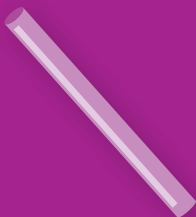
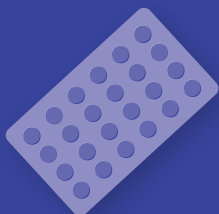


Birth Control

Choosing the method that's right for you



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Family planning services

Get advice on which method is best for you.

Use this brochure to help you think about your choices. You may not find all the answers to your questions here. Before you decide on a birth control method, talk with your health care provider or visit your local reproductive health clinic or health department.

You might qualify for low-cost or free services in your area. For more information, call 211info (dial 2-1-1) or visit 211info.org. Your call will be private.

Reproductive health clinics provide birth control services and:

- Health education and counseling
- Annual wellness visits
- Screening exams such as breast exams and Pap tests
- Pregnancy tests
- Counseling, testing and treatment for sexually transmitted diseases (STDs) and HIV/AIDS
- Information and referral to other health and social services

Anyone can get services at reproductive health clinics. It's important to take care of your health and get regular checkups.

To learn more about reproductive health services and education, visit www.healthoregon.org/rh.

Don't forget to visit our website at ccare.oregon.gov or on Facebook @OregonCCare.

How to use this brochure

This brochure provides information about common birth control methods. At the end of each method, you will find a quick reference to how effective it is and notes to keep in mind.

EXAMPLE: BIRTH CONTROL PILLS

9/100



This example shows that, within the first year of taking birth control pills, an average of 9 pregnancies occurs for every 100 women taking them. Talk with your provider for more information about your method's pregnancy risk.

The icons in this example tell you this method goes great with condoms, does not protect against STDs and HIV/AIDS and requires a prescription. See below for each icon's definition.

Key to icons



This method is great with condoms!



Private



Get it and forget it



Protects against STDs and HIV/AIDS



Does not protect against STDs and HIV/AIDS



Needs a prescription or doctor's visit



No prescription needed

Implant

HOW

The implant is a single, small, soft rod about two inches long and 1/10-inch wide. The rod is put under the skin of the inner upper arm. You can feel it, but it is not easy to see.

The implant has one hormone. Tiny amounts of the hormone are released for three years. It prevents pregnancy by stopping the release of an egg and thickens cervical mucus to stop sperm from reaching the egg.

WHEN

The implant is put in with numbing medicine and can be inserted as long as you are not pregnant. It takes only a few minutes. The implant can be removed any time and most women will release eggs soon after.

WHERE

A trained health care provider inserts and removes the implant during a clinic visit.

ADVANTAGES

You do not have to worry about taking a pill every day. The implant only needs to be replaced every three years. There may be less pain or cramping during periods and less anemia with the implant. You can get pregnant again as soon as is normal for you once the implant is removed. The implant may be removed at any time.

DISADVANTAGES/SIDE EFFECTS

The implant can cause less bleeding or irregular bleeding during your period or no bleeding at all.

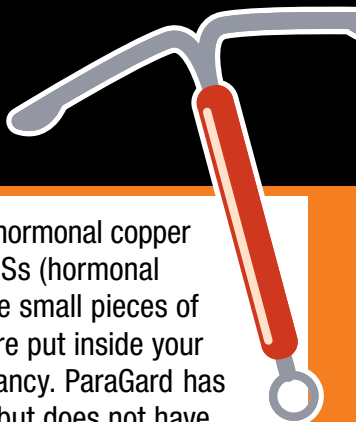
There might be slight pain, itching or scarring in the area where the implant is put in and removed.

You should not use the implant if you have breast cancer now.

0.05/100



IUD/IUS



HOW

The IUD (ParaGard non-hormonal copper intrauterine device) or IUSs (hormonal intrauterine systems) are small pieces of plastic or metal. They are put inside your uterus to prevent pregnancy. ParaGard has copper that kills sperm but does not have chemicals or hormones. IUSs use the same hormone used in birth control pills. These thicken the cervical mucus to stop sperm from reaching the egg and stop the egg from moving through the tubes so it can't get fertilized.

WHEN

An IUD or IUS can be put in the uterus at any time as long as you are not pregnant. These work very well for women of any weight. You can get one even if you have never had a pregnancy or if you are a teen.

