Helping you choose the method of contraception that is best for you
Your guide to contraception

This leaflet shows the available contraceptive methods, explains how they work, how effective they are and the main advantages and disadvantages. The figures quoted in this leaflet are for how well each method works based on extensive independent research.

Contraception needs to be used until the menopause. That is, until a woman has not had a period for two years if aged under 50 and for one year if over 50. This advice may be different for women using hormonal contraception.

How do I choose which method to use?

There are many methods of contraception to choose from and it is worth taking the time to find out more about each one so that you can choose contraception that suits you. There are two methods of contraception specifically for men—the male condom and male sterilisation—and 13 for women. You can find more detailed information about each method at www.fpa.org.uk. To locate your closest clinic you can:

- Use Find a Clinic at www.fpa.org.uk/clinics
- Download FPA’s Find a Clinic app for iPhone or Android.

Emergency contraception

If you have had sex without contraception, or think your method might have failed, there are different types of emergency contraception you can use.

- The emergency contraceptive pill Levonelle—can be taken up to three days (72 hours) after sex. It is more effective the earlier it is taken after sex. It is available with a prescription or to buy from a pharmacy.
- The emergency contraceptive pill ellaOne—can be taken up to five days (120 hours) after sex. It is only available with a prescription.
- An IUD—can be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation).

Contraception

- whether you (or a partner) want to use the method every day, every time you have sex or less often.
- Your answers should influence your decision about what contraception to use.

How can I find a contraceptive service?

The Sexual Health Information Line provides confidential advice and information on all aspects of sexual health. The number is 0800 567 123 and the service is available from Monday to Friday from 9am - 8pm and at weekends from 11am - 4pm. For additional information on sexual health visit www.brook.org.uk.

Information for young people can be found at www.brook.org.uk.

Clinics

There are many methods of contraception available from and it is worth taking the time to find details of general practices and pharmacies in England at www.hss.uk and in Wales at www.hsh.wales.uk. In Scotland you can find details of general practices at www.rhsc24.com and in Northern Ireland at www.hscni.net.

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Is contraception free and where can I go to get it?

You can obtain free contraception, including emergency contraception, from:

- a general practice, unless they say they don’t provide contraception services
- a contraception clinic or a sexual health clinic
- young people’s service (these will have an upper age limit)
- some genitourinary medicine (GUM) clinics.

You can also get the emergency contraceptive pill Levonelle free from:

- most NHS walk-in centres (England only) and minor injuries units
- some hospital accident and emergency departments (phone first to check)
- most pharmacies (there may be an age limit)
- some genitourinary medicine (GUM) clinics.

If you are 16 or over you can buy the emergency contraceptive pill Levonelle from most pharmacies (there may be an age limit). They may also sell condoms, diaphragms, caps and spermicide.

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Ask your doctor, nurse or pharmacist about getting emergency pills in advance, just in case you need them.

How does emergency contraception work?

Emergency contraceptive pills are most likely to stop or delay ovulation (the release of an egg). They may also stop a fertilised egg settling (implanting) in the uterus. The emergency IUD may stop an egg being fertilised or implanting.

How effective is emergency contraception?

Emergency contraception can be very effective, especially if you have an IUD fitted or if the emergency contraceptive pill is taken soon after sex. However, it is not as effective as using other methods of contraception regularly and does not protect you against sexually transmitted infections.

Can I use breastfeeding as a form of contraception?

Breastfeeding is 98 per cent effective in preventing pregnancy providing:

- you are fully breastfeeding—this means you are not giving your baby any other liquid or solid food or
- you are nearly fully breastfeeding—this means merely giving your baby and infrequently giving your baby other liquids and
- your baby is less than six months old and
- you have no periods.

See the FPA booklet Your guide to contraception for how well each method works based on extensive independent research.

What if I become pregnant?

If you are pregnant you need to think about what you want to do. You can choose to:

- continue with the pregnancy and keep the baby
- end the pregnancy by having an abortion
- continue with the pregnancy and have the baby adopted.

You can get further information from the FPA booklet. Pregnancy and don’t know what to do? at www.fpa.org.uk.

