

Mental Health Considerations in Long-Term Contraceptive Use: A Comprehensive Review for Family Physicians on Screening, Monitoring, and Patient-Centered Care

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Abstract

Background: Hormonal contraceptives are widely used by women worldwide for reproductive health management. However, the relationship between contraceptive use and mental health outcomes remains controversial, with conflicting evidence regarding potential risks and benefits. Family physicians require clear guidance on screening, monitoring, and counseling patients regarding mental health considerations.

Objective: To provide a comprehensive narrative review of current evidence on the relationship between long-term contraceptive use and mental health outcomes, and to offer practical recommendations for family physicians regarding patient assessment and care.

Methods: We conducted a review of literature published between 2000–2024 using databases such as PubMed, Cochrane Library, EMBASE and PsycINFO to examine studies investigating the relationship between various hormonal contraceptive methods and mental health outcomes including depression, anxiety, and mood disorders in women of reproductive age.

Results: This review found mixed evidence regarding the impact of hormonal contraceptive use on mental health outcomes. Some studies indicated increased risks of depression and anxiety while others suggested neutral or even protective effects. Individual variability was notable, with influencing factors such as age, pre-existing psychiatric history, and hormonal formulation. Progestin-only methods and contraceptive initiation during adolescence is more consistently linked to higher mood-related risks, such as depression and anxiety, while certain combined oral contraceptives, especially those with anti-androgenic progestins, were associated with better outcomes or stabilization of mood.

Conclusion: Given the variability in mental health responses to hormonal contraception, clinicians should prioritize individualized risk assessment, informed counseling, and close monitoring. Tailoring contraceptive choices to each woman's mental health history is essential for both reproductive autonomy and emotional well-being. Future research should focus on longitudinal designs, standardized outcome measures, and more diverse populations to clarify causality and support personalized contraceptive care.

Keywords

Hormonal contraception, mental health, depression, anxiety, women's health, family medicine, patient-centered care.