

Birth control: which method is right for me?



There are a number of methods available to help prevent pregnancy, with some of the most popular including condoms and birth control pills. Deciding which method is right can be tough because there are many issues to consider, including costs, future pregnancy plans, side effects, and others.

How effective are contraceptive methods?

Most birth control methods are quite effective if used properly. However, contraceptives can fail for a number of reasons, including incorrect use and failure of the medication, device, or method itself.

Certain birth control methods, such as intrauterine devices (IUDs) and injectable or implanted methods, have a low risk of failure (pregnancy) - less than 1%. This is because they are the easiest to use properly. You should consider these methods if you want the lowest chance of a mistake or failure, which could lead to pregnancy.

Overall, birth control methods that are designed for use at or near the time of sex (eg, the condom, diaphragm) are generally less effective than other birth control methods (eg, IUD, birth control pill) and can fail in 12-20 % of cases. Hormonal contraceptives (pills, vaginal rings, patches) are likely to fail in 9%.

How to choose ideal birth control method?

It can be difficult to decide which birth control method is best because of the wide variety of options available. The best method is one that you will use consistently, is acceptable to you and your partner, and does not cause bothersome side effects. Other factors to consider include:

- How effective is the method?
- Is it convenient? Will I remember to use it?
- Do I have to use/take it every day?
- Is this method reversible? Can I get pregnant immediately after stopping it?
- Will this method cause me to bleed more or less?
- Are there side effects or potential complications?
- Is this method affordable?
- Does this method protect against sexually transmitted diseases?

No method of birth control is perfect. You must balance the advantages and disadvantages of each method and then choose the method that you will be able to use consistently and correctly.

What about emergency contraception?



Emergency contraception, sometimes called the "morning after pill", refers to the use of medication to prevent pregnancy. You can use the morning after pill if you forget to take your birth control pill, if a condom breaks during sex, or if you have unprotected sex for other reasons (including victims of sexual assault).

Morning after pills may be hormonal (eg, PlanB, Obe-Step®) or nonhormonal (eg, Ella®). Unfortunately these pills are not currently available in UAE. An IUD (coil, or loop) can also be inserted for use as emergency contraception, and is more effective at preventing a pregnancy than pills. Detailed information on emergency contraception can be provided by your gynecologist.

What is birth control pill.



Most birth control pills, also referred to as "*the pill*," contain a combination of two female hormones. The most modern pills usually contain quite low doses of hormones. To name a few: YAZ®, Marvelon®, Celest®, Yasmin® etc.

How well do they work? — When taken properly, birth control pills are very effective (90-92%). In general, if you miss one pill, you should take it as soon as possible. If you miss two or more pills, continue to take one pill per day and use a back-up method of birth control (eg, a condom) for seven days. If you miss two or more pills, you should also consider taking the morning after (emergency contraception) pill.

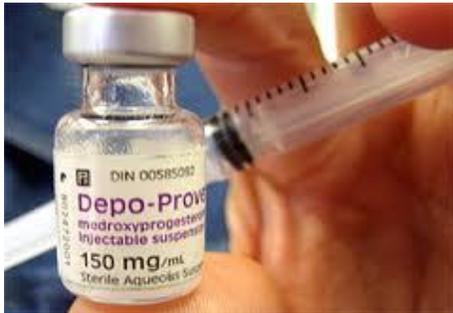
Side effects — Side effects of the pill include:

- Nausea, breast tenderness, bloating, and mood changes, which typically improve after two to three months.
- Irregular vaginal spotting or bleeding. This is particularly common during the first few months. Forgetting a pill can also cause irregular bleeding.

Progestin-only pills (Cerazette®) — Unlike traditional birth control pills, the progestin-only pill, also called the *mini pill*, does not contain estrogen. It does contain progestin, a hormone that is similar to the female hormone, progesterone. This type of pill is useful for women who cannot or should not take estrogen for some health issues.

Progestin-only pills are as effective as combination pills if they are taken at the same time every day. However, progestin only pills have a slightly higher failure rate if you are more than three hours late in taking it.

Injectable contraceptive.



The only injectable method of birth control currently available locally is medroxyprogesterone acetate or DMPA (Depo-Provera®). This is a progestin hormone, which is long-lasting. DMPA is injected deep into a muscle, such as the buttock or upper arm, once every three months. A version that is given under the skin is also available.

DMPA is very effective, with a failure (pregnancy) rate of less than one percent. A full discussion is available separately. However side effects make this method not very popular.

