



What You Need To Know About Contraception

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What you need to know about contraception

In this leaflet, we describe 11 types of contraception methods. We tell you what they are, how they work, and how effective they are in preventing pregnancy when you use them:

- perfectly (using them as directed and all the time) – **perfect use** or
- typically (not always using them correctly) – **typical use**.

We also tell you the advantages and disadvantages of each type of contraception listed.

You should talk to your doctor or Family Planning Clinic about which method of contraception works best for you.

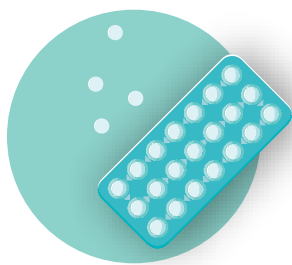
Finally, we tell you about emergency contraception.

To help you decide what contraception might suit you best, we have divided the 11 different types of contraception into two categories: A and B.

Category A are methods that don't depend on you remembering to take or use them each time you have sex.



Category B are methods that depend on you remembering to take or use them regularly or each time you have sex.



Category A

Methods that don't depend on you remembering to take or use them regularly or each time you have sex

If you use one of the four types of contraception in this section, you will **not** have to remember to take or use it each time you have sex. You are protected against pregnancy over 99% of the time for all four methods listed when you use them perfectly (used correctly). If your use is typical, you will also have a high level of protection.

The four types of contraception in this category are:

1. Contraceptive implant
2. Copper Coil IUCD (Intrauterine Copper Device)
3. Hormonal Coil IUS (Intrauterine System)
4. Contraceptive injection



1 Contraceptive implant

What is it?

A small flexible rod put under the skin of the upper arm. You can feel it under the skin but you can't see it. It can only be inserted and removed by a specially trained doctor.

How does it work?

It slowly releases progestogen, an artificial form of the hormone progesterone. It works by:

- stopping ovulation (an egg being released from your ovaries)
- thickening the mucus at the neck of the womb (uterus) so that it is difficult for sperm to enter the womb

- thinning the lining of the womb and this prevents a fertilised egg from settling (implanting) in the womb

How effective is it?

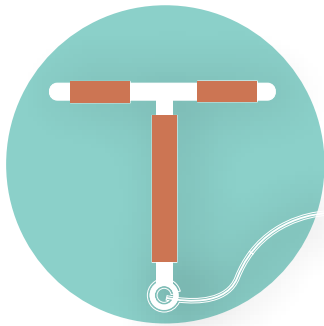
Perfect use (used correctly): **over 99%**

Advantages

- ✓ It works for up to 3 years.
- ✓ It may reduce painful periods.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ It does not protect you against sexually transmitted infections (STIs).
- ✗ Its effectiveness may be reduced by taking certain medications.



2 Copper Coil IUCD (Intrauterine Copper Device)

What is it?

A small T-shaped plastic frame with copper wire (coil). This is put into the womb (uterus). It can only be inserted and removed by a specially trained doctor.

How does it work?

It works by:

- stopping the sperm from reaching and combining with the egg
- preventing a fertilised egg from settling in the womb

How effective is it?

Perfect use (used correctly): **over 99%**

Advantages

- ✓ It can stay in place for 5 to 10 years.
- ✓ If inserted after the age of 40, it may stay in place until the menopause.
- ✓ It works as soon as it is inserted.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ Your periods may be heavier or longer.
- ✗ It does not protect you against sexually transmitted infections (STIs).



3 Hormonal Coil IUS (Intrauterine System)

What is it?

A small T-shaped plastic device. This is put into the womb (uterus). It can only be inserted and removed by a specially trained doctor.

How does it work?

The IUS contains progestogen, an artificial form of the hormone progesterone.

It works by:

- stopping the sperm from reaching the egg
- thinning the lining of the womb to help prevent a fertilised egg from settling (implanting) in the womb

How effective is it?

Perfect use (used correctly): **over 99%**

Advantages

- ✓ Protects you for 3-6 years depending on the device. But you can get it taken out sooner.
- ✓ If inserted after the age of 45, it may stay in place until the menopause.
- ✓ Periods often become lighter, shorter and less painful.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ You might have irregular bleeding or spotting in the first 6 months.
- ✗ It does not protect you against sexually transmitted infections (STIs).



