

BIRTH CONTROL GUIDE



DEPARTMENT OF
OBSTETRICS &
GYNECOLOGY

With so many birth control options available, and so many sources of information, it can be challenging to determine what method is right for YOU! This guide is a quick and easy way to learn about your birth control choices. You can use this guide before your visit to help plan your conversation, or later when you are finalizing your decision. Remember, not all birth control methods are right for everyone. Your doctor will need to know your medical history and your plans for future pregnancy to help you with your decision.

Important considerations when choosing YOUR method

1. Are you sexually active and at risk of becoming pregnant?
2. Are you planning a pregnancy in the future? If so, when?
3. What methods have you tried in the past? What did you like or dislike about them?
4. Is it easy for you to take medication every day?
5. How important is spontaneity for you and your partner?
6. How important is privacy?
7. How important is cost?

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INTRAUTERINE DEVICES (IUDs)

Brands available

- 1) Paragard®: “the copper IUD”: No hormones, just plastic wrapped with copper
- 2) Mirena®: Plastic IUD containing 52mg of levonorgestrel (progesterone)
- 3) Liletta®: Plastic IUD containing 52mg of levonorgestrel
- 4) Kyleena®: Plastic IUD containing 19.5mg of levonorgestrel
- 5) Skyla®: Plastic IUD containing 13.5mg of levonorgestrel

How does it work?

- Copper IUD: Copper is toxic to sperm and it creates a reaction in the uterus to prevent fertilization.
- Hormone containing IUDs: Makes cervical mucus thicker to prevent sperm from traveling into the uterus and thins the lining of the uterus.

How well does it work?

- Copper IUD: Less than 1% risk of pregnancy in 1st year of use
- Hormone containing IUDs: Less than 0.5% risk of pregnancy in 1st year of use
 - Each hormone containing IUD has a slightly different success rate, but all are proven highly effective in preventing pregnancy

How long does it last?

- Paragard®: FDA approved for 10 years
- Mirena®: FDA approved for 8 years
- Liletta®: FDA approved for 8 years
- Kyleena®: FDA approved for 5 years
- Skyla®: FDA approved for 3 years

Will it fall out?

- Recent data suggests that overall risk is about 5% without recent pregnancy
- Risk factors for expulsion: placement immediately after placenta delivered or within the first 6 weeks postpartum, breast feeding, not having had a baby before, those with heavy periods

What about my period?

- Hormone containing IUDs decrease period bleeding by keeping the lining of the uterus thin
 - Mirena® and Liletta® are most effective – 20% of women don’t have any bleeding within a year of initiation
- Hormone containing IUDs can make bleeding irregular, but overall users experience a lighter period flow
- The Copper IUD creates a reaction in the uterus to help prevent pregnancy, and this can increase period bleeding and cramping. It should not change the timing of your periods or cause bleeding in between periods.

Side effects?

- In general, less common than most other forms of hormonal methods
- Some women reported increased headaches, vaginal discharge, and irritation of the vagina or vulva
- Hormonal IUD: <10% of patients reported acne, ovarian cysts (typically resolve without treatment), breast tenderness, depressed mood

INTRAUTERINE DEVICES (IUDs) - continued

Advantages

- Discreet
- Highly effective (similar to permanent sterilization, but reversible!)
- Quick return to fertility
- Cost effective contraceptive method and covered by most insurance plans
- Fewer side effects due to no hormones (copper) or low amount of hormones
- Can be used while breastfeeding
- Most women can use this method

Disadvantages

- Requires a procedure to place it and to remove it
- Potentially higher upfront cost – ask us! We can estimate your insurance coverage
- Copper IUD: possible heavier periods with more cramps
- Hormonal IUD: possible irregular bleeding that is not predictable
- No protection from sexually transmitted infection

How quickly can I get pregnant after IUD removal?

- Fertility typically returns quickly, and some women may get pregnant within weeks of removal. If you do not desire pregnancy, then consider using condoms in the week before your removal appointment.

FEMALE PERMANENT STERILIZATION

"Tube tying"

Types

- Postpartum tubal ligation—requires a small cut just below your belly button
- Laparoscopic salpingectomy—surgery done with three small poke-holes in your belly

How does it work?

- Women: Removal of all or part of the fallopian tube, which prevents the egg from passing through

How well does it work?

- Very effective, less than 1% risk of failure
- Female sterilization—10 year rate of pregnancy is ~0.02%

Is it safe?

