

Y10 Contraception Information

1. The Coil: Two different types:

- 1.** A coil, with copper, an intrauterine device (IUD)
- 2.** A coil, with extra hormones, an intrauterine system (IUS)

Both types are a small, T-shaped plastic device inserted into the womb

How does it work?

- An IUD is inserted into the womb by a nurse or doctor.
- The IUD releases copper which kills the egg and the sperm to stop fertilisation.
- The IUS releases a steady, low dose of progestogen to prevent pregnancy and treat certain medical conditions.



Advantages:

- Both the IUD and IUS are more than 99% effective against pregnancy.
- They last for 5 to 10 years, depending on the type.
- They can be put in at any time during the menstrual cycle.
- It can be taken out at any time by a specially trained doctor or nurse.
- The IUS stops periods altogether in most women, which is great if they are heavy.

Disadvantages:

- It can be uncomfortable when the device is put in, but painkillers will help.
- A woman's periods might be heavier, longer or more painful in the first few months after an IUD/IUS is put in. She might get spotting or bleeding between periods.
- Neither the IUD or IUS protects against STIs, so condoms should be used as well.

2. The Mini Pill - contains progesterone (pronounced *pro-jest-o-jen*)

How does it work?

- The mini pill stops the ovaries releasing an egg each month.
- The pill needs to be taken at about same time every day.
- There are 28 pills in a pack, when a woman finishes a pack, she starts a new pack the next day and does not take a break between packs
- The woman could get pregnant if she missed a pill, vomits or has severe diarrhoea.



Advantages:

- It does not interrupt sex and is very effective against pregnancy
- There is no evidence that the pill will make you gain weight.
- It can reduce acne, which is why some girls may take the pill even if they are not having sex.

Disadvantages:

- It can cause side effects at first, such as headaches, nausea, breast tenderness and mood swings – these normally settle after the first few months.
- Some bleeding or spotting is common in the first few months of using the pill
- The mini pill does not protect against STIs, so use a condom as well.

Important Note: If a woman forgets her pill, or is worried that it might not work, she should still go to the sexual health clinic (or her GP) where she can get emergency contraception.

3. A Condom

A Condom is put onto a man's penis to prevent pregnancy by stopping sperm from meeting an egg. A 'female condom' is placed inside the vagina to stop semen from getting into the womb.

How does it work?

- Take the condom out of the packet, being careful not to tear it with jewellery or fingernails.
- Place the condom over the tip of the erect penis and roll it to the base of the penis.
- If the condom won't roll down, you may be holding it the wrong way round. If this happens, it may have sperm on it, so throw it away and try again with a new one.
- After sex, withdraw the penis, while it's still erect, holding onto the condom.
- Remove the condom from the penis, being careful not to spill any semen.
- Throw the condom away in a bin, not down the toilet.
- If you have sex again, use a new condom.
- Condoms should have the UK kite mark symbol or CE symbol:



Advantages:

- When used correctly and consistently, they are a good way to prevent pregnancy.
- They help to protect both partners from STIs.
- You only need to use them when you have sex – they do not need advance preparation and are suitable for unplanned sex.
- In most cases, there are no medical side effects from using condoms.
- They are easy to get hold of and come in a variety of shapes, sizes and flavours. It is important to get the right size so that the condom does not slide off.
- For heterosexual couples, sexual health staff recommend 'condoms and contraception', condoms to protect against STIs, but a hormonal contraception to ensure protection against pregnancy.

Disadvantages:

- Some couples find that using a condom interrupts sex, while others use it as part of foreplay.
- Condoms are very strong but may split or tear if not used properly.
- Some people may be allergic to latex, plastic or spermicides, but you can get condoms that are less likely to cause an allergic reaction.
- The man has to pull out after he has ejaculated and before his penis goes soft.
- Oil-based lubricants, e.g. body oil or Vaseline, can damage the condom and make it more likely to split.
- Condoms can be unreliable if not used correctly.

- 4. Emergency Contraception**, often called the "morning-after pill", is a dose of hormones that a woman can take soon after unprotected sex.

How does it work?

- It works mainly by delaying or stopping ovulation, which is when an ovary releases an egg. If no egg is released, there's nothing for sperm to fertilize.
- It's like hitting a pause button on your menstrual cycle.
- It works best the sooner you take it, ideally within 72 hours (3 days), but some types can work for up to 5 days.
- It does not end a pregnancy that has already started.



Advantages:

- Taking emergency contraception provides a safe, last-chance opportunity to prevent an unplanned pregnancy after unprotected sex or contraceptive failure (like a broken condom or missed pill).
- It is:
 - Effective: It significantly reduces the risk of pregnancy.
 - Accessible: Pills are available without a prescription and are generally safe for most women.
 - Fast: The pills act quickly by delaying ovulation, and the IUD is the most effective option, offering immediate, long-term protection.