ADVANTAGES

- You do not have to think about birth control every time you have sex.
- IUDs and IUSs provide protection from some cancers.
- IUSs make periods lighter and less painful.
- You can get pregnant again as soon as is normal for you once the IUD/IUS is removed.
- IUDs and IUSs work for 3–12 years.
- You can use these while breastfeeding.
- The IUD/IUS may be removed at any time.

DISADVANTAGES/SIDE EFFECTS

- You need an appointment with a trained health care provider to insert or remove an IUD/IUS.
- Insertion and removal may be uncomfortable and sometimes difficult.
- With the IUD, some women may have changes in their periods.
- You may have increased cramps.
- You must be able to feel for the strings.

RISKS

You should not have an IUS/IUD placed if you have:

- Breast, cervical or uterine cancer now
- Problems with the shape of your uterus
- An infection in your uterus or pelvis
- Unusual bleeding from your vagina
- An allergy to ParaGard IUD copper

WARNING SIGNS

If you develop any of the signs below, contact your provider right away:

- Period late (possible pregnancy), abnormal spotting or bleeding
- Abdominal pain, pain with intercourse
- Exposure to STDs, abnormal vaginal discharge
- Not feeling well, fever, chills
- String missing, shorter or longer

IUS

0.2/100

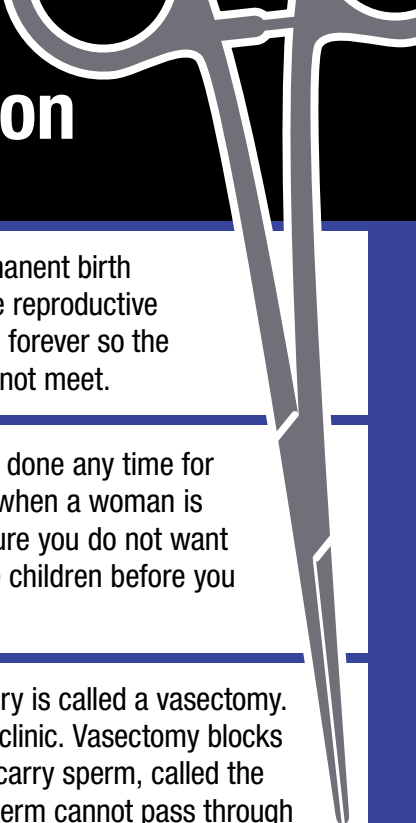


IUD

0.8/100



Sterilization



HOW

Sterilization is permanent birth control. Parts of the reproductive system are blocked forever so the sperm and egg cannot meet.

WHEN

Sterilization can be done any time for men and any time when a woman is not pregnant. Be sure you do not want a child or any more children before you take this step.

WHERE

In a man, the surgery is called a vasectomy. It can be done in a clinic. Vasectomy blocks the two tubes that carry sperm, called the vas deferens, so sperm cannot pass through the penis.

In a woman, sterilization can be done in two ways. A surgery, called tubal ligation, cuts and ties the fallopian tubes. This is done in a hospital or surgical center. The second procedure uses contraceptive coils called Essure®. Essure blocks the two fallopian tubes so an egg cannot pass through them to be fertilized. The Essure procedure is done without surgery during a clinic visit.

ADVANTAGES

Sterilization needs to be done only once. It works very well. Male sterilization is cheaper and safer than female sterilization. Tubal ligations are effective immediately.

DISADVANTAGES/SIDE EFFECTS

There are some risks in having minor surgery, so talk it over with your health care provider. The surgery can cost too much for some people who do not have insurance or money to pay for it, but it saves money over time. Check with your local family planning agency to see if you qualify for a free or low-cost vasectomy. It takes about three months to clear sperm out of your system after a vasectomy. Use another birth control method until tests confirm there are no sperm. Essure takes up to three months for the tubes to become blocked. Use another birth control method until tests confirm the tubes are blocked.

There should be no bad side effects after the surgery. Sex drive is not changed for males or females. The man still has an erection and ejaculates (cums), but the fluid has no sperm. The woman still has monthly periods.

RISKS

There is some risk of bleeding, infection or failure with sterilization. It is important people are sure they don't want any future children because this is a permanent method.

Some Essure patients have reported mild to bad reactions to the method including removal and surgery. It is best to consult with your provider to weigh the risks and benefits with Essure.