- Female sterilization
 - Risks of anesthesia—spinal anesthesia for postpartum, and general anesthesia for laparoscopy
 - Risks of surgery on abdomen—injury to surrounding organs (ovaries, blood vessels, uterus)
 - If pregnancy does occur, there is an increased risk of ectopic pregnancy

Advantages

- Very effective
- Permanent
- No hormonal side effects
- Quick recovery
- Cost effective

Disadvantages

- Expensive to attempt pregnancy in the future—would need invasive procedures and no guarantee for success (need for in vitro fertilization, also known as "IVF")
- Risk of regret
 - About 20% if under the age of 30 at the time of sterilization
 - About 40% if under the age of 25 at the time of sterilization
- Requires surgery, anesthesia, and the associated costs
- Risk of ectopic pregnancy for female sterilization, which is often costly
- Risk of ectopic pregnancy for female sterilization, which is NOT true for vasectomy
- No protection against sexually transmitted infection

MALE PERMANENT STERILIZATION

"Vasectomy"

How does it work?

- A short, in-office procedure to interrupt the tube that puts sperm into semen

How does it work?

- Removing or blocking the tube in the testicle to prevent sperm from entering ejaculate
- Does not change volume of ejaculate

How well does it work?

- Very effective, less than 1% risk of failure
- Approximately 0.2% failure rate when follow up confirms sperm are no longer present

Is it safe?

- Considered safer than female sterilization for the following reasons:
 - Does not require heavy anesthesia when compared to female sterilization
 - Does not require surgery/cutting on abdomen
 - Does not have increased risk of ectopic pregnancy
- Extremely small risk of chronic pain

Advantages

- Very effective
- Permanent
- Quicker recovery
 - In-office procedure that does not require recovery from general anesthesia or abdominal surgery
- Cost effective
- Quick return to sexual activity

Disadvantages

- Expensive to attempt pregnancy in the future—would need invasive procedures and no guarantee for success
- Risk of regret is minimal after age 30
 - Only ~6% of men seek reversal
- Cost effective due to not requiring operating room, general anesthesia
- No protection against sexually transmitted infection
- May require follow up appointment to confirm success

NEXPLANON® ARM IMPLANT

What is it?

- A small plastic rod about the size of a matchstick containing 68mg Etonogestrel
- Etonogestrel is an artificial progesterone, like hormones in IUDs, pills, and the shot

How does it work?

- Increases cervical mucus to block sperm from entering the uterus
- Stops the body from releasing eggs

How well does it work?

- Nexplanon® is the most effective form of birth control available currently
- Pregnancy rate is about 0.05% each year

How is it put in my body?

- Requires a quick, less than 5-minute, procedure to insert in your arm
- It goes under the skin to where you can touch it with your fingers, but it is not easily visible
- FDA approved for 3 years; research suggests it is good for 5 years of pregnancy prevention

Safety

- Most women are candidates
- Can interact with certain medications and lead to decreased ability to prevent pregnancy
 - Tell your doctor about all your medications, supplements, and vitamins
- Not for use in women with breast cancer, liver cancer/disease

What about my period?

- About 20% of women will stop having periods after the first year of use
- Overall people typically lose less blood each month, however the pattern may be irregular
 - You may experience light, unpredictable bleeding

Advantages

- Very effective at preventing pregnancy for several years
- Safe during breastfeeding
- Quick return to fertility – commonly 3-4 weeks after removal

Disadvantages

- Must have a procedure to place and remove
- Irregular bleeding – most common reason people request removal of their implant
- Side effects, although rare due to low level of hormone: headache, weight gain, acne, breast tenderness, mood changes, abdominal pain

How quickly can I get pregnant after Nexplanon® removal?

- Your body will release an egg within a few weeks after removal, meaning fertility typically returns quickly

DEPO-PROVERA® SHOT

What is it?

- A shot you receive every 12 weeks containing the hormone medroxyprogesterone acetate (a type of progesterone)
- You can get it as a shot in your muscle or just under your skin, depending on the type

How well does it work?

- When performed as directed and on time the risk of pregnancy is less than 1%
- With imperfect use risk of pregnancy is about 4%

How does it work?

- The progesterone hormone stops your body from releasing eggs
- Thickens cervical mucus

Is it safe?

- Most women are a candidate for this medication since it only has progesterone
- Caution for women who cannot receive shots in the muscle
- Caution for women with history of postpartum depression
- Caution for women with bone mass issues (osteopenia, osteoporosis)

What about my period?