Side effects — The most common side effects of DMPA are irregular or prolonged vaginal bleeding and spotting, particularly during the first three to six months. Up to 50 percent of women completely stop having menstrual periods after using DMPA for one year. Menstrual periods generally return within six months of the last DMPA injection.

Contraceptive skin patches.



Birth control skin patches (Evra®) contain two hormones, estrogen and progestin, similar to birth control pills. The patch is as effective as birth control pills, and may be preferred by some women because you do not have to take it every day, only once per week. Another advantage is that you may have less side effects like nausea, indigestion, bloating because this medication does not pass through your digestive system. .

You wear the patch for one week on the upper arm, shoulder, upper back, or hip. After one week, you remove the old patch and apply a new patch; you repeat this for three weeks. During the fourth week, you do not wear a patch and your menstrual period occurs during this week.

The risks and side effects of the patch are similar to those of a birth control pill, although there may be a slightly higher risk of developing a blood clot.

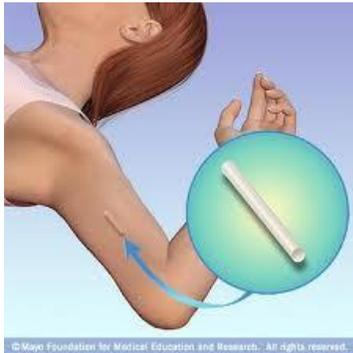
Vaginal ring.



A flexible plastic vaginal ring (Nuvaring® - not currently available in UAE) contains estrogen and a progestin. You wear the ring in the vagina, where these hormones are slowly absorbed into the body. This prevents pregnancy, similar to a birth control pill. You wear the ring inside the vagina for three weeks, followed by one week when you do not wear the ring; your menstrual period occurs during the fourth week.

The ring is not noticeable, and it is easy for most women to insert and remove. You may take the ring out of the vagina for up to three hours if desired, such as during intercourse. Risks and side effects of the vaginal ring are similar to those of birth control pills.

Birth control implants.



A single-rod progestin implant (Implanon® - not available in UAE), small plastic matches-like device is inserted by a healthcare provider into your arm. It prevents pregnancy for up to 3 years as the hormone is slowly absorbed into the body. It is effective within 24 hours of insertion. Irregular bleeding is the most bothersome side effect. Most women can become pregnant quickly after the rod is removed.

Barrier methods.

Barrier contraceptives prevent sperm from entering the uterus. Barrier contraceptives include the condom, diaphragm, and cervical cap.

Male condom —



The male condom is a thin, flexible sheath placed over the penis. To be effective, men who use condoms must carefully follow instructions for their use. Condoms are most effective when used with a vaginal spermicide.

Using the male condom and a vaginal spermicide is as effective as a hormonal method of birth control, and is more effective than a condom alone.

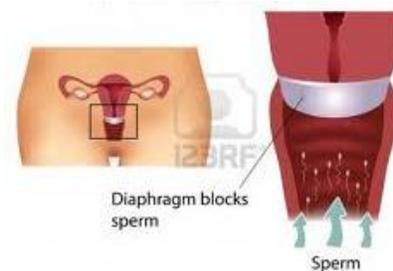
Many people who choose another method of birth control (eg, pills) also use condoms to decrease their risk of getting sexually transmitted diseases.

Female condom —



The female condom is worn by a woman to prevent semen from entering the vagina. It is a sheath made of polyurethane, and is prelubricated. You wear it inside the vagina.

Diaphragm/cervical cap —



The diaphragm and cervical cap fit over the cervix, preventing sperm from entering the uterus. These devices are available in latex (the Prentif cap) or silicone rubber (FemCap) in multiple sizes, and require fitting by a clinician. These devices must be used with a spermicide and left in place for six to eight hours after sex. The diaphragm must be removed after this period. However, the cervical cap can remain in place for up to 24 hours.

Spermicide — Spermicides are chemical substances that destroy sperm. They are available in most pharmacies without a prescription. Spermicides are available in a variety of forms including gel, foam, cream, film, suppository, and tablet.

Intra-uterine device (IUD)

IUDs (coil, or loop) - are placed by a healthcare provider through the vagina and cervix, into the uterus. The currently available IUDs are safe and effective. These devices include:



- Copper-containing IUDs (Nova-T®, Multiload®..). Copper-containing IUDs remain effective for at least 5 years, but can be removed at any time. Copper IUDs do not contain any hormones.

- Most women have a *heavier menstrual period* or *more cramps* during their period while using a copper IUD.



