Birth Control: What You Should Know

How do I choose a birth control method?
You should choose a method that you can use correctly and regularly. Methods that need daily, weekly, or monthly attention are more likely to fail. Other methods are less likely to fail because they stay inside your body for a longer time. Your doctor can explain other benefits and possible side effects. Benefits may include less painful menstrual periods and helping acne get better. Some methods may have rare side effects, such as blood clots.

Which methods work best?
Talk with your doctor about how to use your birth control correctly. Women may use any of these methods. Men may use condoms or have a sterilization procedure. Methods are listed here from most to least effective, based on how most people use them.

Most effective (less than one pregnancy per 100 women per year):
- **Implant**: This is a small, rod-shaped device that your doctor places under the skin of your arm during minor surgery. It stops pregnancy by slowly releasing a hormone into your body. An implant can be used for up to three years.
- **Intrauterine device**: This is a small device placed in your uterus by your doctor. It may have copper or a hormone in it. It is effective for three to 10 years, depending on the type.
- **Sterilization**: In women, this is done with a procedure to block the fallopian tubes. In men, this is done with a procedure to block sperm as they leave the testicles. Sterilization is considered a permanent method of birth control.

Less effective, usually because the method is not used correctly (six to 12 pregnancies per 100 women per year):
- **Injectable**: This is an injection of a hormone that is given by your doctor every three months.
- **Oral pills**: These are pills you take daily. They may have one or two types of hormones. It may help to use a reminder system, such as a phone alarm, to help you remember to take the pills at the same time everyday.
- **Patch**: The patch sticks to the skin on your stomach, buttocks, or upper body (other than breasts). It releases two hormones. The patch is typically changed weekly for three weeks and then removed completely for one week each month, at which time you will get your period.
- **Vaginal ring**: This is a small, flexible ring that releases two hormones. It is placed in the vagina for three weeks and removed for one week each month, at which time you will get your period.
- **Diaphragm**: This is a flexible, dome-shaped barrier that you put in your vagina before sex and take out after sex. It must be sized by your doctor to fit you.

Least effective (18 or more pregnancies per 100 women per year):
- **Male condom**: This is worn over the penis to keep sperm from entering the woman’s uterus. A condom should be placed before sex and left on during sex. Condoms also help prevent sexually transmitted infections. Male condoms are very effective when used with another birth control method.
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• **Female condom:** This is placed in the vagina before sex and left in during sex. It keeps sperm from entering the uterus.

• **Withdrawal method:** This involves removing the penis from the vagina before ejaculation to keep sperm from entering the woman's body. However, preejaculatory fluid (which may leak from the penis before orgasm) may still have enough sperm to cause pregnancy.

• **Sponge:** This is placed in the vagina before sex, and left in during sex. It has a gel in it that kills sperm.

• **Natural family planning:** This involves not having sex or using barrier birth control during the days of the menstrual cycle when a woman is most likely to get pregnant. It requires careful tracking of the menstrual cycle. Women may need to take their temperature or check their cervical mucus.

• **Spermicide:** This is a substance that kills sperm. It may be placed on condoms, diaphragms, and sponges. It may also be used by itself and put in the vagina. It is typically used within one hour before sex and left in for six to eight hours after sex.

**Will I need tests or a physical exam?**
Your doctor will ask questions about your medical history and current symptoms. He or she may also check your weight or blood pressure to make sure that it is safe for you to use certain birth control methods. You may be asked to take a pregnancy test before using a new form of birth control. If you do not have periods, or have heavy or irregular periods, tell your doctor before starting birth control.

**What else should I know?**
Certain birth control methods may cause heavy or irregular bleeding. This is usually not dangerous, but tell your doctor.

If you have migraine headaches with aura (such as sensations before your migraines start), high blood pressure, blood clots, or cancer, or if you smoke, talk with your doctor about birth control that has estrogen in it. These conditions may increase your risk of blood clots and stroke.

Condoms are the only birth control method that decreases your risk of getting a sexually transmitted infection. Condoms can be used with any other form of birth control.

To safely reduce your risk of pregnancy within five days of unprotected sex, prescription and over-the-counter emergency contraceptive options are available.

**Where can I get more information?**

AAFP's Patient Education Resource

Centers for Disease Control and Prevention
http://www.cdc.gov/reproductivehealth/unintendedpregnancy/contraception.htm

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