- Decreased bleeding with periods; about 40% of women stop having periods by the 4th shot
- Decreased cramping and decreased pain for women with endometriosis

Advantages

- Requires an injection every 12 weeks, rather than a daily or monthly method
- Discreet/private
- Decreases risk of cancer in the lining of the uterus
- For women with sickle cell disease – may have less sickle cell crises
- For women with seizures – may have less seizures

Disadvantages

- Must come to clinic every 12 weeks for the shot
- Reversible (not permanent) decrease in bone mass – ask your doctor to discuss this with you

Side Effects

- Unpredictable, irregular bleeding – most common in first 3-6 months, but can persist
- Associated with weight gain – 5-10 pounds over 5 years of use
- Some women report decreased libido
- Some women experience hair loss
- Women with depression may experience an increase in symptoms

How quickly can I get pregnant after stopping?

- May take 6-18 months to return to fertility depending on how long you are on the shot

COMBINED BIRTH CONTROL PILL

"The Pill"

How does it work?

- Uses estrogen and progesterone to stop your body from releasing eggs
- Thickens the cervical mucus

How well does it work?

- Typical use pregnancy rate is about 7%, which considers people may forget or be late taking pills
- Perfect use pregnancy rate is 0.1%

How do I use it?

- You swallow a small pill
- Most pill packages contain 21 or 28 pills in each package
 - 21-pill packs have only 3 weeks of hormone-containing "active" pills
 - 28-pill packs have 3 weeks of hormone-containing "active" pills and 1 week of placebo (hormone-free) pills
- Routine use
 - A hormone-containing pill is taken daily for 3 weeks, and no hormones are taken on the fourth week; this is the week you have a period
 - Some women choose to take no pill during the hormone-free week, others prefer a pack that contains a fourth week of placebo pills so they can remember to take a pill every day
- Extended cycle packs typically contain 3 months of pills
 - A hormone-containing pill is taken for 12 straight weeks
 - However, most pill packs can be used to extended cycles by skipping placebo pills at the end of the package and only continuing the active pills
 - Talk with your doctor to check if this is an option for you!
- Quick start – start the pill when you pick it up from the pharmacy
 - If it has been more than 5 days since your period started, then you will need to use condoms or another back up method for 7 days before relying on the pill
- First day start – start the pill pack the first day of your period, no back up method required
- Sunday start – start pills on the first Sunday after your period starts

Is it safe?

- In general, yes quite safe, but there are some risks for certain women – one of which is formation of blood clots. Pregnancy carries higher risk of blood clot than being on birth control pills.
- Estrogen increases the body's clotting ability, which means there is an increased risk of blood clots in the leg or lungs, as well as an increased risk of stroke or heart attack. The risk of this in a healthy patient is *very low*.
 - If you develop chest pain, shortness of breath, swelling and redness of one leg, or severe headache, then please call our office or come into the ER and stop your pill
- For women with certain medical conditions the risks are higher, most commonly:
 - 35 years old or older and smoking, multiple risks for heart disease, uncontrolled high blood pressure, history of a blood clot in legs or lungs, history of stroke or heart attack, history of breast cancer, migraines with vision changes called aura, heart valve disease. The combined pill is generally not advised for individuals with these conditions.

COMBINED BIRTH CONTROL PILL - continued

What about my period?

- Bleeding is typically regular, predictable
- Has the ability to help you skip periods if desired
- Decreased cramps and blood flow during cycles

Advantages

- Decrease in PMS and similar mood disorders like PMDD
- Decrease in acne and excessive facial hair growth
- Decreased pelvic pain for women with endometriosis
- Decreased ovarian cysts
- Decrease in headaches associated with periods
- Decreased risk of ovarian, uterus, and colon cancer

Disadvantages

- Risks of blood clotting, stroke, heart attack as discussed under safety
- Must remember to take the pill every day

Side effects

- Breakthrough bleeding – random bleeding during your pill cycle, which typically improves over the first three months of use
- Lack of periods – some people do not have bleeding, even on placebo pill week.
- Headache, nausea, and breast tenderness – the most common side effects and tends to improve/go away over the first 3 months of use
- Not typically associated with weight gain

How quickly can I get pregnant after stopping the pill?

- Most people get their period back in 1-3 months after stopping the pill – 98.9% of people get their period back before the 90-day mark
- If your cycles were regular before the pill, you could potentially get pregnant within weeks of stopping the pill. Have a backup method in mind if you are planning to stop your pill and you do not want to be pregnant.

BIRTH CONTROL PATCH

What is it?

