

# WHAT ARE MY CONTRACEPTIVE OPTIONS?

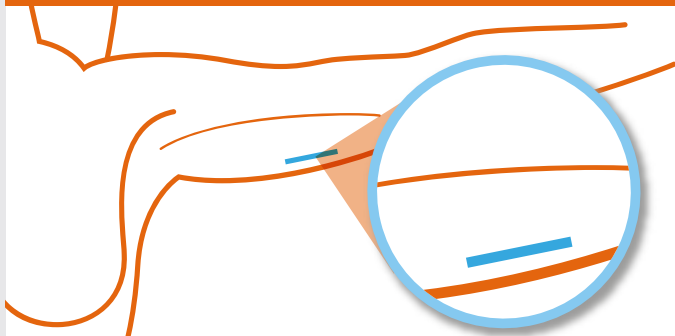
Contraceptive methods suitability will depend on your medical history. The advantages and drawbacks listed for each method are not exhaustive, talk to your doctor or nurse for more information.

Contraceptive categories and options are listed in alphabetical order.

## LONG ACTING

### Implant

Fitted just under the skin in the upper arm – lasts for up to 3 years.<sup>1</sup>  
Contains progestogen.<sup>2</sup>



#### ADVANTAGES

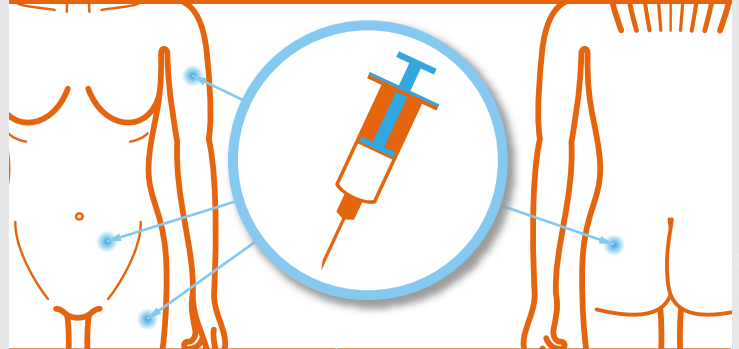
- Typical and perfect use effectiveness: over 99%<sup>3\*</sup>
- Fertility should return to levels expected for you after removal<sup>4</sup>

#### DRAWBACKS

- Women may have changes in menstrual patterns (periods)<sup>5</sup>
- Insertion and removal must be performed by trained healthcare professionals<sup>6</sup>

### Injection

Injected into the buttocks, arm, leg or abdomen every 8 or 13 weeks, depending on the type.<sup>1</sup>  
Contains progestogen.<sup>2</sup>



#### ADVANTAGES

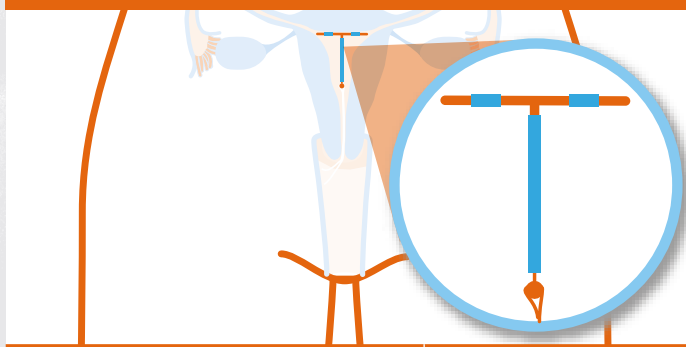
- Typical effectiveness: around 94%; perfect use effectiveness: over 99%<sup>3\*</sup>
- May be used as a short-term LARC for women and couples awaiting sterilisation or vasectomy

#### DRAWBACKS

- Women may have changes in menstrual patterns (periods)<sup>5</sup>
- Can take some time for fertility to return to normal<sup>4</sup>

### IUD or coil (intrauterine device)

Fitted into the womb – lasts for 5 or 10 years depending on the type.<sup>1</sup>  
Does not contain hormones.<sup>2</sup>