Disadvantages:

- Emergency contraception can cause temporary, uncomfortable side effects like nausea, headache, tiredness, dizziness, and breast tenderness.
- It contains a high dose of hormones, which can disrupt the menstrual cycle, making the next period earlier, later, heavier, or lighter than usual.
- It is effective, but less effective than regular, planned contraception and provides no protection against sexually transmitted infections (STIs). It is meant only as an emergency backup.

Note: if a woman has had unprotected sex and needs emergency contraception, she should also get tested for sexually transmitted infections (STIs).

5. The Implant

The contraceptive implant (Nexplanon) is a small flexible plastic rod that's placed under the skin in your upper arm by a doctor or nurse.

How does it work?

- A local anaesthetic is used to numb the area on the inside of the woman's upper arm.
- The implant is then inserted under her skin – it only takes a few minutes to put in and feels like having an injection.
- She won't need any stitches after the implant has been fitted.
- Once inserted, the implant can be felt but cannot be seen.
- The implant steadily releases the hormone progestogen into
- the bloodstream, to prevent ovulation and lasts for 3 years.



Advantages:

- It's the most effective method of contraception
- It's useful for women who find it challenging to take a pill at the same time every day.
- The implant can be removed if you experience side effects.
- It doesn't interrupt sex.
- Fertility returns to normal as soon as the implant is taken out.

Disadvantages:

- Some temporary side effects, like headaches and mood swings, but these typically settle.
- Fitting and removing an implant requires a minor procedure.
- The implant usually causes a change in the menstrual bleeding pattern. This can be anything from having no periods at all to frequent or irregular bleeding.
- It doesn't protect you against sexually transmitted infections (STIs), so you may need to use additional contraception (such as condoms) as well.

6. The Injection

The contraceptive injection releases the hormone progestogen (pronounced *pro-jest-o-jen*) into the woman's bloodstream to prevent pregnancy.

How does it work?

- The Depo-Provera is most common injection brand (other brands are also available) in the UK
- The injection lasts for 12 weeks, and can be booked months in advance.
- It stops the woman releasing an egg each month.
- The woman needs to remember to have another injection before it stops working.



Advantages:

- A woman can have the injection at any stage of menstruation, as long as she is not pregnant.
- It does not interrupt sex.
- You do not have to take a pill every day.
- It's not affected by other medicines.

Disadvantages:

- It does not protect against STIs, so condoms should always be used.
- There can be a delay of up to 1 year before periods return to normal.
- Some people may put on weight when they use contraceptive injections
- Some women have side effects like headaches and mood swings in the first few months.

7. The Contraceptive Patch

How does it work?

- A sticky patch releases hormones into the woman's body through the skin to prevent pregnancy.
- The hormones stops ovaries from releasing eggs.
- Each patch lasts for 1 week.
- The patch needs to be changed every week for 3 weeks, then have a week off without a patch.
- It's very easy to use and does not interrupt sex.



Advantages:

- You don't have to think about it every day – but change it once a week.
- It is recommended to be worn on the upper outer arm ,but you should rotate patch sites to prevent skin irritation. It can be worn on the upper body (not breasts), lower abdomen, and buttocks as long as the skin is clean, dry and hairless.
- It still works if you're sick (vomit) or have diarrhoea.
- It can make your periods more regular, lighter and less painful.
- It can help with premenstrual symptoms.
- The contraceptive patch is very sticky and should stay on even in the shower, bath, hot tub, sauna or when swimming.

Disadvantages:

- Other people might be able to see it.
- It can cause itchy or sore skin.
- Some women get mild side effects when they first start using the patch, such as headaches, sickness and mood changes – which usually settle down after a few months.
- Some women bleed between their periods or have spotting (very light, irregular bleeding) when they first start using the patch.
- It doesn't protect against STIs, so condoms should always be used as well.

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8. The Pill

The combined oral contraceptive pill is often just called "the pill". It contains two artificial female hormones, oestrogen and progesterone, which are produced naturally in the ovaries.

How does it work?

- The Pill prevents the ovaries from releasing an egg each month (ovulation).
- Most women take 1 pill every day for 21 days, then stop for 7 days, and during this week they have a bleed like a period.
- She starts taking the pill again after 7 days.
- Some pills can be taken continuously, without a break
- You need to take the pill at around the same time every day. You could get pregnant if you do not do this, or if you miss a pill, or vomit or have severe diarrhoea.



Advantages:

- It does not interrupt sex and is very effective against pregnancy
- It usually makes your bleeds regular, lighter and less painful.
- It reduces your risk of cancer of the ovaries, womb, colon and non-cancerous breast disease.
- There is no evidence that the pill will make you gain weight.
- If you have heavy or painful periods, PMS (premenstrual syndrome) or endometriosis the combined pill may help.
- It can help reduce acne, so some girls may take the pill with no intention of having sex.

Disadvantages:

- It can cause temporary side effects at first, such as headaches, nausea, breast tenderness and mood swings – it may help to change to a different pill.
- Some medicines may make the pill less effective.
- Some bleeding or spotting is common in the first few months of using the pill.
- The pill does not protect against STIs, so condoms should also be used.