- It's a small sticker (patch) that is a little less than 2 inches in size, and contains estrogen and progesterone
- Brands: Xulane®, Twirla®
- Twirla® has lower hormone levels, but is still very effective

How does it work?

- Uses hormones to stop your body from releasing eggs, similar to the pill
- Thickens cervical mucus

How well does it work?

- Typical use pregnancy rate is about 7%
- Perfect use pregnancy rate is 0.8%

How do I use it?

- You place the patch on your skin once weekly for three weeks, then the fourth week is patch-free
- Higher levels of hormone in the patch means it should not be used continuously (skipping the patch free week) unless instructed by your doctor
- Patch is designed to stay on during activities like working out, swimming, showering, etc.

Is it safe?

- The patch has higher levels of hormone in the body than the pill or vaginal ring (see below), which may increase the risk blood clot, stroke, heart attack.

What about my period?

- The patch typically makes bleeding regular and lighter
- Can decrease cramping and blood flow

Advantages

- Once weekly use
- Does not require any pill swallowing
- Not associated with weight gain
- Improvement in acne

Disadvantages

- Possible irritation or allergy from adhesive used for the patch
- Could potentially fall off (uncommon given strong adhesive)
- Decreased effect in women weighing more than 180 pounds
- Increased breast tenderness, but tends to resolve or improve in first three months

How quickly can I get pregnant after stopping the patch?

- The body typically starts releasing eggs within the first month of stopping
- If you stop the patch and do not want to be pregnant, use condoms or back up method

PROGESTERONE ONLY PILL

“POPs”, “Mini Pill”, “breastfeeding pill”

What is it?

- There are three different pill types available, with different hormones
 - Norethindrone containing pill – Micronor®, Heather®, etc. Requires a prescription
 - Norgestrel containing pill – Opill® available over the counter without a prescription
 - Drospirenone containing pill – Slynd®, a newer pill released in May 2019

How well does it work?

- Norethindrone & Norgestrel have approximately 9% pregnancy rate with typical use
- Slynd® has about a 2% pregnancy rate with perfect use, 9% pregnancy rate with typical use

How does it work?

- Norethindrone & Norgestrel thicken cervical mucus and prevents the release of the egg in some cycles (not consistent)
- Slynd® primarily stops your body from releasing an egg, thickens cervical mucus

Is it safe?

- Most women are a candidate for POPs
- Medication interactions can exist, tell your doctor all your medications and supplements
- Slynd® may increase your body's potassium level, tell your doctor all your medications and supplements

What about my period?

- Unplanned bleeding is more common with Norethindrone than Slynd®, but can occur with both
- Some women may have a regular bleeding pattern, and others may have no bleeding
- Overall amount of blood loss is less, though may be more irregular

Side effects

- Some women may experience acne, nausea, breast tenderness. These symptoms may resolve with continued use.

Advantages

- No increased risk of blood clots, heart attack, or stroke
- Safe for women with many different health conditions
- Safe for breastfeeding
- Slynd® has a 24-hour window to catch up on a missed pill

Disadvantages

- Norethindrone & Norgestrel – you must take at the same time every day – more important than in any other birth control method
 - If taken late by 3 hours or more, it will not be effective, and you will need to use a backup method (condoms) for 48 hours and take the pill more timely.

How quickly can I get pregnant after stopping?

- Hormones are out of the body within days of stopping the pill
- Ability to get pregnant typically returns very quickly, days to weeks

VAGINAL RINGS

What is it?

- Flexible, silicone free rings that are soft enough to squeeze and place inside the vagina
- Contains both estrogen and progestin
- Two available rings – NuvaRing® (monthly), and Annovera® (yearly)

How well does it work?

- NuvaRing® has a typical use pregnancy rate of 7-9%. Perfect use is less than 1%.
- Annovera® has a perfect use pregnancy rate of about 3%.

How does it work?

- Stops your body from releasing eggs
- Thickens cervical mucus

How do I use it?

- NuvaRing®
 - You will put the ring inside your vagina at home and leave it inside for 3 weeks. Then it is removed for one week. If you want to skip a period, you can leave the ring in place for 4 weeks, remove it and immediately place new ring. Each ring is has one month of hormones.
- Annovera®
 - You will put the ring inside your vagina at home and leave it inside for 3 weeks then remove it for one week, and store it in the provided case. You will then place the same ring back inside the vagina. This ring has enough hormones for a full year.

Is it safe?

- Given this method has estrogen, it also has risk of blood clot, stroke, & heart attack like the pill/patch.
- Lower levels of estrogen in the body than pill and patch, and levels are more stable

What about my period?

