

Effective Contraception Use

Choosing the right method of birth control to meet your needs

The Centers for Disease Control and Prevention (CDC) says almost half of all pregnancies in the U.S. are not planned. That's important because unplanned pregnancies can be risky for both mother and child. As a result, CDC has started a nationwide effort to make sure women at risk for unplanned pregnancies know what birth control methods are available — and understand how to use them.

Several things determine what method of birth control, or contraception, is best for you. Important things to consider include how often you have sex, if you plan to have a family later, your age and any health problems you may have.

Remember, it's important to talk to your healthcare provider before choosing contraception to determine what's right for you.

Barrier Methods

Common birth control methods like condoms (both male and female), cervical caps and diaphragms are called "barriers." These contraceptives are either placed in the woman's vagina or over the man's erect penis. They are widely available, nonpermanent forms of birth control.

Male Condom — This thin sheath fits over an erect penis and usually is made of latex. It is the only method of contraception that also provides protection from sexually transmitted infections (STIs), including HIV/AIDS. Condoms may cause latex allergies and require careful, consistent use to be effective.

Female Condom — This thin, polyurethane pouch lines the vagina and has two flexible rings. The inner ring is used to insert the device and hold it in place, and the outer ring covers the external genitalia. They offer greater protection than diaphragms, and typically are stronger and more likely to stand up to lubricants that are not water-based.

Diaphragm & Cervical Cap — A diaphragm is a soft latex rubber cup inserted into a woman's vagina, fitting over the cervix. It requires fitting by your healthcare provider and may not be appropriate for women until 6 weeks after giving birth, if they are allergic to latex or if they have other physical problems. A diaphragm is normally used along with a spermicidal cream or jelly that stops sperm from moving. A cervical cap is similar to a diaphragm but smaller and held in place by suction.

Remember to always use water-based lubricants with latex condoms and diaphragms, because oil-based lubricants can cause latex to break.

Hormonal Methods

There are several birth control options for women that work by delivering doses of one hormone or a combination of hormones to help prevent pregnancy. While highly effective in preventing pregnancy, none provide protection against STIs, and some may occasionally require use of additional contraceptive methods (for example, use a condom with oral contraception).

Oral Contraception — Commonly called "the pill," oral contraception is taken daily and typically contains two hormones, estrogen and progesterone. Progesterone-only pills also are available and may be better for women who

are breastfeeding, women older than 35 and those with certain medical histories. Both types of pills work by inhibiting ovulation (release of an egg by the ovaries) and making it difficult for sperm to penetrate the uterus. Many different kinds of the pill are available to meet individual needs.

Vaginal Ring — This flexible ring is inserted high in the vagina and releases hormones similar to those in most birth control pills. It can be left in for up to 3 weeks and provide 1 month of protection, making it more convenient than the pill, but it is not recommended for women who smoke.

Injections — These nonpermanent forms of contraception contain hormones administered by deep intramuscular injection. Like the pill, both progesterone-only and combined progesterone/estrogen injectable contraceptives are available. They are administered every 3 months.

Implants — These small tubes are about the size of a matchstick and are placed just under the skin in a woman's upper arm. They release progesterone to prevent pregnancy and are effective for up to 5 years; however, they can be removed at any time. They can alter menstruation and do have some common side effects.

Transdermal Patch — This adhesive patch resembles a small bandage and contains the hormones estrogen and progesterone. It is applied directly to the skin every week for 3 weeks, followed by 7 days off the patch when the user gets a period. Although easy to use, some are concerned the higher dose of hormones delivered by contraceptive patches may lead to a higher risk of blood clots and other serious side effects.

IUDs

An IUD is a small plastic device that contains either copper or a hormone and is inserted into a woman's uterine cavity. It prevents pregnancy by impairing viability of sperm and interfering with sperm movement.

IUDs are highly effective and last up to 10 years, but they require insertion and removal by a healthcare provider, have some side effects and offer no protection from STIs. They are not for women who are pregnant, have certain female cancers, or have uterine fibroid or other anatomical abnormalities.

Surgical Options

For women, tubal ligation is the most common form of surgical birth control. It involves removing, tying off or placing an object in the fallopian tubes so eggs cannot get to the uterus from the ovaries. This amounts to female sterilization and is not reversible, although menstruation does continue normally following the procedure.

For men, vasectomy is the most common permanent birth control. The procedure involves tying or sealing the tubes in the scrotum that carry sperm to the penis, preventing sperm from being included in the man's semen. It does not affect the man's ability to maintain an erection or to ejaculate. ■

Resource

CDC. (2005, Nov. 18). Contraceptive use: United States and territories, behavioral risk factor surveillance system, 2002. *Morbidity and Mortality Weekly Report*, 54(SS06), 1-72. Retrieved Feb. 23, 2005 from the World Wide Web: <http://www.cdc.gov/mmwr/preview/mmwrhtml/ss5406a1.htm>

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