Surgical procedure performed by a doctor where the fallopian tubes are closed or blocked, preventing sperm and egg from meeting. Does not stop menstrual cycles or cause menopause.

**METHOD DESCRIPTION**
- Surgical procedure performed by a doctor where the fallopian tubes are closed or blocked, preventing sperm and egg from meeting.
- Does not stop menstrual cycles or cause menopause.

**METHOD UPKEEP**
- Requires one operation and no additional upkeep by the patient.

**DOES IT CONTAIN HORMONES?**
- No!

**PERFECT USE EFFICACY**
- 0.5 out of 100 individuals will become pregnant over 12 months with perfect use of tubal ligation.

**TYPICAL USE EFFICACY**
- 0.5 out of 100 individuals will become pregnant over 12 months with typical use of tubal ligation.

**POSSIBLE SIDE EFFECTS**
- Pain at surgical site and fatigue.

**POSSIBLE BLEEDING CHANGES**
- No change.

**RETURN TO FERTILITY AFTER DISCONTINUATION**
- Permanent form of contraception (no return to fertility).
Surgical procedure performed by a provider where a small incision is made in the scrotum, and the vas deferens (the tubes that carry sperm) are cut so that sperm cannot leave the body to cause a pregnancy.

Does not stop a person from being able to have an erection or ejaculating.

**METHOD DESCRIPTION**

- Requires one operation and no additional upkeep by the patient

**METHOD UPKEEP**

- Does not contain hormones?

- No!

**PERFECT USE EFFICACY**

- 0.1 out of 100 individuals will become pregnant over 12 months with perfect use of vasectomy

**TYPICAL USE EFFICACY**

- 0.15 out of 100 individuals will become pregnant over 12 months with typical use of vasectomy

**POSSIBLE SIDE EFFECTS**

- Pain at surgical site and fatigue

**POSSIBLE BLEEDING CHANGES**

- No change

**RETURN TO FERTILITY AFTER DISCONTINUATION**

- Permanent form of contraception (no return to fertility)
COPPER IUD
**METHOD DESCRIPTION**

- Small, copper device that is inserted into the uterus by a provider.
- Copper in the uterus acts as a spermicide and prevents sperm from reaching the fallopian tubes.

**METHOD UPKEEP**

- Effective as long as desired up to 12 years. Can be removed by a provider at any time upon request.

**DOES IT CONTAIN HORMONES?**

- No!

**PERFECT USE EFFICACY**

- 0.6 out of 100 individuals will become pregnant over 12 months with perfect use of the copper IUD.

**TYPICAL USE EFFICACY**

- 0.8 out of 100 individuals will become pregnant over 12 months with typical use of the copper IUD.

**POSSIBLE SIDE EFFECTS**

- Pain or discomfort with IUD placement; cramping after placement; increased menstrual cramping (often improves within 3-6 months).

**POSSIBLE BLEEDING CHANGES**

- Heavier periods, longer periods, irregular periods, spotting.

**RETURN TO FERTILITY AFTER DISCONTINUATION**

- Immediately upon removal.
Small, plastic device that contains a progestin hormone, which is inserted into the uterus by a provider. Progestin causes changes which make it harder for sperm to enter the uterus and reach the egg. There are several FDA-approved hormonal IUDs with different names, sizes, and durations of use.

METHOD DESCRIPTION

- Effective as long as desired up to 3-7 years. Can be removed by a provider at any time upon request.

METHOD UPKEEP

- Yes!

DOES IT CONTAIN HORMONES?

- Yes!

PERFECT USE EFFICACY

- 0.1 out of 100 individuals will become pregnant over 12 months with perfect use of hormonal IUDs

TYPICAL USE EFFICACY

- 0.1 out of 100 individuals will become pregnant over 12 months with typical use of hormonal IUDs

POSSIBLE SIDE EFFECTS

- Pain or discomfort with IUD placement; cramping after placement, breast tenderness, mood changes

POSSIBLE BLEEDING CHANGES

- Heavier periods, lighter periods, irregular periods, spotting or no period

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately upon removal
IMPLANT
IMPLANT
IMPLANT
Small plastic rod that contains a progestin hormone which is inserted into the inner upper arm by a provider.