4 Contraceptive injection

What is it?

An injection of an artificial form of the hormone progesterone is injected into your arm or bum.

How does it work?

Progestogen is slowly absorbed from the muscle into the blood over a course of 12 weeks. It works by:

- stopping ovulation (an egg being released from your ovaries)
- thickening the mucus at the neck of the womb (uterus) so that it is difficult for sperm to enter the womb
- thinning the lining of the womb and this prevents a fertilised egg from settling (implanting) in the womb

How effective is it?

Perfect use (used correctly): **over 99%**

Typical use (not always used correctly):
over 94%

Advantages

- ✓ It works for up to 12 weeks – you don't have to think about contraception during this time.
- ✓ It is useful if you are likely to forget to take a pill daily.
- ✓ It is suitable for women over 35 who smoke.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ It can't be removed from the body so side effects may continue while it works and for some time afterwards.
- ✗ It can take 6 to 12 months for periods and fertility to return to normal.
- ✗ It does not protect you against sexually transmitted infections (STIs).

Category B

Methods that depend on you remembering to take or use them regularly or each time you have sex

If you decide to use one of the seven types of contraception in this category, you have to remember to use or take it regularly or each time you have sex. This means that your risk of getting pregnant is higher with the following types of contraception if you don't use them perfectly (correctly).

The seven types of contraception in this category are:

1. Contraceptive patch
2. Vaginal ring
3. Combined pill
4. Progestogen-only pill (mini pill)
5. External (male) condom
6. Internal (female) condom
7. Diaphragm with spermicide (the diaphragm is also known as the cap)



1 Contraceptive patch

What is it?

A patch is similar to a small plaster of 4cm x 5cm. Each patch lasts for 1 week; you put a new patch on every week for 3 weeks (21 days) in a row without a break, then you may be told to wait for a few days – up to 7 days – before putting on a new patch. This advice will depend on your doctor's instructions.

How does it work?

The patch releases the artificial form of the hormones - oestrogen and progesterone - into your body. It works by:

- stopping ovulation (an egg being released from your ovaries)
- thickening the mucus at the neck of the womb (uterus) so it is difficult for sperm to enter the womb

- thinning the lining of the womb and this prevents a fertilised egg from settling (implanting) in the womb

How effective is it?

Perfect use (used correctly): **over 99%**

Typical use (not always used correctly):
over 91%

Advantages

- ✓ It may be easier for you to remember to use than taking a pill every day.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ It is not advised if you smoke and you are over 35.
- ✗ Its effectiveness may be reduced by taking certain medications.
- ✗ It may not be suitable if you are breastfeeding. Check with your doctor.
- ✗ It is not suitable if you are obese.
- ✗ It does not protect you against sexually transmitted infections (STIs).



2 Vaginal ring

What is it?

It is a small flexible ring. You put the ring in your vagina and leave it there for 3 weeks (21 days) without a break. Then you may be told to wait for a few days – up to 7 days – before putting in the new ring. This advice will depend on your doctor's instructions.

How does it work?

The vaginal ring releases the artificial form of the hormones - oestrogen and progesterone - which are absorbed from your vagina and into your blood. It works by:

- stopping ovulation (an egg being released from your ovaries)
- thickening the mucus at the neck of the womb (uterus) so it is difficult for sperm to enter the womb

- thinning the lining of the womb and this prevents a fertilised egg from settling (implanting) in the womb

How effective is it?

Perfect use (used correctly): **over 99%**

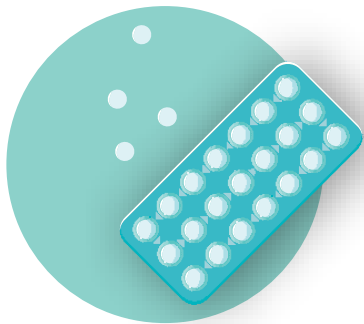
Typical use (not always used correctly):
over 91%

Advantages

- ✓ The ring stays in so you don't have to think about contraception every day.
- ✓ You insert it yourself.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ You must be comfortable with inserting and removing it.
- ✗ Its effectiveness may be reduced by taking certain medications.
- ✗ It is not suitable if you smoke and are over 35 years of age.
- ✗ It is not suitable if you are obese.
- ✗ It may not be suitable if you are breastfeeding. Check with your doctor.
- ✗ It does not protect you against sexually transmitted infections (STIs).



