Contraception

**Why is it important?**

Contraception is used to prevent unwanted pregnancy. Contraception is free for most people in the UK. With a wide variety to choose from, so you can find one that suits you best.

**Contraceptive options**

We will discuss the following long-acting reversible methods first.

**Implant**

Hormonal intrauterine system (IUS) - ‘hormonal coil’

Copper intrauterine device (IUD) - ‘non-hormonal coil’

**Injection**

We know that women who use these methods are much less likely to have an unplanned pregnancy than women who use other methods.

If you are certain that you never want any more children then you may want to consider sterilisation.

There are a range of other contraceptive methods. These are effective too but need to be used correctly to prevent pregnancy.

**Progestogen-only** (1 hormone) pill

**Combined hormonal contraception** (2 hormones)

**Pill**

**Patch**

**Ring**

**Condoms**- these can also prevent the spread of sexually transmitted infection. These can fail as contraception for 18 in 100 women.

**Detailed information about each method**

**Implant**

The implant is a tiny rod, about the size of a matchstick, that is inserted under the skin of your upper arm.

The implant releases a hormone called

progestogen that prevents your ovaries from releasing eggs and thickens the mucus in the cervix (neck of the womb). This helps to block sperm from getting to the egg in the first place.

**Advantages**

* Lasts for three years
* Fails for 5 in 10,000 women
* Quick return to fertility when removed
* May have lighter periods
* Suitable for breast feeding women
* Fit it and forget it

**Disadvantages**

Possible irregular periods (or no periods)

**Hormonal intrauterine system (IUS)**

The hormonal IUS is a little T shaped device that is placed in your uterus (womb).

It prevents pregnancy by keeping the lining of the

womb thin (this is the part that bleeds during periods), and because of this women often have lighter or no periods.

It also thickens the mucus in the cervix (neck of the womb), which helps to block sperm from getting to the egg in the first place.

**Advantages**

* Lasts for up to five years
* Fails for 2 in 1,000 women
* Fit it and forget it
* Can be removed easily
* Very low dose of safe hormone
* Quick return to fertility when removed
* Periods/bleeding will probably be lighter (or bleeding might stop altogether). This is good for health especially if a woman has been having heavy, long or painful periods
* Suitable for breastfeeding women

**Disadvantages**

* Small risk of infection.
* Possible irregular bleeding which may take a few months to settle.

**Copper intrauterine device (IUD) - ‘non-hormonal coil’**

The copper IUD is a little T shaped device that is placed in your uterus (womb) and alters the way sperm move.

This prevents them from fertilising an egg. This type of IUD has a small amount of natural, safe copper. It’s 100% hormone free and keeps periods regular.

**Advantages**

* Lasts for up to 5 or 10 years (depending on type of copper IUD)
* Fails for 8 in 1,000 women
* Can be removed easily
* No hormones
* Fit it and forget it
* Can be removed easily
* Will not change your normal period
* Quick return to fertility when removed
* Suitable for breastfeeding women

**Disadvantages**

* Small risk of infection.
* Your periods may become heavier/longer and if so may be more painful.

**Injection**

The jag is just what it sounds like, an injection that stops you from getting pregnant. The jag contains progestogen, a hormone that prevents your ovaries from releasing eggs. It also thickens the mucus in the cervix (neck of the womb), which helps to block sperm from getting to the egg in the first place.

**Advantages**

* Lasts for 3 months
* Fails for 6 in 100 women
* May have lighter or no periods
* Suitable for breastfeeding women
* There is also a new injection which you can give to yourself every 3 months after some training from a nurse or doctor.

**Disadvantages**

* Must see a health professional every three months for the injection (unless you choose the injection that you can give to yourself)
* Possible delay in return to fertility when you stop using the injection
* Possible irregular periods

**Progestogen only pill (POP)**

These pills contain only one hormone, progestogen. The pills are taken every day. There are two kinds of progestogen only pill: the traditional ones that thicken cervical mucus and stop sperm reaching the egg, and

the newer POP that stop the ovaries from releasing an egg.

