

Contraception



FAST FACTS

- Contraception can help you avoid getting pregnant or to plan when you want to get pregnant.
- There are many contraception options and some might suit you more than others.
- Condoms are the only type of contraception that also protect you from sexually transmitted infections (STIs).
- If you are living with HIV, there are some other things to think about when deciding which type of contraception to use.

Contraception helps people avoid pregnancy, or plan when to get pregnant. It means you can relax and enjoy sex without worrying about getting pregnant – however you will still need to use a condom to prevent [sexually transmitted infections \(STIs\)](#).

There are lots of different types of contraception or ‘birth control’ available, so you can find one that fits in with your lifestyle. The information on this page can help you decide which is right for you.

Most forms of contraception outlined on this page are taken by women. However, it’s important for couples to talk about contraception and share responsibility for using it correctly. Together, you can make a decision about which one is right for you.

How do I choose the right type of contraception?

Your healthcare professional will be able to talk you through the different types of contraception available and answer any questions you have. Some things to think about are:

- how often you need to take it
- how effective it is at preventing pregnancy
- how you will protect yourself from STIs
- if/how soon you plan on getting pregnant in the future
- any health conditions you have and other medication you are taking, including [HIV treatment](#).

What are the different types of contraception?

Hormonal

Hormonal contraception works by releasing hormones into your body to stop you getting pregnant. There are several types:

- Combined pill or 'the pill' – contains two hormones (oestrogen and progestogen). You usually take one pill every day for 21 days, before taking a seven-day break. After a week, you start taking the pill again.
- Progesterone-only pill (POP) or 'mini pill' – only contains progestogen and is taken every day, with no breaks.
- Contraceptive patch – a small, sticky patch placed on your skin. You wear each patch for a week before changing it. After three weeks, you take the patch off for seven-days, before starting again with a new patch.
- Vaginal ring – a small plastic ring you place inside your vagina. You use it for 21 days before taking it out for seven day. After a week you put in a new ring.

When used correctly, hormonal contraception is very effective. Some women find it easy to remember to take the pill every day, while others prefer the patch and the ring because they do not have to think about those as often.

At first some women notice some side effects from taking hormonal contraception, such as breast tenderness, changes in mood and light bleeding between periods. These usually go away after a few weeks but speak to your healthcare professional if you are worried or finding any side effects hard to manage.

Very rarely, women have more serious side effects, including blood clots. Your healthcare professional will be able to let you know if you are at risk, and may take your blood pressure to check. They can recommend a different type of contraception if necessary.

Hormonal contraception and HIV treatment

Some HIV treatment can make some hormonal contraceptives less effective. If you are taking HIV treatment, it's important to talk to your healthcare professional when deciding which contraceptive to

use.

You should also tell them about any other type of medications you're taking, including any herbal remedies, in case they affect your chosen contraception.

Long-acting reversible contraception

Long-acting reversible contraception (LARC) can last for weeks, months or years at a time. There are several types:

- Intra-uterine system or IUS – a small, T-shaped plastic device inserted into your womb by a healthcare professional. Releases progestogen to stop you getting pregnant. Lasts for three to five years.
- Contraceptive injection – an injection containing progestogen. Lasts for 8 to 13 weeks depending on the type of injection. You'll then need a repeat injection. Depo provera is one of the most common brands of injection.
- Contraceptive implant – a small plastic rod placed under the skin in your upper arm that releases progestogen. Usually lasts for three years. Nexplanon (also called Implanon) is one of the most common brands.
- Intra-uterine device (IUD), also known as the 'copper coil' or 'the coil' – a small, T-shaped plastic and copper device inserted into your womb. The IUD is non-hormonal, instead it releases copper to stop you getting pregnant. Lasts for five to ten years.

Many women prefer long-acting contraception as you don't need to remember to take it every day, or every time you have sex. This also makes it one of the most reliable forms of contraception.

Some women notice mild side effects, such as breast tenderness, headaches and changes to their period. This is usually nothing to worry about, but speak to your healthcare professional if you are concerned or finding any of these changes difficult to deal with.

Once the IUS, implant or IUD is removed, you'll be able to get pregnant straight away. However after you stop having the injection, it can take up to a year for your fertility to return to normal. You may want to consider this if you want to get pregnant soon after.

Condoms (male and female)

Condoms are the only type of contraception that prevent pregnancy and stop you from getting STIs. You can use either [male](#) or [female condoms](#).

Many people choose to use 'double protection', using condoms with another method such as the pill or the implant to be extra safe. Remember you should never use two condoms at the same time, as this makes them more likely to split (which means you won't be protected from pregnancy or STIs).

Other types of contraception

Diaphragm or cervical cap

A small device placed inside your vagina to stop sperm from getting to the egg. For diaphragms and caps to work, you also need to use a spermicide (a chemical you put in your vagina that destroys

sperm). However, some spermicides can increase your risk of getting HIV by irritating the skin.

Natural family planning

Involves following the signs of fertility during your menstrual cycle to work out when you are most likely to get pregnant.

This is one of the least reliable methods of contraception, so is only appropriate for couples who are thinking of having a baby soon and wouldn't mind becoming pregnant.

Speak to a healthcare professional before considering this option.

Emergency contraception

If you have had unprotected sex or your contraception has 'failed' (for example, the condom broke or you forgot to take your pill), you can take emergency contraception to help prevent pregnancy.

There are two types:

- Emergency contraceptive or 'morning after' pill – most pills need to be taken within 72 hours (three days), although there are some can work even after five days. But the earlier you take a pill the more likely it is to work.
- IUD or copper coil – can also be fitted as a form of emergency contraception up to five days after having unprotected sex. You can then use it as a regular form of contraception.

Several medicines, including some types of HIV treatment, can make the morning after pill less effective, so speak to your medical professional about any medication you're taking.

It's also a good idea to get tested for STIs after having unprotected sex.

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Sources:

[THT 'Contraception'](#)

[NAM \(2017\) 'Contraception'](#)

[NHS \(2018\) 'Contraception'](#)