

Adolescent pregnancy prevention initiatives support teens as they explore and determine responsible sexual and reproductive options for their future.

This book is designed to give YOU the power to make good choices over your body and your future.

### **Sex has consequences.**

Teens who are having traditional sex and choose not to use any method of birth control have a 90% chance of having to deal with a pregnancy within the first year of becoming sexually active.

Teen pregnancy costs taxpayers millions of dollars each year.

The fact is, babies born to teens often do not receive the support they need to grow and develop as well as babies born to adult parents.

The costs to the children born to teen parents is immeasurable.



**A teen pregnancy changes everything.**

Almost 50% of teens have never considered how a pregnancy would affect their lives or the lives of those around them. **THINK** about it!

Girls who have babies as teens often raise those children in poverty, alone and dependent on the welfare system.

80% of the fathers of babies born to teens choose to live apart from their children and pay less than \$800 a year in child support.

Teen pregnancy is preventable. You don't have to change **YOUR** life plan—if you have a **PLAN** for life.

There is a family planning provider in most U.S. counties where you can receive counseling, guidance and birth control **FREE** and confidentially.

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**Plan when you choose to become pregnant.**

# Choices

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# HOW TO USE A MALE LATEX CONDOM

(...Or rubber, sheath, prophylactic, safe, french letter, raincoat, glove, sock)

Talk/Think about condom use with partner. Make the commitment, in advance, to use condoms without exception with each/every sexual act (vaginal, oral or anal). Have emergency contraceptive pills available in case you experience condom breakage or slippage.

Keep a supply of condoms handy...Store condoms in a cool, dry place away from sunlight and check the expiration date before use

Use a NEW condom before each and every sexual contact.

**USE CONDOM CORRECTLY.**  
 Before putting on the condom, check to see which way the condom unrolls. (If uncircumcised, pull back foreskin before unrolling condom.)  
 Before any genital contact, place condom on tip of erect penis, rolled side out and leave space at the top and pinch the air out.  
 Unroll condom all the way down to the base of the penis (down to hair).  
 NOTE: A condom can be put onto a penis that is not fully erect.  
 Smooth out air bubbles. Make sure condom fits (condoms come in various sizes)

**These two boxes contain some of the most important information in this entire book.**

**SAFE!**

**WATER BASED OR SILICONE LUBRICANTS SAFE FOR USE WITH CONDOMS**

- Astroglide®
- Water and saliva
- Glycerin
- All I-D Lubricants
- Aloe-9
- H-R Lubricating Jelly
- K-Y Jelly
- Prepair
- Probe
- AquaLube
- ForPlay
- Gynol II
- Wet
- Cornhuskers Lotion
- Silicone Lubricant
- deLube
- Spermicide\*
- Slippery Stuff

**\* NOT RECOMMENDED!**

Spermicidal condoms are no longer recommended although spermicides do not damage latex.

Add WATER-based lubricant to outside of condom if desired

Condom must be used throughout sex. Check periodically that condom is still in place.

Change condom if sex is prolonged or if penis is exposed to different orifice (mouth or anus).

**Immediately after ejaculation:**  
 Hold rim of condom and carefully withdraw penis while still erect

**RELAX.** Check for breakage; Dispose of condom. (If condom breaks, slips, falls off or is not used, use EC.) Dispose of condom safely. Do not flush down toilet. Wrap in tissue and discard.

**\* UNSAFE FOR USE WITH LATEX CONDOMS**

**These products may cause a hole in a latex condom in just seconds!**

- Aldara cream
- Baby oil or cold creams
- Edible oils (olive, peanut, corn, sunflower)
- Head and body lotions
- Massage oils
- Mineral oil
- Petroleum jelly
- Rubbing alcohol
- Shortening
- Suntan oil and lotions
- Whipped cream
- Vegetable oil and cooking oils
- Clindamycin 2% vaginal cream
- Vaginal yeast infection medications in cream or suppository form
  - Butoconazole cream
  - Clotrimazole cream or tablet
  - Miconazole vaginal suppository
  - Terconazole ointment, cream or vaginal suppository

*\*These lubricants/vaginal products can be used with polyurethane condoms*

Chapter  
**5**

# Condoms: Female

*(the single use  
internal female condom)*



## What is the Female Condom? FC2 is a nitrile polymer.

This is NOT latex or rubber. FC2® is a nitrile polymer and comes in only one size: 15 centimeters (about 6 inches) in length and 7 centimeters (about 3 inches) wide. It is open at one end and closed at the other. Both ends have a flexible ring used to keep the condom in the vagina. The flexible inner ring at the closed end is inserted into the vagina as far as possible and helps keep the condom in place; the inner ring may be removed or left in place in the vagina. The larger outer ring remains outside the vagina.