- The progestin hormone in the implant stops the ovaries from releasing eggs, and cause changes which make it harder for sperm to enter the uterus and reach the egg.

**METHOD DESCRIPTION**

**METHOD UPKEEP**

- Effective as long as desired up to 5 years. Can be removed by a provider at any time upon request.

**DOES IT CONTAIN HORMONES?**

- Yes!

**PERFECT USE EFFICACY**

- 0.1 out of 100 individuals will become pregnant over 12 months with perfect use of the implant

**TYPICAL USE EFFICACY**

- 0.1 out of 100 individuals will become pregnant over 12 months with typical use of the implant

**POSSIBLE SIDE EFFECTS**

- Discomfort/bruising at insertion site; small scar at insertion site, acne, headaches, breast tenderness, mood changes

**POSSIBLE BLEEDING CHANGES**

- Heavier periods, lighter periods, irregular periods, spotting, or no period

**RETURN TO FERTILITY AFTER DISCONTINUATION**

- Immediately upon removal
One type is injected into the arm or buttock by a provider; another type can be self-injected under the skin. The injection contains a progestin hormone, which stops the ovaries from releasing eggs and cause changes which make it harder for sperm to enter the uterus and reach the egg.

**METHOD UPKEEP**
- Effective for 3 months, and then a new injection is needed.

**DOES IT CONTAIN HORMONES?**
- Yes!

**PERFECT USE EFFICACY**
- 0.2 out of 100 individuals will become pregnant over 12 months with perfect use of injectables

**TYPICAL USE EFFICACY**
- 4 out of 100 individuals will become pregnant over 12 months with typical use of injectables

**POSSIBLE SIDE EFFECTS**
- Weight gain; mood changes; headaches; changes in libido; breast tenderness; hair or skin changes

**POSSIBLE BLEEDING CHANGES**
- Heavier periods, lighter periods, irregular periods, spotting, or no period

**RETURN TO FERTILITY AFTER DISCONTINUATION**
- May delay return to fertility 6-12-months after last injection wears off
METHOD DESCRIPTION

- Emergency contraception can prevent pregnancy before it starts by preventing/delaying ovulation or by stopping sperm from reaching an egg.
- There are 4 types:
  - **Copper IUD**: can be inserted within 5 days of unprotected sex
  - **Hormonal IUD**: can be inserted within 5 days of unprotected sex
  - **Ella**: A single pill taken up to 5 days after unprotected sex. Ella is more effective than Plan B but needs to be prescribed by a provider.
  - **Plan B (“morning after pill”)**: A single pill taken up to 72 hours after unprotected sex. Plan B is not as effective at preventing pregnancy for people who weigh more than 165 pounds.

METHOD UPKEEP

- Plan B: Within 3 days after unprotected sex.
- Ella, Hormonal IUD, and Copper IUD: Within 5 days after unprotected sex

DOES IT CONTAIN HORMONES?

- The Hormonal IUD, Plan B, and Ella contain hormones
- The Copper IUD does not contain hormones

EFFICACY

- Number of individuals who will become pregnant using emergency contraception:
  - **Plan B**: 1.5-2.6 out of 100 individuals
  - **Ella**: 1.2-1.8 out of 100 individuals
  - **Hormonal IUD**: 0.3 out of 100 individuals
  - **Copper IUD**: 0.1 out of 100 individuals

POSSIBLE SIDE EFFECTS

- Copper IUD: Pain or discomfort with IUD placement; cramping after placement; Increased menstrual cramping
- Hormonal IUD: Pain or discomfort with IUD placement; cramping after placement, breast tenderness, mood changes
- Plan B & Ella: nausea; vomiting

POSSIBLE BLEEDING CHANGES

- Earlier or later menstruation; heavier periods; lighter periods; irregular periods; spotting

RETURN TO FERTILITY AFTER DISCONTINUATION

- Plan B & Ella: Pregnancy possible after taking EC, use a condom until next menstrual period
- Copper IUD: Immediately upon removal
- LNG IUD: Immediately upon removal
METHOD DESCRIPTION

- **Combination Pills**
  - Contains estrogen and progestin hormones.
  - Pills prescribed by a provider or pharmacist that are taken every day.
  - The hormones in the pill stop the ovaries from releasing eggs and cause changes which make it harder for sperm to enter the uterus and reach the egg.
- **Progestin-only (“minipill”)**
  - Pills prescribed by a provider or pharmacist that must be taken at the same time every day.
  - The progestin hormone in the pill stops the ovaries from releasing eggs and cause changes which make it harder for sperm to enter the uterus and reach the egg.