- Vaginal rings make bleeding regular and lighter
- Can decrease cramping

Advantages

- One ring per month, or per year
- Studies do not show weight gain
- Can remove NuvaRing® for 3 hours total during the month for intercourse; for Annovera® only 2 hours per month.
- It can remain inside the vagina while having intercourse and is not harmful to your partner. Couples tend to not notice or may even enjoy the sensation of having it in place during sex.
- Less side effects from estrogen (breast tenderness, nausea)
- Improvement in acne

Vaginal Rings - continued

Disadvantages

- Can increase vaginal discharge, your natural lubricant
- Must be comfortable placing and removing ring – if you want to be in the office the first time you do this, please talk to your doctor.

How quickly can I get pregnant after removing it?

- NuvaRing® – the body will typically start releasing eggs within the first month of stopping
- Annovera® – women reported return to fertility within 6 months of stopping in studies

PHEXXI®

What is it?

- Hormone free gel that is inserted into the vagina before sex, can be used in combination with a diaphragm

How well does it work?

- With typical use (accounts for human error in use) 14% risk of pregnancy in 7 menstrual cycles
- If used perfectly has a 7% risk of pregnancy in 7 menstrual cycles

How does it work?

- Gel is inserted into the vagina with an applicator and works to keep the vagina acidic
- The acidic environment prevents sperm from swimming easily to their target (the egg)
- Must be used with every episode of intercourse

Is it safe?

- Very few contraindications since it is hormone free
- Less than 1% of women in studies reported bladder or kidney infections with use
- Could cause vaginal irritation

Advantages

- Hormone free, most women can use the method
- Can act as lubricant
- No lingering effects on fertility
- No changes to your periods

Disadvantages

- Must remember to use before intercourse
- Does not protect from infections
- Could cause irritation or allergies
- Less effective than other methods

Side effects

- Risk of bladder or kidney infection
- Painful urination
- Vaginal discharge
- Potential for allergic reaction or irritation for both partners

How quickly can I get pregnant after stopping?

- No long-lasting effects, immediate return to fertility

MALE CONDOMS

What is it?

- Barrier made from either latex, polyurethane membrane, or animal membrane

How well does it work?

- Pregnancy
 - 2% pregnancy rate with perfect use (used every time, always properly placed before penis is inserted, safely stored – NOT IN A WALLET)
 - 18% pregnancy rate with typical use
- Infection protection
 - Decreases risk of HIV, gonorrhea, chlamydia, trichomonas, syphilis, HPV, herpes, hepatitis

How does it work?

- When placed over the penis properly, it acts as a barrier and collects semen to prevent pregnancy and decrease infection risk

Is it safe?

- Yes, but make sure you know what type of condom you have purchased
- Many condoms are latex, so if you or your partner have an allergy to latex you will need to purchase latex-free condoms

Advantages

- No effects on fertility
- Found at many stores
- Protects against infection

Disadvantages

- Must remember to put on before intercourse
- Some partners may not like change in sensation
- Requires both partners for participation
- Cannot use oil-based lubricants with latex condoms since it may break down the barrier

How soon can I get pregnant after stopping?

- Does not change your fertility

FEMALE BARRIER CONDOMS

"Internal Condoms"

What is it?

- Latex tube with a flexible ring at each end. One end of the tube is closed and goes against the cervix (at the top of the vagina). The other end is open and stays just on the outside of the vagina so the penis can go inside the tube.

How well does it work?

- 5% risk of pregnancy in 1st year when used perfectly, and 21% risks of pregnancy with typical use

How does it work?

- It is a latex tube that lines the vagina and prevents sperm from entering the vagina/cervix

Is it safe?

- Do not use it if latex allergy
- If you have significant pelvic floor relaxation it may not stay in place
- Do not use it if you have a history of frequent urinary tract infections or history of toxic shock syndrome

Advantages

- Safe, immediately effective, and immediately reversible
- Only need to use it during sex
- No hormone related side effects
- Helps prevent sexually transmitted infections

Disadvantages

- Higher risk of pregnancy
- Requires effort/skill to put inside the vagina and removing after sex without spilling

Return to fertility

- Does not change your fertility

CAYA® DIAPHRAGM

What is it?

- A silicone cup, prescribed like a medication, that is placed inside the vagina (somewhat similar to a menstrual cup) that is used in combination with an over-the-counter spermicide gel (to also kill sperm and increase the effectiveness)
- Latex and free of hormones

How well does it work?

