD
Acting Commissioner
Food and Drug Administration
5600 Fishers Lane
Rockville, MD 20857

Dear Dr. Crawford,

We are writing to you with regard to Dr. Hager's "Minority Opinion" concerning the potential over-the-counter sale of Plan B emergency contraceptive pills (ECP). As staunch advocates of providing emergency contraception to adolescents, we were surprised and dismayed to see our research cited as part of an argument against over-the-counter availability of Plan B for adolescents, a proposal we firmly support.

Dr. Hager cited our finding that 81% of adolescents who received ECP directly from a pharmacist in Washington State needed medical follow up (for a new method of birth control or testing for sexually transmitted infections).¹ Unfortunately, this number, cited out of context, misses the more important finding of our study, a survey of 15-21 year old women who obtained ECP directly from pharmacists in Washington State in 1999.

Our study was in part motivated by the question we believe Dr. Hager shares: whether providing ECP without a physician visit made it more likely that adolescents went without needed medical care. Our findings suggest not. When we asked "if you couldn't get emergency contraception from the pharmacist, what would you do?" 42% of our respondents replied either "I don't know" or that they would "wait to see if I get pregnant." In addition, 41% of our respondents visited the pharmacy during evening or weekend hours, when doctor's offices are typically closed. We believe these findings strongly suggest that without the availability of ECP from the pharmacy, these young women would have remained at high risk for unwanted pregnancy.

In our survey, 81% of adolescents who obtained ECP from a pharmacist said they had health insurance, and 95% said they had a usual source of medical care. Although adolescents were overwhelmingly satisfied with the care they received from pharmacists, most of our respondents used the pharmacy to augment, not replace other medical care. Indeed, almost 2/3rds of the young women in our

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study who needed medical follow up said they planned to obtain medical care within the next month. However, for those women at risk for not receiving the necessary follow-up care, the pharmacy has tremendous potential as a point of entry into the rest of the health care system. For example, in Washington State pharmacists maintained an extensive referral list used to link women with more comprehensive reproductive health care services.

We appreciate the opportunity to place our research findings cited by Dr. Hager into their original context. Thank you for your consideration of our interest in this issue.

Sincerely,



Gina Sucato, MD, MPH
Assistant Professor of Adolescent Medicine
University of Pittsburgh School of Medicine



Jacqueline S. Gardner, PhD
Professor of Pharmacy
University of Washington School of Pharmacy

cc: Linda C. Giudice, MD, PhD

1. Sucato G, Gardner J, Koepsell T. Adolescents' use of emergency contraception provided by Washington state pharmacists. *J Pediatr Adolesc Gynecol* 2001; 14:163-169.