## Your Birth Control Choices

<table>
<thead>
<tr>
<th>Method</th>
<th>How to Use</th>
<th>Impact on Bleeding</th>
<th>Things to Know</th>
<th>How well does it work?*</th>
</tr>
</thead>
</table>
| **External Condom** | • Use a new condom each time you have sex  
• Use a polyurethane condom if allergic to latex | None               | • Can buy at many stores  
• Can put on as part of sex play/foreplay  
• Can help prevent early ejaculation  
• Can be used for oral, vaginal, and anal sex  
• Protects against HIV and other STIs  
• Can decrease penile sensation  
• Can cause loss of erection  
• Can break or slip off  
• Does not need a prescription                                                                                                                                                                                                                     | 87%                    |
| **Internal Condom** | • Use a new condom each time you have sex  
• Use extra lubrication as needed | None               | • Can put in as part of sex play/foreplay  
• Can be used for anal and vaginal sex  
• May increase vaginal/anal pleasure  
• Good for people with latex allergy  
• Protects against HIV and other STIs  
• Can decrease penile sensation  
• May be noisy  
• May be hard to insert  
• May slip out of place during sex  
• May require a prescription from your health care provider                                                                                                                                                                                      | 79%                    |
| **Diaphragm Caya® and Milex®** | • Put in vagina each time you have sex  
• Use with spermicide every time | None               | • Can last several years  
• Costs very little to use  
• May protect against some infections, but not HIV  
• Using spermicide may raise the risk of getting HIV  
• Should not be used with vaginal bleeding or infection  
• Raises risk of bladder infection                                                                                                                                                                                                                 | 83%                    |
| **Emergency Contraception Pills** | • Works best the sooner you take it after unprotected sex  
• You can take EC up to 5 days after unprotected sex  
• If pack contains 2 pills, take both at once | • Your next monthly bleeding may come early or late  
• May cause spotting | • Available at pharmacies, health centers, or health care providers: call ahead to see if they have it  
• People of any age can get progestin EC without a prescription  
• May cause stomach upset or nausea  
• Progesterone EC does not interact with testosterone, but we don’t know whether Ulipristal acetate EC does or not  
• Ulipristal acetate EC requires a prescription  
• May cost a lot  
• Ulipristal acetate EC works better than progestin EC if your body mass index (BMI) is over 26.  
• Ulipristal acetate EC works better than progestin EC 3-5 days after sex  | 58 - 94%               |

*Typical Use

Reproductive Health Access Project / October 2021

www.reproductiveaccess.org
### Fertility Awareness
**Natural Family Planning**
- Predict fertile days by: taking temperature daily, checking vaginal mucus for changes, and/or keeping a record of your monthly bleeding
- It works best if you use more than one of these methods
- Avoid sex or use condoms/spermicide on fertile days

### The Implant
**Nexplanon**®
- A clinician places it under the skin of the upper arm
- It must be removed by a clinician

### Copper IUD
**ParaGard**®
- Must be placed in uterus by a clinician
- Usually removed by a clinician

### Progestin IUD
- **Liletta**, **Mirena**, **Skyla** and others
- Must be placed in uterus by a clinician
- Usually removed by a clinician

## How to Use
- **Fertility Awareness**
  - Predict fertile days by: taking temperature daily, checking vaginal mucus for changes, and/or keeping a record of your monthly bleeding
  - It works best if you use more than one of these methods
  - Avoid sex or use condoms/spermicide on fertile days

- **The Implant**
  - A clinician places it under the skin of the upper arm
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- **Copper IUD**
  - Must be placed in uterus by a clinician
  - Usually removed by a clinician

- **Progestin IUD**
  - Must be placed in uterus by a clinician
  - Usually removed by a clinician

## Impact on Bleeding
- **Fertility Awareness**
  - Does not work well if your monthly bleeding is irregular

- **The Implant**
  - Can cause irregular bleeding and spotting
  - After 1 year, you may have no monthly bleeding at all
  - Cramps often improve

- **Copper IUD**
  - May cause cramps and heavy monthly bleeding
  - May cause spotting between monthly bleeding (if you take testosterone, this may not be an issue)

- **Progestin IUD**
  - May improve cramps
  - May cause lighter monthly bleeding, spotting, or no monthly bleeding at all

## Things to Know
- **Fertility Awareness**
  - Costs little
  - Can help with avoiding or trying to become pregnant
  - Use a different method on fertile days
  - This method requires a lot of effort
  - Does not require a prescription

- **The Implant**
  - Long lasting (up to 5 years)
  - You can become pregnant right after it is removed
  - It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS)
  - May cause mood changes

- **Copper IUD**
  - May cause cramps and heavy monthly bleeding
  - May cause spotting between monthly bleeding (if you take testosterone, this may not be an issue)

- **Progestin IUD**
  - May be left in place 3 to 7 years, depending on which IUD you choose
  - May be left in place for up to 12 years
  - You can become pregnant right after removal
  - It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS)
  - Rarely, uterus is injured during placement