FEMALE STERILIZATION

0.5/100



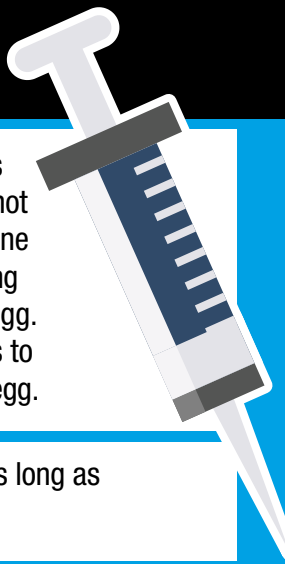
MALE STERILIZATION

0.15/100



Depo-Provera®

“The shot”



HOW

Your health care provider gives the Depo-Provera (or Depo) shot about every 12 weeks. It has one hormone and works by stopping your body from releasing an egg. It also thickens cervical mucus to stop sperm from reaching an egg.

WHEN

You can start Depo any time as long as you are not pregnant.

WHERE

A health care provider gives you a shot during a clinic visit.

ADVANTAGES

The shot works very well and lasts three months. You do not have to take a pill every day. It is a private method not noticed by others. You can use Depo while breastfeeding and it protects against some cancers.

DISADVANTAGES/SIDE EFFECTS

There is no way to stop the shot's effects once given. It must wear itself out. You will have changes in your periods. At first bleeding might happen at odd times. Most people stop having periods after a few shots. Other side effects might include weight gain and headaches. It may take up to 10 months before you can get pregnant when you stop Depo.

RISKS

You should not use Depo if you have breast cancer now. Depo may cause you to lose bone calcium. Calcium returns when you stop using Depo.

6/100



Birth control pills



HOW

Birth control pills have hormones that prevent pregnancy by stopping the release of an egg and making the cervical mucus thicker.

WHEN

You take some types of pills at the same time every day; you can take other types anytime during the day. Please consult with your provider about which type you are taking.

WHERE

You get a prescription for birth control pills from your health care provider.

ADVANTAGES

Birth control pills are easy to use and work very well if used the right way. Periods may be more regular, lighter and less painful. It can help women be at lower risk for some cancers. The pill can help with acne. You can get pregnant again as soon as is normal for you once you stop taking the pill.

DISADVANTAGES/SIDE EFFECTS

It may be hard for some people to remember to take the pill or to take it at the same time of day. Some women have sore breasts, headaches, nausea, bleeding between periods or mood changes such as depression or irritability.

PILL / RING / PATCH

Vaginal ring

NuvaRing®



HOW

The vaginal ring is a soft, flexible ring you place in your vagina. It releases a steady flow of hormones. It prevents pregnancy by stopping the release of an egg and makes fluids around the cervix thicker.

WHEN

You leave the ring in place for three weeks and then remove it for one week. Your period usually starts two or three days after you remove the ring and might not stop all the way before you insert the next ring. Insert a new ring at the end of the fourth week.

WHERE

You get a prescription for the vaginal ring from your health care provider.

ADVANTAGES

The ring is easy to use and works very well if used the right way. It may have fewer side effects than other birth control with hormones. Your periods will be more regular, lighter and less painful. It can help with acne. You can get pregnant again as soon as is normal for you once you stop using the NuvaRing.

DISADVANTAGES/SIDE EFFECTS

Some women may notice the ring, but most women do not. If the ring is out of your vagina for more than 48 hours during the three weeks you are using it, reinsert the ring as soon as possible. If this happens you must use a backup birth control method for seven days to prevent pregnancy. A few women have headaches, vaginal discharge, nausea, irregular bleeding, cramps or sore breasts. Side effects may go away in two to three months.

The patch



HOW

The birth control patch has hormones that enter your body through your skin. It prevents pregnancy by stopping the release of an egg and makes fluids around the cervix thicker. It is smaller than the size of a condom wrapper. You wear the patch under your clothes.

WHEN

Use the patch on a four-week cycle. Put on a new patch each week on the same day of the week for three weeks. You do not wear a patch during the fourth week. Put on a new patch at the end of the fourth week. Your menstrual period should start during the fourth week.

WHERE

You get a prescription for the patch from your health care provider.

ADVANTAGES

The patch is easy to use and works very well when used the right way. It stays on when you shower, bathe, swim or exercise. Your periods may be lighter and less painful. It can help with acne. You can get pregnant again as soon as is normal for you once you stop using the patch.

DISADVANTAGES/SIDE EFFECTS

A small number of women have skin irritation where the patch is placed. There is a slight chance it may not work as well for women who weigh 198 pounds or more. You need to put it on the right way so it sticks to your skin. Some women have sore breasts, headaches, nausea or cramps using the patch. Most women have no major side effects. The patch releases more estrogen than birth control pills so some women may have more side effects with the patch.