#### ADVANTAGES

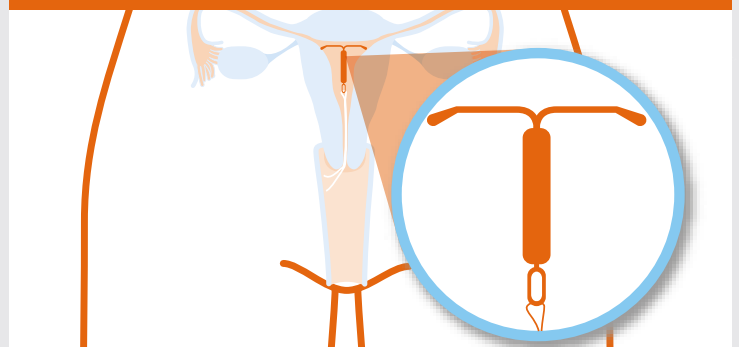
- Typical and perfect use effectiveness: over 99%<sup>3\*</sup>
- For women who want longer-term contraception but do not want to take hormones<sup>4</sup>
- Fertility should return to levels expected for you after removal<sup>4</sup>

#### DRAWBACKS

- Women may have changes in menstrual patterns (periods)<sup>5</sup>
- Insertion and removal must be performed by trained healthcare professionals<sup>6</sup>

### IUS (intrauterine system)

Fitted into the womb – lasts for 3 to 5 years depending on the type.<sup>1</sup>  
Contains progestogen.<sup>2</sup>



#### ADVANTAGES

- Typical and perfect use effectiveness: over 99%<sup>3\*</sup>
- Fertility should return to levels expected for you after removal<sup>4</sup>

#### DRAWBACKS

- Women may have changes in menstrual patterns (periods)<sup>5</sup>
- Insertion and removal must be performed by trained healthcare professionals<sup>6</sup>

To find out more about your contraceptive options speak to your doctor/nurse or visit [contraceptivematch.co.uk](https://contraceptivematch.co.uk)

contraceptivematch.co.uk has been fully funded and developed by Organon.

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## NATURAL

### Natural methods

Recognising the fertile and infertile times of your cycle to plan when you should avoid intercourse.<sup>7</sup>  
Natural family planning does not require you to take hormones.<sup>7</sup>



JANUARY						
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

#### ADVANTAGES

- May be useful for those who wish to avoid taking hormones
- When followed correctly, natural methods can be up to 99% effective<sup>7</sup>

#### DRAWBACKS

- Typical effectiveness is 74%\*, so around 1 in 4 women will become pregnant within the first year of using this method<sup>7</sup>
- Can take up to 6 months to learn effectively<sup>7</sup>
- Stress or illness can make the method unreliable<sup>7</sup>
- Need to avoid intercourse at certain times of the month and be highly motivated<sup>7</sup>

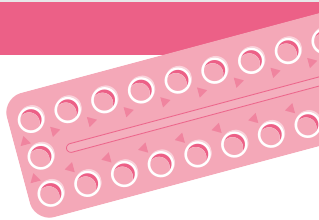
## SHORT ACTING

### Combined pills (COC)

Taken orally every day, or for cycles of 21 days followed by a 7-day break (depending on type) to work properly.<sup>12</sup>

Contains oestrogen and progestogen.<sup>10</sup>

Many types available containing different combinations of oestrogen and progestogen, sometimes in different dosing schedules.<sup>12</sup>



#### ADVANTAGES

- Typical effectiveness: 91%; perfect use effectiveness: 99%\*<sup>12</sup>
- For women who do not want a long-term contraceptive method and are able to comply with the daily medicine schedule<sup>10</sup>
- Often reduces bleeding and period pain, and may help with premenstrual symptoms<sup>10</sup>

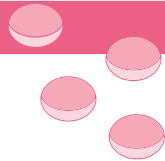
#### DRAWBACKS

- Oestrogen component may not be suitable for some women depending on medical history<sup>10</sup>
- May not be suitable for women who could forget to take their pill<sup>10</sup>
- Effectiveness can be affected by vomiting or diarrhoea<sup>10</sup>

### Progestogen-only pills (POP)

Taken orally.<sup>12</sup>

Contains only progestogen (many different types available).<sup>12</sup>



#### ADVANTAGES

- Typical effectiveness: 92%; perfect use effectiveness: 99%\*<sup>12</sup>
- May be suitable for women who do not want to or cannot take oestrogen e.g. due to medical history<sup>12</sup>

