

# Chapter 4

## Reproducible Master F

### Birth Control Options

Method*	Effectiveness	Advantages	Disadvantages
<b>Abstinence</b>	100%	No cost Prevents STIs No harmful effects to health	Requires commitment of both partners
<b>Permanent Methods</b>			
<b>Vasectomy</b> Male sterilization	99.9%	Permanent One-time procedure	Requires surgery Difficult or impossible to reverse Pain, bleeding, or infection post surgery
<b>Nonsurgical sterilization for females</b> Tiny metal coils placed in fallopian tubes cause scar tissue which blocks tubes ( <i>called hysteroscopic occlusion</i> )	99.8%	Prevents sperm from meeting egg Does not require incisions One-time procedure	Requires placement by physician Mild to moderate pain during procedure Some vaginal bleeding after procedure Rare pregnancy may be ectopic (in the tube)
<b>Tubal ligation</b> Female sterilization	99.6%	Permanent One-time procedure Blocks fallopian tubes to prevent pregnancy	Requires surgery with abdominal incision Difficult or impossible to reverse Pain, bleeding, or infection post surgery Possible tubal pregnancy
<b>Implantable Device</b>			
<b>Intrauterine device (IUD)</b> Small plastic device with copper inserted into uterus for up to 10 years	99.2 to 99.4%	Lasts up to 10 years	Must be inserted or removed by physician Insertion can cause pelvic infection due to bacteria introduced in uterus May cause cramps, bleeding, infertility, or perforation of uterus

Hormonal Methods			
<b>Skin patch</b> Hormone patch containing progestin and estrogen  Worn on buttocks, lower abdomen, or upper body	98 to 99%	Releases hormone over a weeklong period  Advantages are similar to oral contraceptives	Prescription only  Must replace patch weekly  Contains 60% more estrogen that may increase risk of side effects  No patch worn during 4th week when woman has menstrual period  May cause skin reactions at the application site, breast tenderness, or headaches
<b>Birth control pill</b> Oral contraceptive that contains the hormones estrogen and progestin  Comes in different dosages depending on woman's needs	92 to 99%	Suppresses ovulation  Lighter menstrual flow  Fewer PMS symptoms  Can reduce risk of ovarian cancer, benign ovarian cysts, and endometrial cancer  Less acne	Prescription only  Must be taken daily on schedule  May cause breast tenderness or weight changes  Rare cardiovascular disease, including high blood pressure, heart attack, or stroke  Antibiotics may reduce effectiveness and may require a back-up contraception
<b>Injection, 3-month</b> Injectable form of progestin	97%	Inhibits ovulation or prevents sperm from meeting egg  Doesn't require daily use  May cause fewer and lighter menstrual periods  Reduces menstrual cramps	Prescription only  Should not be used more than 2 years because it can cause temporary bone loss, increasing risk of fracture  May cause irregular bleeding, weight gain, breast tenderness, or headaches
<b>Implantable rod</b> A single match-size rod placed under the skin in the upper arm. These are inserted and removed through a small incision	99%	Effectiveness for three years; can be removed at any time	Irregular periods and spotting  Decreased effectiveness in overweight women

Barrier Methods			
<b>Diaphragm</b> Dome-shaped latex disk that covers cervix Often used with spermicide for extra protection	84 to 94%	Inserted in vagina by woman herself Barrier that keeps sperm from entering uterus	Requires fitting by physician Prescription only Must be left in place at least 6 hours after intercourse to prevent pregnancy May cause irritation, allergic reaction to latex, or urinary infection Risk of toxic shock syndrome if left in place longer than recommended
<b>Vaginal ring</b> Flexible ring about 2 inches in diameter Releases the hormones estrogen and progestin	92%	Inserted into vagina by woman herself Ring is effective for 3 weeks (must be removed for 1 week) Periods may be more regular, lighter, and shorter Reduces menstrual cramps	Prescription only May cause vaginal infection or irritation May require back-up contraception if ring is expelled and remains out of vagina more than 3 hours Other symptoms similar to oral contraceptives
<b>Contraceptive sponge</b> Small, disk-shaped sponge with spermicide with loop for removal	84 to 91% (before first pregnancies)	Inserted into vagina by woman herself Effective for 24 hours after insertion Nonprescription	Must be left in place at least 6 hours after intercourse Risk of toxic shock syndrome if sponge is left in vagina more than 30 hours Lower effectiveness rate (68 to 80%) for women who have had children
<b>Cervical cap</b> A soft latex cup with rim that fits snugly around cervix	84 to 91% (before first pregnancies)	Inserted by woman herself Barrier that keeps sperm from reaching uterus	Requires fitting by doctor Prescription only May cause irritation or allergic reaction to latex Must be left in place 6 to 8 hours after intercourse to prevent pregnancy Less effective for women who have had children Risk of toxic shock syndrome if left in vagina longer than recommended

<b>Male condom</b> Latex or polyurethane sheath worn over erect penis during intercourse May use with spermicide to be more effective	88%	Easy to purchase Nonprescription Except for abstinence, condoms are best protection against STIs Keeps sperm from meeting egg	Must apply immediately before intercourse Can use only once, then discard May cause allergic reactions from latex
<b>Cervical shield</b> A dome-shaped latex cup with a valve that creates suction to fit tight against cervix	85% (before first pregnancies)	Inserted in vagina by woman herself Barrier that keeps sperm from reaching uterus	Requires fitting by doctor Prescription only May cause irritation or allergic reaction to latex Must be left in place 6 to 8 hours after intercourse to prevent pregnancy Possible risk of toxic shock syndrome Less effective for women who have had children
<b>Periodic abstinence</b> Also called natural family planning	80%	No medical or hormonal side effects Limited cost for thermometer and calendar	Requires frequent monitoring of body functions, such as temperature and cervical mucus changes, and recording Requires avoiding intercourse near ovulation period Requires physician instruction
<b>Female condom</b> Polyurethane sheath similar to male condom Closed end has flexible ring for easier removal from vagina	74%	Nonprescription May give some protection against STIs	Limited protection against STIs, but not as effective as latex condom Must apply immediately before intercourse, use only once, and discard May cause irritation and allergic reactions
<b>Spermicide</b>	74%	Lower cost Contain sperm-killing chemicals Nonprescription	Frequent use may cause skin irritation Products that contain nonoxynol-9 may increase risk of HIV infection

\* Contraceptive methods offer no protection against STIs except abstinence, which prevents them, and condoms, which offer some protection.

*Sources:*

U.S. Food and Drug Administration

U.S. Department of Health and Human Services, National Women's Health Information Center

The American College of Obstetricians and Gynecologists

The Mayo Clinic