You should not use birth control pills, the vaginal ring or patch if you are pregnant or:

- Have breast cancer now
- Have ever had a heart attack, stroke, or a blood clot or clotting problems
- Have certain liver diseases or liver tumors
- Have a certain kind of migraine headache
- Have high blood pressure
- Have some heart conditions
- Smoke 15 or more cigarettes a day or are aged 35 or older
- Ever had a complex organ transplant

PILLS

9/100



RING

9/100



PATCH

9/100



Cervical barriers:

Diaphragms/cervical caps



HOW

The diaphragm is a small rubber cup that you fill with contraceptive gel (spermicide). You place it in your vagina to cover your cervix. Other cervical barriers (the cap) are like the diaphragm, but smaller. These methods prevent sperm from getting into your uterus and meeting an egg. There are two types: one that comes in many sizes that your health care provider fits to you and one that fits women of all sizes.

WHEN

You insert the diaphragm or cervical cap with contraceptive gel a few hours before you have sex. These must stay in place for at least six hours after sex but should not stay in the vagina any longer than 24 hours.

WHERE

Your health care provider fits one type of diaphragm or cervical cap and teaches you how to use it. Another diaphragm (Caya[®]) is one-size-fits-all that shapes to fit any woman's body. It is easy to insert and you can get it at the store or clinic.

ADVANTAGES

Your partner will not be able to feel the diaphragm if it's put in correctly. Diaphragms do not change your period and you can safely breastfeed your baby.

You can reuse diaphragms but must care for and clean them.

DISADVANTAGES/SIDE EFFECTS

The diaphragm must be inserted the right way before you have sex. You might need a new size diaphragm after having a baby, or losing or gaining a lot of weight. A few people are allergic to the rubber or contraceptive gel. If you have itching or burning, talk to your health care provider.

RISKS

There are no serious health risks in using a diaphragm. The diaphragm should stay in at least six hours after sex but no longer than 24 hours. This would keep you from getting toxic shock syndrome.

12/100



Condoms



HOW

A condom is put over an erect penis before the penis touches the vagina. Sperm are trapped inside the condom and cannot get into the vagina. Use a new condom each time you have sex. Condoms are made out of latex, plastic or lambskin. Only plastic or latex condoms protect against HIV/AIDS or STDs.

Condoms with spermicides are not recommended for oral or anal sex; they can be used for vaginal sex.

Internal or female condoms are soft plastic, not latex, with a ring at each end. The internal condom does not allow the penis to touch the vagina. Sperm goes into the condom and not the vagina.

Lubricants: You can safely use silicone and water-based lubricants with condoms.

WHEN

Condoms are put on or inserted right before sex.

WHERE

You can get condoms at most drug stores, grocery stores or clinics. No prescription is needed.

ADVANTAGES

Latex rubber condoms and internal condoms protect you from HIV/AIDS and most STDs. Condoms do not cost a lot. You do not need a prescription. Condoms work very well if used every time you have sex. If you have a latex allergy, you can use plastic condoms. Condoms come in many sizes.

DISADVANTAGES/SIDE EFFECTS

It's best if condoms are close at hand to use right before having sex. Check the expiration date and do not use them if expired. Use a new condom each time you have sex. Do not double up on condoms or both types of condoms at the same time. Sometimes condoms break or come off. To make space for semen, pinch the top of the condom and roll it all the way down the hard penis. A few people may be allergic to latex rubber or the liquid in condom packages. If you have burning or itching, try changing brands or talk with your health care provider. If you use a lubricant, choose a silicone lubricant without nonoxynol-9.

RISKS

Condoms have no known health risks except for a possible latex allergic reaction.

MALE CONDOM

18/100



INTERNAL OR FEMALE CONDOM

21/100



REMEMBER – ALWAYS USE LATEX OR PLASTIC CONDOMS TO PREVENT STDs AND HIV/AIDS.

Fertility awareness methods (FAMs)



HOW

Fertility awareness methods (FAMs) teach you to know your body's fertile time. You do not have sex near the time an egg is released. This is the time when you can get pregnant. There are different FAMs – standard days method, two day method, ovulation method and more. Consult with a health provider to decide what method might work best for you.

