

## A Guide to Contraception



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## A Guide to Contraception

This booklet will help you choose a form of contraceptive which works for you. The right choice means you will be able to relax and enjoy sex without the worry of an unplanned pregnancy.



**Disclaimer:** This booklet is intended as a guide only. It is for your information and should not replace the advice of a doctor.

If you have any concerns about your sexual health, please talk to your GP or local STI/GUM clinic.

### How does pregnancy happen?

Pregnancy happens when a sperm from the man meets and enters an egg from the woman.

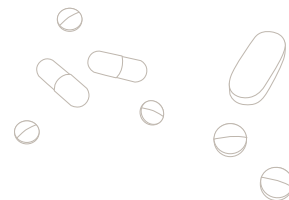
During sexual intercourse (sex) or 'heavy petting', when a man ejaculates (comes), fluid containing sperm is released from his penis. If this fluid is released inside the woman's vagina or gets in contact with vaginal fluids near the entrance to the woman's vagina, it can travel up the vagina to the womb where it meets and fertilises (enters) the egg.

An egg is released from a woman's ovaries once every month. At this time, the woman is fertile (able to get pregnant).

### What is contraception?

Contraception is when the man's sperm is stopped from meeting and fertilising the woman's egg. There are different methods of contraception.

This booklet gives you general information on each method. You can ask a doctor, practice nurse or family planning clinic for more information on any of the methods. If you prefer not to see your own family doctor, you can choose a different doctor for family planning and contraception.



## Myths about pregnancy and contraception

There are many myths (untrue beliefs) about pregnancy and contraception. These are the facts.

### A woman can still get pregnant:

- if a man pulls out of her vagina before he 'comes',
- if she has sex when she has a period,
- if she is breastfeeding,
- if it is the first time she has sex,
- if she does not have an orgasm,
- if she douches (squirts water or other liquid into the vagina, which can be harmful), or
- in any sexual position.



## What type of contraception should you use?

There is no one ideal method of contraception. Choose a method of contraception that suits you and your lifestyle. The following pages give you information on the various types of contraception. Your doctor or family planning clinic will help you choose the most suitable method of contraception for you.

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### Injectable contraceptive



**Description** An injection releases the hormone progesterone very slowly into the body. The hormone stops a woman releasing an egg every month (ovulation). The injection lasts 3 months.

**Reliability** Fewer than 1 woman in every 100 will get pregnant in a year.

### Contraceptive implant



**Description** This is a small plastic rod. It is inserted into the inner part of the upper arm. It slowly releases the hormone progesterone into the body, which stops ovulation. It also thickens the mucus at the neck of the womb, making it difficult for sperm to enter. It lasts for 3 years.

**Reliability** During initial trials, no pregnancies were reported.

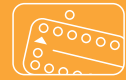
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## Your Sexual Health

### Methods of contraception

The following is a list of the contraceptive methods available and general information on how they work and how reliable each one is. You should discuss which method is best for you with your doctor, practice nurse or family planning clinic.

#### Combined pill



**Description** This contains two hormones – oestrogen and progesterone – that stop a woman from releasing an egg each month (ovulation).

**Reliability** With careful use, fewer than 1 woman in every 100 will get pregnant in a year. With less careful use, 3 or more women in every 100 will get pregnant in a year.

#### Progesterone-only pill



**Description** The hormone progesterone causes changes in a woman's body that make it difficult for sperm to enter the womb or for the womb to accept a fertilised egg. In some women it prevents ovulation. It must be taken at the same time every day.

**Reliability** With careful use, 1 woman in every 100 will get pregnant in a year. With less careful use, 4 women in every 100 will get pregnant in a year.

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## Your Sexual Health

### Intrauterine contraceptive device (IUCD)



**Description** This is a small plastic and copper device. It is put into the womb and prevents the sperm from meeting the egg or may prevent an egg from settling in the womb. It lasts for 5 years.

**Reliability** Fewer than 2 women in every 100 will get pregnant in a year.

### Intrauterine system (IUS)



**Description** This is a small plastic device. It has a sleeve, which releases the hormone progesterone and is put into the womb. The IUS lasts for 5 years and works in three ways.

- It thickens the mucus at the neck of the womb, making it difficult for the sperm to reach the egg.
- It stops the sperm from fertilising an egg within the womb.
- It makes the lining of the womb thin, making periods lighter and shorter.

**Reliability** Fewer than 2 women in every 1000 will get pregnant in a year. There is only one IUS available. It is called Mirena.

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## Male condom



Description

The condom is made of very thin rubber. It is put over the erect penis and stops the sperm from entering the woman's vagina.

Reliability

With careful use, 2 women in every 100 will get pregnant in a year. With less careful use, 2 to 25 women in every 100 will get pregnant in a year.

## Female condom

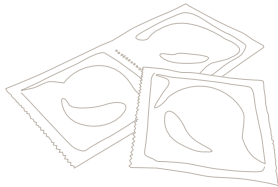


Description

A soft polyurethane sheath lines the vagina and the area just outside. It prevents sperm from entering the vagina.

Reliability

There have been no large studies, but research suggests that it should be as effective as the male condom.