## How well does it work?*
- **Fertility Awareness**
  - 85%

- **The Implant**
  - > 99%

- **Copper IUD**
  - > 99%

- **Progestin IUD**
  - > 99%

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<tr>
<td><strong>The Patch</strong>&lt;br&gt;Ortho Evra®</td>
<td>• Apply a new patch once a week for three weeks  &lt;br&gt;• No patch in week 4</td>
<td>• Can make monthly bleeding more regular and less painful  &lt;br&gt;• May cause spotting the first few months</td>
<td>• You can become pregnant right after stopping patch  &lt;br&gt;• Can irritate skin under the patch  &lt;br&gt;• This method contains estrogen - it is unclear if estrogen interacts with testosterone</td>
<td>93%</td>
</tr>
<tr>
<td><strong>The Pill</strong></td>
<td>• Take the pill daily</td>
<td>• Often causes spotting, which may last for many months</td>
<td>• Can improve PMS symptoms  &lt;br&gt;• Can improve acne  &lt;br&gt;• Helps prevent cancer of the ovaries  &lt;br&gt;• This method contains estrogen - it is unclear if estrogen interacts with testosterone  &lt;br&gt;• You can become pregnant right after stopping the pills  &lt;br&gt;• May cause nausea, weight gain, headaches, change in sex drive - some of these can be relieved by changing to a new brand</td>
<td>93%</td>
</tr>
<tr>
<td><strong>Progestin-Only Pills</strong></td>
<td>• Take the pill daily</td>
<td>• Can make monthly bleeding more regular and less painful  &lt;br&gt;• May cause spotting the first few months</td>
<td>• You can become pregnant right after stopping the pills  &lt;br&gt;• It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS)  &lt;br&gt;• May cause depression, hair or skin changes, change in sex drive</td>
<td>93%</td>
</tr>
<tr>
<td><strong>The Ring</strong>&lt;br&gt;ANNOVERA® Nuvaring®</td>
<td>• Insert a small ring into the vagina  &lt;br&gt;• Monthly Ring: Change ring each month  &lt;br&gt;• Yearly Ring: Change ring each year</td>
<td>• Can make monthly bleeding more regular and less painful  &lt;br&gt;• May cause spotting the first few months  &lt;br&gt;• Can increase vaginal discharge</td>
<td>• There are two types: a monthly ring and a yearly ring.  &lt;br&gt;• One size fits all  &lt;br&gt;• Private  &lt;br&gt;• You can become pregnant right after stopping the ring  &lt;br&gt;• This method contains estrogen - it is unclear if estrogen interacts with testosterone</td>
<td>93%</td>
</tr>
<tr>
<td><strong>The Shot</strong>&lt;br&gt;Depo-Provera®</td>
<td>• Get a shot every 3 months (13 weeks)  &lt;br&gt;• Give yourself the shot or get it in a medical office</td>
<td>• Often decreases monthly bleeding  &lt;br&gt;• May cause spotting or no monthly bleeding</td>
<td>• Each shot works for up to 15 weeks  &lt;br&gt;• Private for user  &lt;br&gt;• Helps prevent cancer of the uterus  &lt;br&gt;• May cause weight gain, depression, hair or skin changes, change in sex drive  &lt;br&gt;• It may lower the risk of uterine lining cancer, ovarian cancer, and polycystic ovary syndrome (PCOS)  &lt;br&gt;• Side effects may last up to 6 months after you stop the shots</td>
<td>96%</td>
</tr>
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<tr>
<td><strong>Sterilization: Tubal Methods</strong></td>
<td>• These methods block or cut the Fallopian tubes</td>
<td>None</td>
<td>• These methods are permanent and highly effective</td>
<td>&gt; 98%</td>
</tr>
<tr>
<td></td>
<td>• A clinician reaches the tubes through your belly</td>
<td></td>
<td>• Reversal is difficult</td>
<td></td>
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<td></td>
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<td></td>
<td>• The risks include infection, bleeding, pain, and reactions to anesthesia</td>
<td></td>
</tr>
<tr>
<td><strong>Sterilization: Vasectomy</strong></td>
<td>• A clinician blocks or cuts the tubes that carry sperm from your testicles</td>
<td>None</td>
<td>• This method is permanent and highly effective</td>
<td>&gt; 99%</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>• It is more effective, safer, and cheaper than tubal procedures</td>
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<td>• Can be done in the clinician’s office</td>
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<td>• No general anesthesia needed</td>
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<tr>
<td></td>
<td></td>
<td></td>
<td>• Reversal is difficult</td>
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<td>• Risks include infection, pain, and bleeding</td>
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<td></td>
<td></td>
<td></td>
<td>• It takes up to 3 months to work</td>
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<tr>
<td><strong>Vaginal Acidifying Gel</strong> Phexxi®</td>
<td>• Insert gel each time you have sex</td>
<td>None</td>
<td>• Can be put in as part of sex play/foreplay</td>
<td>86%</td>
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<td></td>
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<td></td>
<td>• Does not have any hormones</td>
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<td></td>
<td>• Requires a prescription</td>
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<td></td>
<td>• May irritate vagina, penis</td>
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<td></td>
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<td></td>
<td>• Should not be used with urinary tract infection</td>
<td></td>
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<tr>
<td><strong>Vaginal Spermicide</strong></td>
<td>• Insert spermicide each time you have sex</td>
<td>None</td>
<td>• Can buy at many stores</td>
<td>79%</td>
</tr>
<tr>
<td>Cream, gel, sponge, foam, inserts, film</td>
<td>• Can be put in as part of sex play/foreplay</td>
<td></td>
<td>• Comes in many forms: cream, gel, sponge, foam, inserts, film</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• May raise the risk of getting HIV</td>
<td></td>
<td>• May irritate vagina, penis</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Cream, gel, and foam can be messy</td>
<td></td>
<td>• Does not require a prescription</td>
<td></td>
</tr>
<tr>
<td><strong>Withdrawal</strong></td>
<td>• Pull penis out of vagina before ejaculations (that is, before coming)</td>
<td>None</td>
<td>• Costs nothing</td>
<td>80%</td>
</tr>
<tr>
<td>Pull-out</td>
<td></td>
<td></td>
<td>• Less pleasure for some</td>
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<td></td>
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<td></td>
<td>• Does not work if penis is not pulled out in time</td>
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<td></td>
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<td></td>
<td>• Must interrupt sex</td>
<td></td>
</tr>
</tbody>
</table>

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