WHEN

You record body signs every day and follow all the FAM rules. Some people use a calendar, others use a string of 32 colored beads called CycleBeads® or a phone app to track fertile days.

A FAM can be used after giving birth while breastfeeding, but this is not the best time to learn a FAM because your periods might not be regular. Try to learn a FAM before pregnancy.

WHERE

Ask your clinic about a FAMs class. Learn about changes in your cervical mucus and body temperature to know when you can get pregnant.

ADVANTAGES

FAMs have no health risks. The methods can help you get pregnant or prevent a pregnancy. FAMs help you understand how your body works. Anyone who has concerns about using birth control or hormones can use this method.

FAM works if you check and record your body signs every day. It is hard for some couples to learn and practice FAM. Others find it hard not to have sex during the time of the month when an egg is ready. Couples need to plan ahead to prevent or plan a pregnancy.

FAM takes time and practice.

STANDARD DAYS METHOD

24/100



TWO DAY METHOD

24/100



OVULATION METHOD

24/100



Emergency contraception



HOW

You use emergency contraception (EC) to prevent pregnancy after sex if birth control wasn't used or was used the wrong way. EC will not work if you are already pregnant. Emergency contraceptives are the copper IUD or pills.

Three types of EC are:

- ella® (may not work well if you weigh more than 193 pounds)
- One Step® (may not work well if you weigh more than 154 pounds)
- ParaGard® copper IUD (works at any weight)

WHEN

EC works better the sooner you take it but can work up to five days after sex. Use backup birth control, such as condoms, after taking EC until your next period. You may be pregnant if your period is more than one week late.

ADVANTAGES

Use EC if:

- You didn't use birth control.
- Your condom broke.
- Your partner did not withdraw or "pull out" on time.
- You missed using or taking your birth control on time.
- You were forced to have sex.
- Sex "just happened."

DISADVANTAGES/SIDE EFFECTS

EC pills do not work as well as other birth control methods that you use all the time. EC does not work if you are already pregnant. EC may cause nausea, vomiting, dizziness, sore breasts, spotting or abdominal pain. If you vomit within two hours after taking EC, call your health care provider. You may have to take the pill again. Some women do not feel well for a day or so after taking EC.

EFFECTIVENESS

Emergency contraceptive pills or a copper IUD after sex without birth control greatly lower your risk of getting pregnant. These methods vary in effectiveness based on time passed, a person's body and the type of the method.

- One Step is 89% effective when used within three days after unprotected sex.*
- Ella is 85% effective when used within five days after unprotected sex.*
- The IUD is 99% effective when used within five days after unprotected sex.

* How well these methods work depends on your weight. Talk to your provider about what is best for you.



(ella®)



(One Step)

Spermicides

HOW

Spermicides are chemicals that kill sperm. Spermicides come in many forms: foam, gel, cream, film, suppository and tablet.

WHEN

Put spermicides in the vagina before sex and follow package instructions.

WHERE

You can get spermicides at most drug stores, grocery stores and clinics. No prescription is needed.

ADVANTAGES

Spermicides do not cost a lot. You do not need a prescription.

DISADVANTAGES/SIDE EFFECTS

Spermicides must always be close at hand to use right before having sex. You must use more spermicide each time you have sex. Spermicides work best when used with condoms or cervical barriers every time you have sex. Spermicides can be messy and leak out of your vagina. A few people may be allergic to spermicides. If you or your partner have burning or itching, try changing brands or talk with your health care provider.



RISKS

Spermicides have no known health risks except for a possible allergic reaction. You should not use spermicides with nonoxynol-9 if you have sex with someone with HIV; it can increase the risk of infection. Spermicides used alone will not protect you from HIV or STDs.

28/100



Not having sex (abstinence)



HOW

You decide not to have sex. Choose a partner who has made the same choice. Talk about sex activities you want and those you don't want.

WHEN

At any time in your life you may decide not to have sex. You can change your mind anytime and choose another birth control method to prevent a pregnancy, HIV and other STDs. Learn about birth control.

ADVANTAGES

Not having sex is free, always available and protects you from pregnancy and STDs including HIV. Abstinence is something a person can choose at any time of their life. Many people have times when they choose not to have sex.

DISADVANTAGES

It can be challenging for some people to not have sex. There is no protection if you change your mind and have sex. You need to know about birth control and always keep condoms, emergency contraceptive (EC) pills or your preferred method of choice on hand. Oral and anal sex cannot create a pregnancy but you can still get STDs.