METHOD UPKEEP

- Every day

DOES IT CONTAIN HORMONES?

- Yes!

PERFECT USE EFFICACY

- 0.3 out of 100 individuals will become pregnant over 12 months with perfect use of the pill

TYPICAL USE EFFICACY

- 7 out of 100 individuals will become pregnant over 12 months with typical use of the pill

POSSIBLE SIDE EFFECTS

- Nausea; headaches; dizziness; weight gain; breast tenderness; mood changes

POSSIBLE BLEEDING CHANGES

- **Combination Pills**: can cause spotting between periods (most common in the first few months); shorter; lighter; more predictable periods
- **Progestin-only Pills**: unpredictable; irregular; spotting between periods

RETURN TO FERTILITY AFTER DISCONTINUATION

- **Combination Pills**: Variable within a few months of discontinuation
- **Progestin-only Pills**: Immediately when pill use is stopped
METHOD DESCRIPTION

- Contains estrogen and progestin hormones.
- A thin, square piece of plastic with adhesive on one side that is worn every day on either the pelvis/hip bone, shoulder blade area or buttocks.
- The side that attaches to the skin contains hormones that stop the ovaries from releasing eggs and cause changes which make it harder for sperm to enter the uterus and reach the egg.
- The patch may be less effective for people who weigh more than 200 pounds.

METHOD UPKEEP

- In place every day. Must be replaced every week.

DOES IT CONTAIN HORMONES?

- Yes!

PERFECT USE EFFICACY

- 0.3 out of 100 individuals will become pregnant over 12 months with perfect use of the patch

TYPICAL USE EFFICACY

- 7 out of 100 individuals will become pregnant over 12 months with typical use of the patch

POSSIBLE SIDE EFFECTS

- Mild nausea, breast tenderness, skin irritation under/around patch placement, headache, dizziness, weight gain, headaches, mood changes, libido changes

POSSIBLE BLEEDING CHANGES

- Can cause spotting between periods in the first few months; shorter; lighter; more predictable periods

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately when patch use is stopped
METHOD DESCRIPTION

- Contains estrogen and progestin hormones.
- A small, one-size-fits-all, flexible, round piece of plastic containing hormones that a person inserts into their vagina.
- The hormones in the ring stop the ovaries from releasing eggs and cause changes which make it harder for sperm to enter the uterus and reach the egg.

METHOD UPKEEP

- In place every day. Must be replaced every 3-4 weeks.

DOES IT CONTAIN HORMONES?

- Yes!

PERFECT USE EFFICACY

- 0.3 out of 100 individuals will become pregnant over 12 months with perfect use of the ring.

TYPICAL USE EFFICACY

- 7 out of 100 individuals will become pregnant over 12 months with typical use of the ring.

POSSIBLE SIDE EFFECTS

- Headache; mild nausea; breast tenderness; increase in vaginal discharge (not associated with infections).

POSSIBLE BLEEDING CHANGES

- Can cause spotting between periods in the first few months; Shorter; lighter; more predictable periods with less cramping.

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately when ring use is removed.
CERVICAL CAP
METHOD DESCRIPTION

- Silicone cup that is prescribed by a provider, which can be inserted into the vagina to prevent sperm from entering the cervix (and thus stops them from fertilizing an egg). Can be placed 48 hours before sex.
- To use a cervical cap correctly, water-based spermicide is placed on the cap and inserted into the vagina covering the cervix. After having sex, the cervical cap is left on for at least 6 hours.
- Cervical caps shouldn't be used when someone is on their period.

METHOD UPKEEP

- Every time a person has sex.

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- Not enough data.