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## Diaphragm or cap with spermicide



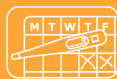
Description

A flexible rubber device used with spermicide (a gel or cream that kills sperm) is put into the vagina to cover the cervix (the neck of the womb). It must stay in for at least 6 hours after sex.

Reliability

With careful use, 2 in every 100 women will get pregnant in a year. With less careful use, 2 to 15 women in every 100 will get pregnant in a year.

## Natural methods



Description

A woman keeps a daily record of her body temperature, changes in cervical mucus and other signs of ovulation. These tell her when she is most fertile and so when she should avoid sex or use a barrier method such as a condom or diaphragm.

Natural methods should be learnt from a specially trained teacher or GP. Voluntary organisations such as ACCORD and NAOMI provide training. You will find contact details in the phone book.

Reliability

With careful use, 2 in every 100 women will get pregnant in a year. With less careful use, 2 to 20 women in every 100 will get pregnant in a year.

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## Your Sexual Health

### Contraceptive patch



Description

A thin light brown patch is applied to the skin, once a week for three weeks each month. It contains two hormones – oestrogen and progesterone – that stop a woman from releasing an egg each month (ovulation).

Reliability

With careful use, it is as reliable as the combined pill.

### Vaginal ring



Description

A flexible, see-through, plastic ring is put into the vagina by the woman herself for 3 weeks of every month. It contains two hormones – oestrogen and progesterone – that stop a woman from releasing an egg each month (ovulation).

Reliability

With careful use, fewer than 1 woman in every 100 will get pregnant in a year. With less careful use, 3 or more women in every 100 will get pregnant in a year.

There is only one vaginal ring currently available. It is called NuvaRing.

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## Your Sexual Health

### Female sterilisation (tubal ligation)



Description

The fallopian tubes, which carry the eggs from the ovaries into the womb, are cut or blocked so that the eggs cannot travel down them to meet with the sperm. This is permanent.

Reliability

1 to 3 women in every 1000 may become pregnant depending on the type of operation used.

### Male sterilisation (vasectomy)



Description

The tubes carrying the sperm are cut, so sperm are not present in the semen that is ejaculated when the man 'comes'. This is permanent.

Reliability

About 1 in every 1000 men will become fertile again.

**These are permanent forms of contraception and should only be decided on after careful consultation with your doctor.**

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## Contraception for the older woman

As you get older you may notice changes in the pattern of your periods. When periods finally stop you have reached the menopause. You should still continue using contraception, however, until you have not had a period or any bleeding for:

- 2 years if you are aged under 50, or
- 1 year if you are aged 50 or over.

Your doctor or family planning clinic will be able to advise you about contraception until then.

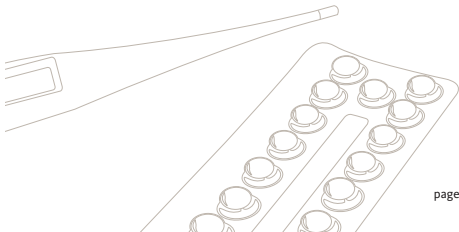
## After you have a baby

Not all contraceptive methods can be used straight after birth. Your doctor or family planning clinic will be able to advise you on a suitable method.

## Planning a family

Apart from sterilisation, all other methods of contraception are temporary. By using contraception sensibly and responsibly you can plan a pregnancy.

When you use a method of contraception that contains hormones, it may take a short time to return to your normal fertility (ability to get pregnant) once you stop using that method.



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Emergency contraception can only be provided by a doctor and should not be regarded as a regular method of contraception.

Remember, emergency contraception cannot protect against a sexually transmitted infection. Ask your doctor's advice.

## Sexually transmitted infections (STIs)

Anyone, man or woman, can get a sexually transmitted infection (STI) if they do not practise safe sex.

Always use a condom, until you can be sure that you know your partner's sexual history. Condoms are the only method of contraception that may protect you and your partner from STIs, including HIV (the virus that causes AIDS).

When buying a condom, make sure it is a good quality condom. Look for the BSI Kitemark or CE mark.



**Get advice from your doctor, a family planning clinic, an STI clinic or genito-urinary medicine (GUM) clinic if you are worried about STIs or are sexually active and notice any of the following symptoms:**

- unusual discharge from penis or vagina,
- pain when passing urine,
- unusual sores or blisters in the genital area,
- itching or irritation in the genital area, or
- pain during sex.

Once diagnosed, most STIs (except for HIV) can be cured with treatment. It is, however, important to get treatment early, as some can have long term effects.

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If there is any possibility that you may become pregnant, start taking folic acid tablets (400 micrograms) today.

Continue to take folic acid until you attend the maternity hospital and then follow the instructions of your doctor.



## Use your contraceptive method carefully

To prevent a pregnancy, all contraceptive methods have to be used carefully. Many unplanned pregnancies happen because a contraceptive method has not been used carefully. So choose a method of contraception that suits your lifestyle and find out how to use it carefully.

## Emergency contraception

If you are unlucky or make a mistake with your contraception, contact your doctor as soon as possible after unprotected sex.

The main method of emergency contraception is the morning-after pill.

This is a special pill that must be started within three days (72 hours) of having sex. This should be taken as soon as possible. Do not wait.

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## Your sexual health Your choice

[www.healthpromotion.ie](http://www.healthpromotion.ie)



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