0/100



How well will my method work?

How well your birth control method works depends on your age, partner support and how well you use the method.

The table below shows you how well a method might work for the typical user. A typical user does not use the method every time or does not use it according to instructions every time.

Number of pregnancies per 100 women in the first year of using method

	Method	Rates
MOST EFFECTIVE  Less than 1 pregnancy per 100 women in a year	Implant	0.05/100
	IUS	0.2/100
	IUD	0.8/100
	Female sterilization	0.5/100
	Male sterilization	0.15/100
 6–12 pregnancies per 100 women in a year	Depo-Provera	6/100
	Birth control pill	9/100
	Vaginal ring	9/100
	Contraceptive patch	9/100
	Diaphragm	12/100
	Male condom	18/100
	Female condom	21/100
 18 or more pregnancies per 100 women in a year	Fertility awareness methods	
	Standard days method	24/100
	Two day method	24/100
	Ovulation method	24/100
	Withdrawal	22/100
	Spermicides	28/100
	No method	85/100
LEAST EFFECTIVE		

How to make your method most effective

Implant	After procedure, little or nothing to do or remember.
IUS	
IUD	
Female sterilization	Female and male sterilization: Use another method for first 3 months.
Male sterilization	
Depo-Provera	
Birth control pill	Depo-Provera: Get repeat injections on time. Pills: Take a pill each day. Patch, ring: Keep in place, change on time. Diaphragm: Use correctly every time you have sex.
Vaginal ring	
Contraceptive patch	
Diaphragm	
Male condom	Condoms, withdrawal, spermicides: Use correctly every time you have sex. Fertility awareness-based methods: Abstain or use condoms on fertile days. Newest methods (standard days method and two day method) may be the easiest to use and consequently more effective.
Female condom	
Fertility awareness methods	
Standard days method	
Two day method	
Ovulation method	
Withdrawal	
Spermicides	
No method	

Emergency contraception (EC) ranges in effectiveness based on the type and when it is taken. EC can be taken up to five days after unprotected sex.

Methods that may work, but must be used the right way

Breastfeeding

Breastfeeding can prevent pregnancy if:

- The mother has not started her period again.
- The mother is only breastfeeding. The baby is not fed baby food, juice or formula and is less than six months old.

Withdrawal (pulling out)

Sperm do not reach the egg.

- A person pulls their penis out away from their partner's vagina **before** they ejaculate (cum).
- It may be hard to pull out. How well it works depends on the person knowing when they will ejaculate.
- If they do not pull out in time, people can still get and use emergency contraception pills.
- Withdrawal does not protect against STDs including HIV/AIDS.

Additional resources

Oregon Contraceptive Care (CCare):

Find out more about Oregon clinics and birth control at www.healthoregon.org/rh.

Bedsider:

Additional birth control information is available at www.bedsider.org.

EC and birth control information:

Download an EC brochure in English and other languages at www.healthoregon.org/rh.

Need EC? Call 211 or visit www.211info.org

Questions to ask

Reproductive health is an important part of your life.

Reproductive health services help you decide if or when to have children. The services help you take better care of your health and have more control over your life.

There are many birth control methods. No one method is best for everyone at every stage of life. You can choose a birth control method to meet your needs. Think about which method is best for you.

Consider writing down the questions you have for your provider in advance.

Ask your provider:

- How does this method work?
- How do I use it?
- How well does this method work?
- What should my partner know?
- What could be the side effects?

Ask yourself:

- How often do I want to have a period?
- Do I want to have a baby? If so, when?
- Can I remember to use a method every day?
- Am I comfortable touching my vaginal area?
- How do I want to include my partner in this decision?
- What does my partner need to know about this method?
- Will both my partner and I like this method?
- How do I feel about getting shots?
- Do I need a method no one else will notice?
- Do I know where I can get emergency contraception if I need it?

You may qualify for low or no-cost birth control. For the clinic nearest you, contact 211info (dial 2-1-1) or www.211info.org.

Or contact your local clinic.

To learn more about reproductive health services and education, visit www.healthoregon.org/rh.

Don't forget to visit the website at <http://ccare.oregon.gov> or on Facebook @OregonCCare.



PUBLIC HEALTH DIVISION
Reproductive Health Program

You can get this document in other languages, large print, braille or a format you prefer. Contact the Reproductive Health Program at 971-673-0355 or email RH.Program@odhsoha.oregon.gov. We accept all relay calls or you can dial 711.