Sexually transmitted infections

Most methods of contraception do not protect you from sexually transmitted infections. Male and female condoms, when used correctly and consistently can help protect against sexually transmitted infections. If you can, avoid using spermically lubricated condoms. The spermicide commonly contains a chemical called Nonoxinol 9, which does not protect against HIV and may even increase the risk of infection.
<table>
<thead>
<tr>
<th>Contraception method</th>
<th>Effectiveness</th>
<th>How it works</th>
<th>Advantages</th>
<th>Disadvantages</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Hormonal contraceptive</td>
<td>94% effective</td>
<td>Prevents ovulation, thickens cervical mucus which makes it difficult for sperm to enter the uterus</td>
<td>Can be used for 12 months to 10 years</td>
<td>Tenderness, bruising, heavy and painful periods</td>
<td>It can be temporary side-effects and may affect breast tenderness, mood swings and discharge.</td>
</tr>
<tr>
<td>Intrauterine system (IUS)</td>
<td>Very small chance of getting an unintended pregnancy</td>
<td>Prevents sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting and thickens cervical mucus to prevent sperm meeting an egg.</td>
<td>Insertion can be uncomfortable</td>
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<td>A very small chance of getting an unintended pregnancy.</td>
</tr>
<tr>
<td>Fixed dose progesterogen vaginal ring</td>
<td>95% effective</td>
<td>Prevents ovulation, thickens cervical mucus to prevent sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting</td>
<td>Made of very thin latex (rubber) or polyurethane, condom is worn each time</td>
<td>Must be put on before the penis enters the condom and cannot use estrogen.</td>
<td>A very small chance of getting an unintended pregnancy.</td>
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<tr>
<td>Oral contraceptive pills (OC)</td>
<td>Over 99% effective</td>
<td>Prevents ovulation, thickens cervical mucus. It stops ovulation, and progestogen. It stops ovulation, and progestogen.</td>
<td>Easy to use, effective, can be used as long as the user wants to be</td>
<td>Not to be left out for more than 7 days</td>
<td>Very small chance of getting an unintended pregnancy.</td>
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<td>Contraceptive vaginal ring</td>
<td>Over 99% effective</td>
<td>Prevents ovulation, thickens cervical mucus. It stops ovulation, and progestogen.</td>
<td>Easy to use, effective, can be used as long as the user wants to be</td>
<td>Not to be left out for more than 7 days</td>
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<td>Intrauterine device (IUD)</td>
<td>Over 99% effective</td>
<td>Prevents sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting</td>
<td>Made of very thin latex (rubber) or polyurethane, condom is worn each time</td>
<td>Must be put on before the penis enters the condom and cannot use estrogen.</td>
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<td>Female condom</td>
<td>Very small chance of getting an unintended pregnancy</td>
<td>Prevents sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting</td>
<td>Made of very thin latex (rubber) or polyurethane, condom is worn each time</td>
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<td>Male condom</td>
<td>Over 99% effective</td>
<td>Prevents sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting</td>
<td>Made of very thin latex (rubber) or polyurethane, condom is worn each time</td>
<td>Must be put on before the penis enters the condom and cannot use estrogen.</td>
<td>A very small chance of getting an unintended pregnancy.</td>
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<td>Diaphragm or cervical cap</td>
<td>Less than one woman in 100 will get pregnant in a year.</td>
<td>Prevents sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting</td>
<td>Made of very thin latex (rubber) or polyurethane, condom is worn each time</td>
<td>Must be put on before the penis enters the condom and cannot use estrogen.</td>
<td>A very small chance of getting an unintended pregnancy.</td>
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<td>Combined pill (COC)</td>
<td>Over 99% effective</td>
<td>Prevents ovulation, thickens cervical mucus. It stops ovulation, and progestogen.</td>
<td>Easy to use, effective, can be used as long as the user wants to be</td>
<td>Not to be left out for more than 7 days</td>
<td>Very small chance of getting an unintended pregnancy.</td>
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<td>Simple pill (SP)</td>
<td>Over 99% effective</td>
<td>Prevents ovulation, thickens cervical mucus. It stops ovulation, and progestogen.</td>
<td>Easy to use, effective, can be used as long as the user wants to be</td>
<td>Not to be left out for more than 7 days</td>
<td>Very small chance of getting an unintended pregnancy.</td>
</tr>
<tr>
<td>Male sterilisation</td>
<td>Over 99% effective</td>
<td>Prevents sperm reaching an egg and thins the lining of the uterus to prevent a fertilised egg implanting</td>
<td>Made of very thin latex (rubber) or polyurethane, condom is worn each time</td>
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A final word
This booklet can only give you general information. The information is based on evidence-guided research from the World Health Organisation and The Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists.
All methods of contraception come with a Patient Information Leaflet which provides detailed information about the method. Remember - contact your doctor, practice nurse or a sexual health clinic if you are worried or unsure about anything.