- Levonorgestrel-releasing IUDs (Mirena®)- release a hormone, levonorgestrel, which thickens the cervical mucus and thins the endometrium (the lining of the uterus).

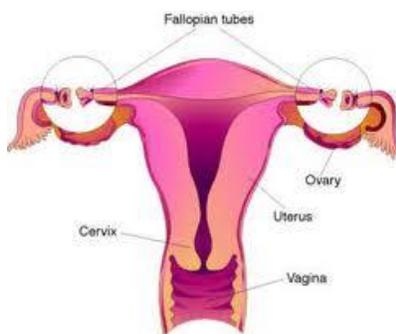
This IUD also *decreases* the amount you bleed during your period and *decreases* pain associated with period.

It can be left in place for up to five years, but can be removed at any time, and is highly effective in preventing pregnancy (to date the most efficacious contraceptive). Some women stop having menstrual periods entirely, some will have only very scanty bleeding; this effect is reversed when the IUD is removed. The fertility is completely restored soon after the IUD is removed.

Sterilization.

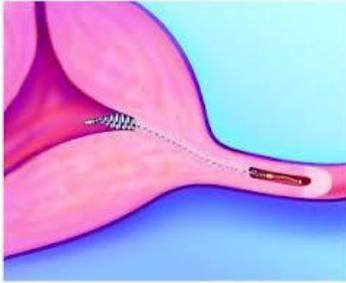
Sterilization is a procedure that permanently prevents you from becoming pregnant or having children. **Tubal ligation** (for women) and **vasectomy** (for men) are the two most common sterilization procedures. Sterilization is permanent (although the occasional failures have been reported!), and should only be considered after you discuss all available options with a healthcare provider.

Tubal ligation —



Tubal ligation is a sterilization procedure for women that surgically cuts, blocks, or seals the fallopian tubes to prevent pregnancy. The procedure is usually done in an operating room as a day surgery. Women who have recently delivered a baby can undergo tubal ligation before going home. The procedure may be done at another time as well.

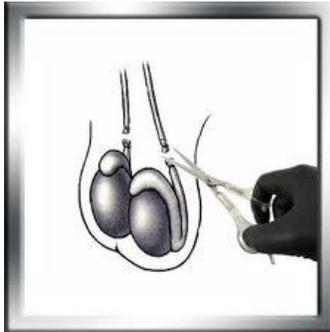
It's good to know that UAE policy on tubal ligation is quite strict. In order to have procedure done you will need to obtain special permission which is usually granted based on existing medical problem or serious health risk associated with pregnancy.

Essure® —

available in UAE) is a permanent birth control method in which a tiny coil is placed into a woman's fallopian tubes. The tissue within the fallopian tubes grows into the coil, blocking them three months after placement in most women. The coil is placed after you are given local or general anesthesia.

Essure® (not currently

A back up method of birth control (eg, pills, condoms) is needed until you have a test confirming that the fallopian tubes are completely blocked; this is usually performed three months after coil placement.

Vasectomy —

Vasectomy is a sterilization procedure for men that cuts or blocks the *vas deferens*, the tubes that carry sperm from the testes. It is a safe, highly effective procedure that can be performed in a doctor's office under local anesthesia. Following vasectomy, you must use another method of birth control (eg, condoms) for approximately three months, until testing confirms that no sperm are present in the semen. Some urologists in UAE practice this method.

What about other birth control methods?

Some women and their partners cannot or choose not to use the birth control methods mentioned above due to religious or cultural reasons. Fertility-awareness based methods for preventing pregnancy are based upon the physiological changes during the menstrual cycle. These methods, also called "**natural family planning**," involve identifying the *fertile days* of the menstrual cycle using a calendar method (cycle length) and physical signs of ovulation (change in vaginal secretions, basal body temperature) and then avoiding sexual intercourse or using barrier methods on those days.

Withdrawal — The withdrawal method (*coitus interruptus*) requires men to withdraw penis from the vagina before ejaculation. Failure occurs if withdrawal is not timed accurately or if the pre-ejaculatory fluid contains sperm. Failure rates as high as 18 to 20 %.

Lactation — Women who breastfeed will not resume their periods due to hormonal changes during nursing. The breastfeeding is not a valid birth control method and will be preventing pregnancy more likely if:

- The woman delivered less than six months ago

- She is breastfeeding exclusively (ie, not providing food or other liquid to the infant)
- She has no periods

**This information is not intended nor recommended as a substitute for medical advice, diagnosis, or treatment. Always seek the advice of your own physician or other qualified health care professional regarding any medical questions or conditions.*

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