#### DRAWBACKS

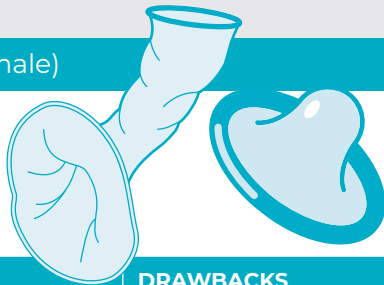
- Women may have changes in menstrual pattern (periods)<sup>12</sup>
- Effectiveness can be affected by vomiting or diarrhoea<sup>12</sup>

## SPONTANEOUS

### Condoms (male & female)

Barrier method that the man or woman can use.<sup>13</sup>

Does not contain any hormones.<sup>17</sup>



#### ADVANTAGES

- Typical effectiveness for male condom: around 82%; perfect use effectiveness: around 98%\*<sup>13</sup>
- Typical effectiveness for female condom around 79%; perfect use effectiveness: around 95%\*<sup>13</sup>
- May be useful for those who wish to avoid taking hormones or as additional protection
- The only contraceptive that offers protection against many sexually transmitted infections<sup>13</sup>

#### DRAWBACKS

- Putting them on can involve interruption of intercourse<sup>13</sup>
- The male condom can split or rupture<sup>13</sup>
- The female condom could be accidentally pushed aside<sup>13</sup>

## PERMANENT

### Sterilisation (male and female)

The fallopian tubes in women or the tubes carrying sperm in men (vas deferens) are cut, sealed or blocked.<sup>8</sup>  
Does not involve any hormones.<sup>9</sup>



#### ADVANTAGES

- Failure rate is about 1 in 200 for females and 1 in 2,000 for males<sup>9</sup>
- May be suitable for those who want a permanent method of contraception that involves no hormones

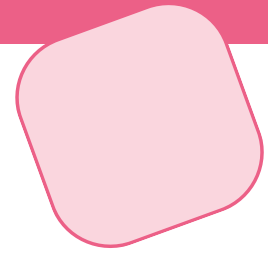
#### DRAWBACKS

- Cannot be easily reversed<sup>9</sup>
- Involves an operation/procedure<sup>9</sup>
- Sterilisation is not effective immediately<sup>9</sup>

### Patch

A small patch stuck onto the skin that releases hormones.<sup>11</sup>

Contains oestrogen and progestogen.<sup>11</sup>



#### ADVANTAGES

- Typical effectiveness: 91%; perfect use effectiveness: 99%\*<sup>11</sup>
- Applied once a week for 3 weeks each month<sup>11</sup>
- Not affected by vomiting and diarrhoea<sup>11</sup>

#### DRAWBACKS

- May be seen on the skin<sup>11</sup>
- Oestrogen component may not be suitable for some women depending on medical history<sup>11</sup>

### Vaginal ring

Flexible ring that is placed inside the vagina.<sup>14</sup>

Contains oestrogen and progestogen.<sup>14</sup>



#### ADVANTAGES

- Typical effectiveness: 91%; perfect use effectiveness: 99%\*<sup>14</sup>
- Only needs to be replaced once a month (one week following removal)<sup>14</sup>
- Not affected by vomiting and diarrhoea<sup>14</sup>

#### DRAWBACKS

- Need to learn how to insert, a doctor or nurse can show you how to put it in<sup>14</sup>
- Oestrogen component may not be suitable for some women depending on medical history<sup>14</sup>

### Diaphragms & caps

Barrier method of contraception that fits inside the vagina and sits over the neck of the womb.<sup>15</sup>

Does not contain hormones.<sup>17</sup>



#### ADVANTAGES

- Typical effectiveness: 71–88%\*<sup>15</sup>
- Effective in 92–96% of women when used perfectly and with spermicide<sup>15</sup>
- May be suitable for women who do not want a long-term contraceptive method but who wish to avoid taking hormones

#### DRAWBACKS

- Can take time to learn how to use it effectively<sup>15</sup>
- Involves forward planning or interruption of intercourse<sup>15</sup>
- Can be messy as it needs to be used with spermicide<sup>15</sup>

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