**Advantages**

* Fails for 9 in 100 women
* Reversible after stopping
* Suitable for breastfeeding women
* Safe for women who cannot have oestrogen hormone
* May have no bleeding

**Disadvantages**

* May have irregular bleeding
* Must remember to take at the same time each day
* Might not work if you have diarrhoea or vomiting

**Combined hormonal contraception (CHC)**

These methods contain two hormones, oestrogen and progestogen. They prevent your ovaries from releasing an egg.

Usually this is a pill that you take at the same time every day.

There are lots of different kinds of pills on the market.

There are also patches or vaginal rings which work just like the pill.

**Advantages**

* Fails for 9 in 100 women
* Shorter, lighter and less painful periods
* Reversible after stopping
* May help with acne
* Suitable for breast feeding women

**Disadvantages**

* Some women who use this method may develop high blood pressure or blood clots in the legs or lungs. This is a very small risk. Due to this, if you have certain pre-existing health issues you may not be able to use CHC
* Must use the method correctly
* Might not work if you have diarrhoea or vomiting

**Female sterilization**

This involves blocking the fallopian tubes so that sperm cannot get through to meet an egg.

The intrauterine methods (hormonal IUS and copper IUD) and implant mentioned in this leaflet are more effective than female sterilisation.

**Advantages**

* Permanent
* Fails for 1 in 200 women
* No change in periods

**Disadvantages**

* Irreversible
* Must be certain you never want another pregnancy
* Surgical procedure
* Might require general anaesthetic

**Male sterilisation - vasectom**y

This involves blocking the tubes (vas deferens) that take sperm from the testicles to the penis. It is a quick procedure done under local anaesthetic. It can be done in a community clinic.

For local services, please check the last page of the leaflet.

Male sterilisation is more effective than female sterilisation and a much simpler procedure.

**Advantages**

* Permanent
* Fails for 1 in 2,000
* Done using local anaesthetic

**Disadvantages**

* Irreversible
* Surgical procedure
* Risk of complications
* Need to use reliable contraception until the procedure has been confirmed a success. This will be done at 12 weeks following the procedure

**Vasectomy Service**

Based at Sandyford Sexual Health Service.

Appointments can be made by:

Self-refer for vasectomy pre-op appointment (0141 211 8654)

**Emergency contraception**

There are two main types of emergency contraception- the copper IUD (coil) and hormone pills.

**Copper intrauterine device (IUD) - ‘non-hormonal coil’**

This is the most effective method of emergency contraception (99% effective) and is 10 times more effective than the emergency pills.

You can have an emergency IUD fitted up to 5 days after unprotected sex (and sometimes even longer) and at most times in your cycle.

It is usually easy to insert and is suitable for women of any age. For emergency contraception it needs to stay inside your womb at least until your next period but you might decide to keep it as your main method of contraception.

**Progestogen pill** (e.g. Levonelle TM)

It is most effective if it is taken within 24 hours of unprotected sex. It works by delaying the release of an egg (so it will not be effective if this has happened already).

It can be taken up to 3 days after unprotected sex but will get less effective the longer you wait to take it.

You can get this pill free of charge from pharmacies in Scotland if you are registered with a GP, or from your local sexual health clinic.

**Ulipristal acetate** (e.g EllaOne TM)

This pill can be taken up to 5 days after unprotected sex. It works by delaying the release of an egg (so it will not be effective if this has happened already).

It is more effective than progestogen emergency contraception.

You can get EllaOneTM free of charge from pharmacies in Scotland if you are registered with a GP, or from your local sexual health clinic.

Hormonal methods of contraception make EllaOneTM less effective, so you should not use any hormonal methods of contraception for 5 days after taking EllaOneTM.

Breastfeeding women are advised to discard breast milk for 7 days after taking EllaOneTM.

GP practices can provide contraception. It is worth asking at your practice to find out what is available.

**Sandyford Sexual Health Service**

Offers a full sexual health service including:

* Contraception information and provision
* Intrauterine contraception ‘coil’ insertion and removal
* Implant insertion and removal
* Vasectomy
* Abortion services

For appointments, information and advice call 0141 211 8130. Lines are open Monday to Friday 8.30- 4.15 pm except public holidays or visit [https://www.sandyford.scot](http://www.sandyford.scot/)

If you do not speak English, you can ask to have an interpreter at your appointment. Tell us what language and what dialect you need when you book your appointment and we will arrange it for you. Further information can be found at https://www.sandyford.scot/interpreter