- Typical use pregnancy rate is about 18%, with perfect use being 14%

How does it work?

- Caya® is a flexible cup that you line with contraceptive gel and then insert into the vagina prior to intercourse. It is removed after intercourse and placed in the included case.
- Should not be used without the addition of contraceptive gel
- Caya® is one size fits most bodies, so you will need to speak with your doctor

Is it safe?

- It is hormone free, so most women can use this method
- Risk of irritation from contraceptive gel

Advantages

- Hormone free
- One diaphragm lasts for 2 years with appropriate care

Disadvantages

- Must be able to place prior to intercourse
- Does not protect against infections
- Partner may feel diaphragm

How soon can I get pregnant after stopping?

- Use of a diaphragm barrier, like Caya®, does not stop your body from releasing eggs
- Your fertility remains at its baseline level since there are no hormonal effects

FERTILITY AWARENESS METHODS

“Natural Family Planning”

What is it?

- Several different methods of assessing fertility through tracking cycles, cervical mucus, and body temperature to determine fertile periods. By tracking, this helps partners avoid intercourse during the highest fertility times.

How well does it work?

- Must have regular cycles to use these methods effectively
- Depends on ability to accurately track cycle
- Depends on both partners' ability to abstain or use condoms during fertile windows
- 75-99% rates due to the many variables for effective use

How does it work?

- **Natural Cycles®**—the first FDA approved birth control app on your phone; uses cycle tracking and body temperature as measured with a thermometer provided by Natural Cycles®, Apple® watch, or Oura® ring. The app can also be utilized to time intercourse with the fertile window to become pregnant. The app reports a 7% typical use pregnancy rate in the first year of use.
- **Standard Days Method**—requires a 26-32 day cycle, uses days 8-19 of cycle as fertile period and recommends abstinence or use of alternative method (condoms, withdrawal)
- **Calendar Rhythm Method**—your fertile window is calculated using the longest and shortest cycles over a 6-12 month period
- **Billings Ovulation Method**—relies on your ability to look, touch/feel the thickness of your cervical mucus

Is it safe?

- Only risk is widely variable pregnancy rate
- No risks other than pregnancy and sexually transmitted infection

Advantages

- No side effects
- May improve body self-awareness

Disadvantages

- May require time intensive monitoring and recording (daily temperature or cervical mucus checks)
- Higher risk of pregnancy
- Must have regular menstrual cycles
- Most partners must be involved and willing to participate

How quickly can I get pregnant after stopping?

- Immediately, and can use this method to help achieve pregnancy by knowing fertile period

WITHDRAWAL "Pull Out Method"

What is it?

- Penis is removed from the vagina before ejaculation

How well does it work?

- Typical use pregnancy rate is about 27% over the course of a year
- Perfect use is difficult to know given some men may have higher levels of sperm in pre-ejaculate

How does it work?

- Removal of the penis to prevent sperm from entering the vagina and swimming to egg

Is it safe?

- Risks are pregnancy and sexually transmitted infection
- No side effects

Advantages

- No hormonal effects
- No cost
- Always accessible

Disadvantages

- Requires male partner to have self-control, experience, and knowledge of his body to know when ejaculation is about to occur
- Pre-ejaculate may contain sperm, increasing pregnancy risk
- No protection against infection

When can I get pregnant after stopping?

- No effects on fertility while using method

EMERGENCY BIRTH CONTROL

What is it?

- Pills
 - Ella®: 30mg ulipristal acetate, most effective of pills – **prescription only**
 - Plan B®: 1.5mg of levonorgestrel – **over-the-counter**
- Paragard® IUD – made of copper

How well does it work?

- Most effective within 72 hours of unprotected intercourse, but can be used up to 120 hours after
- If used before the body has released an egg, these methods are very effective
- Pills have a pregnancy rate of 1-3%, with Ella® being most effective
- Copper IUD has a less than 1% failure rate at prevention of pregnancy
- You must avoid additional episodes of unprotected sex during the current menstrual cycle when using pill methods. The copper IUD remains effective birth control once placed.

How do I get access to emergency birth control?

- Call the clinic at 832-826-7500 for Ella® prescription or Copper IUD insertion
 - Make sure you let the scheduling team know you need emergency birth control
- Plan B® and other brands of levonorgestrel are available over the counter
 - Go to your pharmacy counter and ask the pharmacist for the medication

Safety

- Pills are safe for women with and without medical problems
- If you have a bleeding disorder, or are on a blood thinner, please let your doctor know

Return to Fertility

- Period will typically occur within 1 week following the expected time