The FC2® is softer and makes less noise than the original FC® because it is made from a different material. It is also less expensive to produce and buy. Complete information about this contraceptive is available from your clinician, from the package insert, or [www.femalehealth.com](http://www.femalehealth.com). Among average couples who start using FC2®, about one in 5 (21%) will have an unplanned pregnancy in the first year. If, however, these condoms are used consistently and correctly every time, about 5% of women using them will become pregnant in the course of an entire year.

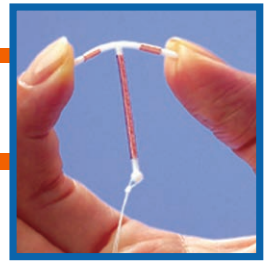
WHAT ARE THE ADVANTAGES?	WHAT ARE THE DISADVANTAGES?
<ul style="list-style-type: none"> <li>▶ Female condoms give women more contraceptive control and a sense of freedom. The female condom is an option for a woman who cannot get a man to use a condom.</li> <li>▶ <b>Female condoms give women a new option in preventing both pregnancy and sexually transmitted infections (especially against HPV and herpes, since it covers more of the outer genitals).</b></li> <li>▶ Women don't need to see a clinician to get it. No prescription or fitting is needed.</li> <li>▶ The female condom can be put in up to 8 hours in advance.</li> <li>▶ Your partner can insert it and make it part of lovemaking.</li> <li>▶ Condom is pre-lubricated inside and outside. The female condom can be used if either partner is allergic to latex (rubber).</li> <li>▶ The female condom is a good option during breastfeeding.</li> <li>▶ The female condom can be used for anal sex either by placing on penis or by inserting the inner ring.</li> <li>▶ <b>Breakage is rare.</b></li> </ul>	<ul style="list-style-type: none"> <li>▶ <b>The female condom is large and some feel it is unattractive or odd-looking. Although it looks different and may appear unusual at first, its size and shape allow it to protect a greater area. Many of the couples who have used it like the way it feels.</b></li> <li>▶ Some women do not like the idea of putting fingers or a foreign object into their vagina. It can be large and bulky for some women, and can be difficult for some women to place it into the vagina.</li> <li>▶ <b>Of course, it will not work if the man's penis enters the vagina outside of the female condom. The penis must be directed into the female condom.</b></li> <li>▶ The female condom is not available in as many stores as the male condom. It may be hard to find, so call the store in advance or plan to purchase them online.</li> <li>▶ <b>Female condoms are much more expensive than male condoms. Because of the cost, some couples have washed and reused female condoms, but this is not recommended!</b></li> <li>▶ The inner ring may cause discomfort; if it does, it should be removed.</li> </ul>

## Where do I get female condoms?

Female condoms are sold at some drugstores and at some supermarkets. They may also be available at women's clinics. Call in advance to be sure. They may also be purchased online, but be sure to plan ahead. They have been sold in packs of three or six and cost \$3.30 to \$6.00 per condom. The package comes with a leaflet that explains how to use the condom and small packets of additional lubricant. To learn more about female condoms, call your clinician, call 1-800-274-6601 or visit [www.femalehealth.com](http://www.femalehealth.com).

# Chapter 9

## IUDs



### What is the copper T IUD (Paragard)?

All available IUDs are safer and more effective than oral contraceptive pills. Worldwide more women use intra-uterine devices (IUDs) than any other reversible contraceptive. An IUD is a small device which is placed inside the uterus. The copper IUD is a simple T-shaped piece of soft, flexible plastic, wrapped with natural copper. The IUD has two very small strings that trail out through the cervix, which allow the woman to check that the IUD is still in place and allows her clinician to remove the IUD when she chooses. Once the IUD is in place, the copper is slowly released into the uterine cavity. Copper stops sperm from making their way up through the uterus into the tubes, so sperm don't fertilize the egg.