3 Combined pill

What is it?

It is a pill that you need to take at around the same time every day. You could get pregnant if you do not do this. Some pills can be taken continuously without a break. Check with a doctor.

How does it work?

The combined pill releases the artificial form of the hormones - oestrogen and progesterone - which are absorbed into your body. It works by:

- stopping ovulation (an egg being released from your ovaries)
- thickening the mucus at the neck of the womb (uterus) so it is difficult for sperm to enter the womb

- thinning the lining of the womb and this prevents a fertilised egg from settling (implanting) in the womb

How effective is it?

Perfect use (used correctly): **over 99%**

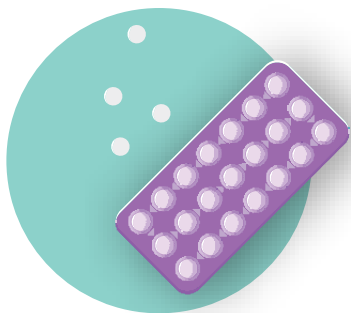
Typical use (not always used correctly):
over 91%

Advantages

- ✓ It often reduces bleeding and period pain, and may help with premenstrual symptoms.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ If you miss a pill, or you are vomiting or have severe diarrhoea, it can be less effective.
- ✗ It is not suitable if you smoke and are over 35 years of age.
- ✗ It is not suitable if you are obese.
- ✗ It may not be suitable if you are breastfeeding. Check with your doctor.
- ✗ Its effectiveness may be reduced by taking certain medications.
- ✗ It does not protect you against sexually transmitted infections (STIs).



4 Progestogen-only pill (mini pill)

What is it?

The mini pill is a progestogen-only pill and has no oestrogen in it. You need to take the pill at around the same time every day. You could get pregnant if you do not do this. You must take the pills continuously **without** a 7 day break.

How does it work?

The mini-pill releases the artificial form of the hormone progesterone into your body. It works by:

- stopping ovulation (an egg being released from your ovaries)
- thickening the mucus at the neck of the womb (uterus) so it is difficult for sperm to enter the womb

- thinning the lining of the womb and this prevents a fertilised egg from settling (implanting) in the womb

How effective it is?

Perfect use (used correctly): **over 99%**

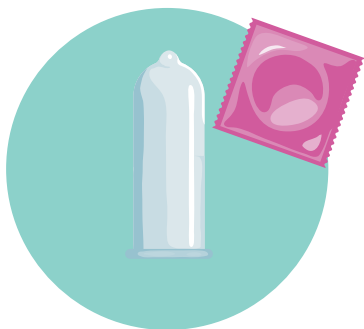
Typical use (not always used correctly):
over 91%

Advantages

- ✓ It can be used by women who smoke and are over 35.
- ✓ It can be used when breastfeeding.
- ✓ It does not interrupt sex.

Disadvantages

- ✗ If you miss a pill, or you are vomiting or have severe diarrhoea, it can be less effective.
- ✗ It may cause irregular periods.
- ✗ Its effectiveness may be reduced by taking certain medications.
- ✗ It does not protect you against sexually transmitted infections (STIs).



5 External (male) condom

What is it?

A barrier method put over the erect (stiff) penis. It helps to prevent getting or passing on a sexually transmitted infection (STI), including HIV, and helps to prevent pregnancy.

How does it work?

The condom is rolled onto the erect penis before sex. The condom prevents sperm from entering your womb during sex.

How effective is it?

Perfect use (used correctly): **98%**

Typical use (not always used correctly):
82%

Advantages

- ✓ Condoms protect you from a sexually transmitted infection (STI), including HIV.
- ✓ They are useful if you want to avoid taking hormones.
- ✓ They allow both partners to take responsibility for contraception.

Disadvantages

- ✗ Condoms may slip off or split if not used correctly and if they are the wrong size or shape.
- ✗ Condoms can get damaged if handled roughly or used with an oil-based lubricant like Vaseline.



6 Internal (female) condom

What is it?

An internal condom is a thin pouch. It looks similar to the external male condom.

How does it work?