TYPICAL USE EFFICACY

- 20 out of 100 individuals will become pregnant over 12 months with typical use of the cervical cap

POSSIBLE SIDE EFFECTS

- Allergic reaction; vaginal irritation

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately when cervical cap is removed
METHOD DESCRIPTION

- Silicone cup that is prescribed by a provider, which can be inserted into the vagina to prevent sperm from entering the cervix (and thus stops them from fertilizing an egg). Can be placed 24 hours before having sex.
- To use a diaphragm correctly, water-based spermicide is placed into the cup before putting the cup into the vagina and fitting it up against the cervix. After having sex, the diaphragm is left in for at least 6 hours.
- Diaphragms shouldn’t be used when someone is on their period

METHOD UPKEEP

- Every time a person has sex.

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- 6 out of 100 individuals will become pregnant over 12 months with perfect use of the diaphragm

TYPICAL USE EFFICACY

- 12 out of 100 individuals will become pregnant over 12 months with typical use of the diaphragm

POSSIBLE SIDE EFFECTS

- Allergic reaction; vaginal irritation

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately when diaphragm is removed
EXTERNAL CONDOM

EXTERNAL CONDOM

EXTERNAL CONDOM
METHOD DESCRIPTION

• A latex or lambskin covering that fits over the penis and catches the ejaculate, preventing sperm from entering the vagina.
• To use correctly, the condom is rolled over the penis, leaving a little room at the top to catch the ejaculation. The condom should be applied before the penis has any contact with the vulva/vagina.
• A new condom should be used for each new sex act.

METHOD UPKEEP

• Every time a person has sex.

DOES IT CONTAIN HORMONES?

• No!

PERFECT USE EFFICACY

• 2 out of 100 individuals will become pregnant over 12 months with perfect use of external condoms

TYPICAL USE EFFICACY

• 13 out of 100 individuals will become pregnant over 12 months with typical use of external condoms

POSSIBLE SIDE EFFECTS

• allergic reaction (latex), decreased penile sensation

POSSIBLE BLEEDING CHANGES

• No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

• Immediately after cessation of use
INTERNAL CONDOM
METHOD DESCRIPTION

- The internal condom is a pouch that is inserted inside the vagina near the cervix while an external ring remains outside the vagina.
- To use an internal condom correctly, use fingers to squeeze the sides of the small, internal ring together and insert into the vagina like a tampon, placing as far inside as possible. While having sex, guide the penis into the opening of the internal condom.
- A new condom should be used for each new sex act.

METHOD UPKEEP

- Every time a person has sex.

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- 5 out of 100 individuals will become pregnant over 12 months with perfect use of internal condoms

TYPICAL USE EFFICACY

- 21 out of 100 individuals will become pregnant over 12 months with typical use of internal condoms

POSSIBLE SIDE EFFECTS

- Vaginal irritation (alleviated with lubricant)

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately after cessation of use
METHOD DESCRIPTION

- Spermicides are a variety of chemical gels, films, and creams that are inserted deep inside the vagina prior to sex to prevent sperm from reaching an egg.
- Spermicides are available over the counter at most pharmacies.

METHOD UPKEEP

- Every time a person has sex.

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- 16 out of 100 individuals will become pregnant over 12 months with perfect use of spermicide

TYPICAL USE EFFICACY

- 21 out of 100 individuals will become pregnant over 12 months with typical use of spermicide

POSSIBLE SIDE EFFECTS

- allergic reaction, vaginal irritation, increased risk of urinary tract infection

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately after cessation of use
METHOD DESCRIPTION

- A soft, plastic sponge that contains spermicide which fits over the cervix and prevents sperm from reaching an egg.
- To use a sponge correctly, wet the sponge with water and insert it into the vagina covering the cervix with the handle facing out. After having sex, leave the sponge in for at least six hours.

METHOD UPKEEP

- Every time a person has sex.

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- 12 out of 100 individuals will become pregnant over 12 months with perfect use of the sponge

TYPICAL USE EFFICACY

- 17 out of 100 individuals will become pregnant over 12 months with typical use of the sponge

POSSIBLE SIDE EFFECTS

- Allergic reaction, vaginal irritation

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately after cessation of use
ABSTINENCE
METHOD DESCRIPTION

- Abstinence as a contraceptive method means that 1) there is no time where a penis is inserted in a vagina; and 2) semen from a penis doesn’t ever come into contact with a vulva or vagina.
- Without any contact between a penis and vagina/vulva, there isn’t an opportunity for sperm and egg to meet and result in pregnancy.