A woman is more than **twenty times** more likely to become pregnant if she uses pills, patches or rings than if she uses an IUD or implant. It is estimated that over half of U.S. family planning clinicians use an IUD for their personal contraceptive needs.

WHAT ARE THE ADVANTAGES?	WHAT ARE THE DISADVANTAGES?
<ul style="list-style-type: none"> <li>▶ IUDs are one of the most effective reversible method of birth control.</li> <li>▶ The copper IUD is effective for at least 12 years.</li> <li>▶ Only 2 out of 100 women using a copper IUD for 10 years will become pregnant.</li> <li>▶ The copper IUD is the most effective form of emergency contraception.</li> <li>▶ <b>This contraceptive is very inexpensive considering the long years of easy use that a woman gets from it. In fact, over time, it becomes the cheapest (most "cost effective") of all the reversible contraceptives.</b></li> <li>▶ Use of an IUD is convenient, safe, and private.</li> <li>▶ To "maintain" the IUD, all a woman has to do is check for the strings periodically.</li> <li>▶ The copper IUD may be used by women who cannot use estrogen-containing birth control such as pills, patches, or vaginal rings.</li> <li>▶ Women who have not had a baby can get an IUD and will have a rapid return of fertility after the IUD is removed.</li> <li>▶ The copper IUD may be inserted immediately following the delivery of a baby or immediately after an abortion.</li> <li>▶ <b>Some studies of IUDs have shown a decreased risk for uterine cancer. There is also some evidence that IUDs protect against cervical cancer.</b></li> </ul>	<ul style="list-style-type: none"> <li>▶ There may be cramping, pain or spotting after insertion.</li> <li>▶ <b>The number of bleeding days is slightly higher than normal and you may have somewhat increased menstrual cramping. If your bleeding pattern is bothersome to you, contact your clinician. There are medications which may improve your bleeding.</b></li> <li>▶ This IUD provides no protection against sexually transmitted infections. Use condoms if there is any risk.</li> <li>▶ There may be a high initial cost of insertion. However, after 2 years, it is the most cost-effective of all contraceptive methods.</li> <li>▶ The IUD must be inserted by a trained healthcare provider.</li> <li>▶ There is a risk that the IUD falls out of the uterus. This happens 2-5% of the time</li> <li>▶ Some men can feel the IUD strings with their penis during intercourse.</li> </ul>

### Where do I get an IUD?

You can get an IUD inserted by your doctor, nurse practitioner, nurse midwife, Planned Parenthood clinic or at a health department. Not all clinicians insert IUDs. Check in advance.

Chapter  
**13**

# Birth Control Pills

## Combined Oral Contraceptive Pills



### What are combined birth control pills?

Combined birth control pills contain two hormones – an estrogen and a progestin. They work by stopping ovulation (release of an egg) and by making the lining of the uterus thinner. Among typical couples who initiate use of combined pills 6-10% will experience an accidental pregnancy in the first year. This is because sometimes pills are not used correctly. If pills are used consistently and correctly, just 3 in 1,000 women will become pregnant in the first year of pill use.

If you are not within the first 5 days of your menstrual cycle, use a backup contraceptive for the first 7 days of your first pack of pills. More information about pills is available from your clinician or the package insert accompanying the pill brand you are taking.