You put an internal condom carefully inside your vagina, and it will create a barrier that stops sperm from entering your womb during sex.

How effective is it?

Perfect use (used correctly): **95%**

Typical use (not always used correctly):
79%

Advantages

- ✓ Condoms protect you from a sexually transmitted infection (STI).
- ✓ They are useful if you want to avoid taking hormones.
- ✓ You can put it in just before sex.

Disadvantages

- ✗ You need to practise inserting the internal condom so that it works properly.
- ✗ You may find internal condoms difficult to find as they are not as widely available as male (external) condoms.



7 Diaphragm or Cap

What is it?

The diaphragm or cap is a soft silicone device which is put into the vagina to cover the cervix (neck of womb). A doctor will examine you and advise on the correct size. You can use spermicide to cover the diaphragm. This will help it work better.

How does it work?

The diaphragm covers the cervix, and this stops the sperm from reaching the egg. Spermicide is a gel that kills sperm and is most effective in protecting against pregnancy when used with another contraceptive method like a diaphragm.

How effective it is?

Perfect use (used correctly): **92% to 96%**

Typical use (not always used correctly):

71% to 88%

Advantages

- ✓ You can put the diaphragm in place any time before you have sex.
- ✓ You can reuse the diaphragm after careful washing with water.
- ✓ It is useful if you want to avoid taking hormones.

Disadvantages

- ✗ You need to have a check-up at least once a year to make sure it still fits.
- ✗ You may need a different size diaphragm if you put on or lose more than three kilos (seven pounds) in weight.
- ✗ You must leave the diaphragm in place for at least 6 hours after sex, but must not leave it in for more than 24 hours.
- ✗ It does not protect you against sexually transmitted infections (STIs).
- ✗ If you have sex again, you need to use extra spermicide.

Emergency contraception

Emergency contraception is a back-up contraception. You can use emergency contraception to avoid an unplanned pregnancy after you have had sex without using contraception, or if your method of contraception has failed (for example, the condom slipped or you missed a pill).

You can use emergency contraception up to 5 days after having unprotected sex.

You can choose from two different types of emergency contraception options:

1. The emergency contraceptive pill (ECP)
2. Copper Coil (also known as post-coital IUCD)

Let's look at each in turn.

1. The emergency contraceptive pill (ECP)

There are two different types of ECP. The 3-day pill and the 5-day pill.

3-day pill

- The 3-day pill is called levonorgestrel.
- The time limit for use after unprotected sex is 3 days (72 hours).
- It's important to remember that it works better the sooner you take it.
- It is 99% effective.

5-day pill

- The 5-day pill is called ulipristal acetate.
- The time limit for use after unprotected sex is 5 days (120 hours).
- It's important to remember that it works better the sooner you take it.
- It is 99.5% effective.

You do not need a prescription for the ECP. You can get the ECP directly from your pharmacist (chemist). If you have a medical card you can access it for free from your pharmacist.

2. Copper Coil (also known as post-coital IUCD)

The copper coil can be fitted as emergency contraception by a family planning clinic or trained doctor.

- It can be fitted up to 5 days after sex (120 hours).
- It is 99% effective.

You can also choose to keep the post coital IUCD as an on-going method of contraception. See page 6 for more information.

Get advice on the right emergency contraceptive for you.

You should talk to your doctor or pharmacist about which method of emergency contraception will work best for you.

It is **very important** that you choose the right method of emergency contraception particular to your situation. This will depend on factors such as:

- when you had your last period
- how long it has been since you had unprotected sex
- the date your contraceptive method failed

Remember, emergency contraception does not protect you from sexually transmitted infections (STIs).

What You Need To Know About Contraception

The information in this leaflet has been produced by the Sexual Health and Crisis Pregnancy Programme (SHCPP), HSE Health and Wellbeing. The SHCPP would like to thank Dr Deirdre Lundy, Women's Health Expert, for her time and expertise in the development of this resource.

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Disclaimer

The HSE SHCPP have made every effort to ensure that the information in this leaflet is accurate before going to print.

The information does not replace medical advice, diagnosis or treatment.

If you have questions or concerns or need more information, ask your doctor, pharmacist (chemist) or local family planning clinic.

**You can order copies of
this booklet free of charge from
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For more information
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sexualwellbeing.ie



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