METHOD UPKEEP

- Every day

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- 0 out of 100 individuals will become pregnant in 12 months with perfect use of abstinence

TYPICAL USE EFFICACY

- Studies show that few people who choose abstinence as a method use it for as long as they intend. Consider having a backup method, like condoms or EC, available in case this method fails.

POSSIBLE SIDE EFFECTS

- Lack of sexual satisfaction

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Immediately after cessation of use
FERTILITY AWARENESS
METHOD DESCRIPTION

- A person uses bodily signs (e.g., basal body temperature, cervical fluid, luteinizing hormone levels, cervical position) to identify the days that they are likely to become pregnant and either avoids or has protected sex on these days.
- There are many different FABM methods. Each has their own specific rules that must be followed for them to work.
- When choosing to use an FABM method, it is important to use methods that have been scientifically tested and proven.

METHOD UPKEEP

- Every day

DOES IT CONTAIN HORMONES?

- No!

PERFECT USE EFFICACY

- Depending on the method used, between 0.4 to 5 out of 100 individuals will become pregnant over 12 months with perfect use of Fertility Awareness-Based Methods.

TYPICAL USE EFFICACY

- Depending on the method used, between 2 to 23 out of 100 individuals will become pregnant over 12 months with typical use of Fertility Awareness-Based Methods.

POSSIBLE SIDE EFFECTS

- No side effects

POSSIBLE BLEEDING CHANGES

- No menstrual changes

RETURN TO FERTILITY AFTER DISCONTINUATION

- Can be used to achieve pregnancy
LACTATIONAL AMENORRHEA
In this method, hormonal signals sent to the brain while a person is breast/chest feeding prevent the body from ovulating. This method can only be used by people immediately after having a baby. To use this method correctly, a person must exclusively breast/chest feed on demand (frequently throughout the day and night). This method isn’t effective for people who need to use a breast pump, formula, or who aren’t able to feed at least every four hours during the day and every six hours during the night.

**METHOD UPKEEP**
- Can only be used within the first 6 months after giving birth before one’s period returns.
- Every day.

**DOES IT CONTAIN HORMONES?**
- No!

**PERFECT USE EFFICACY**
- 1 out of 100 individuals will become pregnant over 6 months with perfect use of lactational amenorrhea

**TYPICAL USE EFFICACY**
- 2-7 out of 100 individuals will become pregnant over 6 months with typical use of lactational amenorrhea

**POSSIBLE SIDE EFFECTS**
- No side effects

**POSSIBLE BLEEDING CHANGES**
- No menstrual changes from method, should not use this method if menstruating

**RETURN TO FERTILITY AFTER DISCONTINUATION**
- LAM should not be used after 6 months postpartum
To use withdrawal as a method of contraception, a person withdraws or “pulls out” the penis from the vagina before ejaculation, preventing sperm from entering the vagina.

People using withdrawal should make sure to urinate between sex acts (including masturbation) to clear out sperm that may still be inside the penis.

**METHOD DESCRIPTION**

- To use withdrawal as a method of contraception, a person withdraws or “pulls out” the penis from the vagina before ejaculation, preventing sperm from entering the vagina.
- People using withdrawal should make sure to urinate between sex acts (including masturbation) to clear out sperm that may still be inside the penis.

**METHOD UPKEEP**

- Every time a person has sex.

**DOES IT CONTAIN HORMONES?**

- No!

**PERFECT USE EFFICACY**

- 4 out of 100 individuals will become pregnant over 12 months with perfect use of withdrawal

**TYPICAL USE EFFICACY**

- 20 out of 100 individuals will become pregnant over 12 months with typical use of withdrawal

**POSSIBLE SIDE EFFECTS**

- Interruption of sex, decreased sexual satisfaction

**POSSIBLE BLEEDING CHANGES**

- No menstrual changes

**RETURN TO FERTILITY AFTER DISCONTINUATION**

- Immediately