WHAT ARE THE ADVANTAGES?	WHAT ARE THE DISADVANTAGES?
<ul style="list-style-type: none"> <li>▶ Pills decrease women’s menstrual cramps, pain, and blood loss.</li> <li>▶ Pills can prevent or help treat anemia if anemia due to blood loss.</li> <li>▶ <b>Acne often improves, and hair growth on the face is reduced.</b></li> <li>▶ Sex may be enjoyed more because of less fear of pregnancy.</li> <li>▶ You can control your cycle so as not to have your period during certain times (vacation, sporting events, backpacking, exams, honeymoon, etc.)</li> <li>▶ You can decrease the number of periods by using Seasonale® or Seasonique® (84 pills with hormones followed by 3-7 pills without hormones) or Lybrel® (365 hormonal pills and no hormone-free days).</li> <li>▶ All pill users who are using “non-cyclic” pills (same dose of hormones in all the pills) have the option of spacing their periods out. Those with long, painful or heavy periods or periods which bring on headaches or other problems may choose to do this by taking the active hormone pills <b>continuously</b>. Bleeding can come every 2, 6 or 12 or more months when the user takes a few days off the active hormone pills. This is safe.</li> <li>▶ <b>Pills greatly decrease the risk of cancers of the colon, ovaries and endometrium (lining of the uterus). They also lower her chances of having benign breast masses (breast masses which are NOT cancer), ovarian cysts, endometriosis, and pelvic inflammatory disease (PID).</b></li> <li>▶ <b>Fertility in women who have used pills is actually improved. WHY? Because pills are used to treat the symptoms of endometriosis and polycystic ovarian syndrome (PCOS) and pills help prevent pelvic inflammatory disease.</b></li> </ul>	<ul style="list-style-type: none"> <li>▶ Pills do not protect you from HIV or other infections. Use a condom if you may be at risk of HIV or other infection.</li> <li>▶ <b>You have to remember to take the pill every day. On average women miss 4 pills per cycle.</b></li> <li>▶ You may have nausea and/or spotting (mostly during the first few cycles on pills).</li> <li>▶ The pill may cause headaches, depression, anxiety, fatigue, mood changes, or decreased enjoyment of sex in some users.</li> <li>▶ A backup contraceptive is required for 7 days if you have any question about how many pills you have missed.</li> <li>▶ <b>Serious complications like blood clots, strokes, and very rarely death, may occur. See Warning Signs on inside of back cover.</b></li> <li>▶ Pills can be quite expensive and still do require a prescription in most states.</li> <li>▶ Pills may lead to higher rates of one uncommon type of cervical cancer.</li> <li>▶ After stopping pills, you may not get your period for 1-3 months.</li> </ul>

### Where can I get combined pills & mini-pills?

In the United States you need a prescription in most states. You can get pills from your doctor, nurse practitioner, nurse midwife, physician’s assistant, health department, family planning clinic or from your school or college health center. In much of the world woman can obtain birth control pills without a prescription. As of 2018 most pills without insurance cost \$45 to \$100 per 28 day cycle. Sprintec and TriSprintec are available at Walmart, Kroger and Target for \$9 per cycle.

## Insertion of the ParaGard, Mirena or Liletta IUDs

**F**or up to 5 days after unprotected intercourse, you can have an intrauterine device (IUD) inserted to keep you from getting pregnant. This is the most effective currently available post-coital (after-sex) contraceptive in the United States. The IUD is inserted into the uterus and prevents implantation of a fertilized egg (if an egg was fertilized by the unprotected sex). IUD insertion has a much lower failure rate than emergency contraception pills. Information about this emergency contraceptive is available from your clinician. Once in place, the copper T IUD may be left in place as a woman's ongoing contraceptive for 12 years, the Mirena for 7 years, and Liletta for 6 years.



If 1,000 women have an IUD inserted as **emergency contraception** after unprotected sex, only one will become pregnant, while 2-3 in 100 women who use Plan B® One-Step as an emergency contraceptive become pregnant. Eight in 100 women become pregnant if no emergency contraception at all is used.

WHAT ARE THE ADVANTAGES?	WHAT ARE THE DISADVANTAGES?
<ul style="list-style-type: none"> <li>▶ If 1,000 women have unprotected intercourse in the middle 2 weeks of their cycle, 80 would become pregnant without emergency contraception, but only 1 will become pregnant if a copper IUD is inserted as emergency contraception. In one study, not one of 1,963 women who received a copper IUD for emergency contraception became pregnant.</li> <li>▶ Once in place, this IUD can be used for up to 12 years as an effective contraceptive.</li> <li>▶ A new study shows Mirena or Liletta may also be used.</li> </ul>	<ul style="list-style-type: none"> <li>▶ <b>Not all clinicians insert IUDs.</b></li> <li>▶ Women may have some cramping or pain at the time of or just after insertion of the IUD.</li> <li>▶ <b>The cost is \$0.00 in some settings. Elsewhere, there is a high initial cost of insertion (\$500 to \$800), but this is far less expensive than a pregnancy or raising a child. If it is left in place, over time it becomes the most cost-effective contraceptive available.</b></li> <li>▶ If you leave the IUD in place, it may cause irregular periods or more cramping with periods.</li> <li>▶ IUDs offer no protection against STIs.</li> </ul>

## Where can I get an IUD inserted after unprotected sex?

You can go to your clinician or family planning clinic.



## Emergency Contraceptive Pills (ECPs): Morning after Pills –

*Plan B® One-Step or ella*



Plan B One-Step and its generic forms are now available without a prescription from pharmacies for anyone (male or female) of any age.

**E**CPs (Plan B® One-Step or Next Choice®) are emergency contraceptive pills that can prevent pregnancy if taken within 5 days after unprotected sex. ECPs may be taken if a mistake is made using another method, if a couple forgets to use any contraceptive, or if a woman is forced to have sex. **ECPs should be taken as soon as possible after unprotected sex!**

WHAT ARE THE ADVANTAGES?	WHAT ARE THE DISADVANTAGES?
<ul style="list-style-type: none"> <li>▶ ECPs provide an important safety net for women whose regular contraceptive method may have failed (for example, if a condom broke or fell off), or for women who may have had sex without contraception.</li> <li>▶ Plan B® One-Step and Next Choice® regimens are all highly effective, reducing the average risk of pregnancy among users from about 8% to about 2-3%. If taken in the first 24 hours after intercourse, ECPs reduce the risk of pregnancy by 89%.</li> <li>▶ There are no scientific data to suggest that there would be an increased risk of birth defects or miscarriage if ECPs fail or if a woman who is already pregnant takes them.</li> <li>▶ Ella, available by prescriptions is slightly more effective than Plan B, especially in overweight people.</li> </ul>	<ul style="list-style-type: none"> <li>▶ ECPs are not a substitute for correct use of regular contraceptives. Although it is safe to use emergency contraceptive pills more than once, it is definitely preferable to find an ongoing method of contraception that you will use consistently and correctly.</li> <li>▶ Possible side effects are nausea (about 25%), vomiting (about 10%), lower abdominal pain, fatigue, headache, dizziness, breast tenderness, and menstrual changes.</li> <li>▶ After taking an ECP, your next period may be early, on time, or late.</li> <li>▶ No protection against sexually transmitted infections.</li> <li>▶ Plan B One-Step is ineffective in obese women (BMI 30 or more). Some recommend to take two (2) Plan B One-Step pills if you are markedly overweight. Better yet, get a copper IUD as your emergency contraceptive.</li> </ul>

### Where can I get Plan B® One-Step and Next Choice®?

A pelvic exam or a pregnancy test is NOT required before treatment. In planning for emergency contraceptive services, it is important to keep in mind that the sooner ECPs are taken after unprotected intercourse, the more effective they are. Plan B One-Step and Next Choice are sold at most pharmacies. A prescription is not required.

### When should I start taking birth control pills again after I've taken ECPs?

If your primary contraceptive method is pills (COCs, POPs) and you miss several combined pills or even one progestin-only pill, you should take Plan B®, Plan B® One-Step or Next Choice® ASAP within 5 days after you've had unprotected intercourse. The day after you take ECPs, start taking your pills again from where you left off. There is no need to take several pills at once to “make up” for missed pills.

While “ella” ulipristolacetate (UPA) is slightly more effective than Plan B One-step, it requires a prescription and its instructions for use are more complicated.



Most of this publication is about the options that are available to a sexually active couple when they decide that they want to prevent an unwanted pregnancy. There is another choice that needs to be considered when a person decides to engage in sexual activity. That choice is about choosing how to protect yourself and your partner from sexually transmitted infections. Every sexual act can be potentially dangerous unless you and your partner have never had sex with anyone else before or you have both been tested negative for STIs. Before making the choice to have sex it is a good idea to consider that there are diseases that can harm you for life and cannot be cured, diseases that can make you sterile (unable to have children) and diseases that can kill you. Knowing about what STIs are, how to recognize and treat them, and most importantly how to prevent them is an important part of being an informed and responsible sex partner. Enjoying sexual pleasure can be a very important and satisfying part of a relationship when the right choices are made. Always remember that being sexually responsible means preventing unwanted children from being born AND also preventing the spread of sexually transmitted infections

### **BV (bacterial vaginosis) and Yeast Infections**

There are two common vaginal conditions that you need to understand. These two conditions are not truly diseases nor are they directly transmitted from having sex. They are considered as sexually-associated conditions meaning that they are affected by sexual behavior and they have an impact on sexual health, often putting a woman at higher risk for getting serious sexually transmitted infections. The two very common conditions that women get are bacterial vaginosis (BV) and yeast infections.

In order to understand these vaginal problems that can make a woman very uncomfortable, it is important to understand what makes a healthy vagina healthy. Our bodies always carry different types of bacteria in different places; some good and some bad. Yeast is also commonly present in the vagina. The vagina is a warm, moist, dark place where bacteria and yeast can easily grow. Usually the good bacteria outnumber the bad and some of the good bacteria actually help protect against the bad. When the vagina is not acidic enough yeast and bacteria overgrow causing symptoms that can be very uncomfortable.

Not all of the causes of bacterial vaginosis and yeast infections are understood but anything that affects the acid/base (PH) balance of the vagina will also affect the growth of bacteria and yeast. When a woman has sex without a condom the man's semen comes into contact with the vaginal walls, which reduces the natural acidity of the vagina. Women who use condoms are less likely to have bacterial vaginosis and yeast infections because the semen stays inside the condom. Douching (cleaning the inside of the vagina) with anything, even plain water, will wash out the natural (good) bacteria and put a woman at risk for more cases of yeast infection and BV. Women who douche have more cases of BV and more problems with yeast infections. Using some medications, especially some antibiotics, may change the balance in the vagina and lead to BV and yeast infections. Women also get these conditions for no apparent reason.

### **If you think you have BV or a yeast infection**

Both yeast infections and BV usually have vaginal discharge as a symptom. Yeast infections often produce a thick white to yellow, often curd-like discharge that itches and may also burn. The itching can be intense and may be spread to the vulva (area outside the vagina) causing redness and swelling. BV discharge is usually thinner, can be gray, green, or yellow, and often has a foul odor especially after having sex. Symptoms can vary widely, so if you feel you have one of these conditions, you need to be treated.

The treatment for BV is a prescription obtained from a healthcare provider. The most common treatment is metronidazole in either a pill form or a vaginal gel. Your provider will discuss which might be best for you. Yeast infections can be treated with vaginal creams and vaginal tablets that can be purchased over-the-counter, or with a prescription pill which requires seeing a provider. If you are unsure about your diagnosis you should be seen in a clinic where a test can be done to see what is causing your symptoms.

# World's Best Birth Control

At Your Health Department

## Birth Control Effectiveness In 10,000 Women

CONTRACEPTIVE METHOD	PREGNANCIES IN FIRST YEAR
<b>NEXPLANON</b>	<b>10</b>
<b>MIRENA/LILETTA IUD</b>	<b>10</b>
<b>MALE STERILIZATION</b>	<b>15</b>
<b>FEMALE STERILIZATION</b>	<b>50</b>
<b>PARAGARD IUD</b>	<b>80</b>
<b>DEPO SHOT</b>	<b>400</b>
<b>MINIPILL</b>	<b>700</b>
<b>COMBINATION PILLS*</b>	<b>700</b>
<b>CONDOM</b>	<b>1,300</b>
<b>WITHDRAWAL</b>	<b>2,000</b>
<b>NO METHOD</b>	<b>8,500</b>

MORE EFFECTIVE, LESS RISK

Note the absence of decimal points. This chart points out how much more effective Nexplanon is than pills.

Nexplanon has a failure rate of 0.01%. This is ten pregnancies out of 10,000 women in the first year of use.

*Pregnancy figures are derived from Contraceptive Technology 21<sup>st</sup> edition, 2018, page 100, James Trussell, Typical Use Failure Rates.*

## Pill, Patch and Ring Warning Signals

Estrogenic contraceptives can lead to serious complications and even to death. The following early warning signals may save the life of a woman using pills, patches or rings.

Women using estrogenic birth control pills, patches or rings should know the **“A-C-H-E-S”** warning signals. These are the first letters of the symptoms she should watch out for.



**Abdominal pain** - Blood clot in pelvis, liver or mesenteric vein

**Chest pain** - Blood clot in lungs, cough, cough up blood, shoulder pain or pain down arm, fatigue, shortness of breath, flu-like symptoms or heart attack

- Severe pain, visual problems, numbness or weakness in an extremity

**Eye problems** - retinal vein thrombosis, tunnel vision, partial or complete loss of vision

**Severe leg pain** - Swelling, heat, redness or tenderness in lower leg (legs) or thigh

Return **quickly** to your healthcare practitioner if you develop one of these!  
Whenever seen by a clinic be sure to tell her or him what contraceptive you are using.