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Birth-Control Handbook

Introduction:

There are many different forms of birth control available in Canada, many of which we will discuss in this booklet. There is no way to determine which is the 'best form' of birth control because everyone is different. Physical attributes, lifestyle, and personality all contribute to whether a certain type of contraception will work for an individual. So, instead we talk about fitting an individual with the best form of birth control *for them*. When choosing a form of contraceptive there are many things to be aware of and to consider, including:

- Personal and family health history
- Potential side effects and drug interactions
- Suitability with your lifestyle (for example, can you remember to take a pill everyday or are you willing to plan ahead to use a diaphragm?)
- Cost
- Availability



The choice is yours

Sexual Health Centre Saskatoon's Mission Statement:

Sexual Health Centre Saskatoon aims to ensure that information, resources, support, and services of the highest quality regarding sexuality, contraception, and reproduction are available and accessible to all in our community who need them. Our organization encourages responsible decision-making and behavior, which is respectful of the needs and of the choices available to each individual.



Emergency Contraceptive Pills:

Emergency Contraceptive Pills

What it is . . .

Emergency Contraceptive Pills (ECP) are a high dose birth control pill given by prescription. The most commonly used pill brand is Ovral. It will be prescribed in two doses of two pills each (total 4 pills). The first dose ***must be taken within 72 hours*** of unprotected sexual intercourse. The second dose is taken 12 hours after the first dose. *The sooner after unprotected sex ECP is taken, the more effective it is.*

How it works . . .

Depending on where a woman is in her cycle, ECP will either:

1. Prevent ovulation
2. Prevent fertilization of an egg
3. Stop a fertilized egg from implanting into the uterine wall

All of the above occur before implantation, which, medically speaking, means that pregnancy does not occur. However, a woman should be clear on how this method works as some people feel that a fertilized egg does mean a pregnancy.

Once the egg is implanted, ECPs will not work. They ***will not*** abort an established pregnancy.

Who shouldn't take it . . .

Most women can use ECPs safely, even women who can't normally take the birth control pill.

What are the side effects . . .

ECPs will sometimes cause:

1. Nausea
2. Headaches
3. Cramping
4. Vomiting
5. Dizziness
6. Breast tenderness

Fertility Awareness: Natural family planning

fertile days of your cycle. Talking to your doctor about what method that is best suited for you, including;

Calendar Rhythm Method-requires that you keep track of your cycle for a few months to determine your own individual pattern of ovulation. The pattern will help you keep track of when is most 'dangerous' to have sexual intercourse.

Basal Body Temperature Method-involves keeping track of your body temperature so that you can tell when you are ovulating. Body temperature rises two days after ovulation.

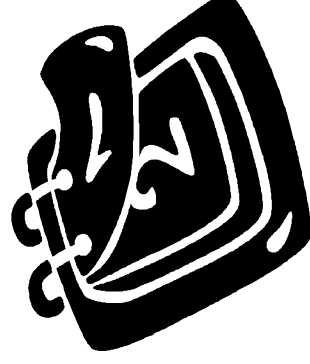
Ovulation Method-requires you to check your cervical mucus to determine the time of ovulation.

Symptothermal Method-a combination of the first two methods.

Ovulation Predictor Kits-Available at the drugstore, these kits are used to test your urine to identify hormones that indicate ovulation is about to occur.

Cost . . .

Generally there is no extra cost to this method except for ovulation kits which are approximately \$50 per month.



Fertility Awareness: Natural family planning

Natural Family Planning

What it is . . .

Also known as 'fertility awareness', is a method of birth control that uses the menstrual cycle to predict your most fertile time of the month—that is when you are most likely to get pregnant.

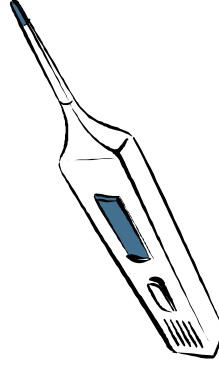
How it works . . .

Fertility awareness birth control methods are based on the fact that;

- (1) sperm may live in a female reproductive tract for up to 7 days
- (2) the female egg lives for only a day
- (3) fertilization may occur even days after intercourse
- (4) 'safe days' occur 2 days after ovulation and continue until your next period.

Who shouldn't use it . . .

- (1) if you have a partner who is not willing to cooperate
- (2) if you do not have regular, steady monthly cycle
- (3) you are not willing to invest the time/effort required to learn about fertility awareness methods.



What are the side effects . . .

There are no side effects.

Effectiveness rates . . .

The Natural Family Planning method may be trickier than some methods of birth control .

Typical use: 85%

Perfect use: 95%

Where to get it . . .

There are several methods of determining which are the most

Emergency Contraceptive Pills:

What women should consider before using ECPs . . .

- How long ago she had intercourse: if longer than 72 hours, it will probably not be effective.
- Whether or not she was using any method of birth control: this will help to determine whether or not she needs to use the ECP (i.e. broken condom = good idea to use ECP, one or two missed Pills = not necessary)
- When she is due to start her next period: if her period is due to start in less than 1 week, ECP may not be necessary.

Effectiveness Rate . . . >95%

Women should be aware of the fact that ECPs are not 100% effective. They may still become pregnant and should consider what their decision would be if that does happen.

Women should also know that ECPs are only effective on past sexual encounters, not future ones, and it cannot be taken more than once a menstrual cycle.

Where to get it . . .

Women can access ECP at Sexual Health Centre Saskatoon. We have two types. One is free and one costs \$15.00. There are other places in Saskatoon where women can access ECPs at no charge (e.g./ City Hospital, Royal University Hospital, some clinics). **Always ask for a pro-choice Doctor.** It is also available by prescription at most pharmacies. SHCS has a complete listing of where to get ECPs.



Hormonal Contraceptives: Birth Control Pill, Depo

Birth Control Pill

What it is . . .

The **birth control pill** is a combination of low dose hormones taken at the same time every day. The pill is available as either combination (estrogen & progesterone) or progesterone only. They are also available in monophasic (same dose every day) and multiphasic (different dosage levels during the cycle).

How it works . . .



The pill, basically 'tricking' the body into thinking that it is pregnant, works in several ways:

1. Prevents the ovaries from releasing an egg by changing the woman's hormone levels
2. Changes the lining of the uterus (endometrium) making it harder for the fertilized egg to implant
3. The hormones cause changes in the cervical mucus making it more difficult for sperm to get to the

egg

Who shouldn't take it . . .

Women who have a personal or family history of the following should seek advice from their doctor about taking the pill:

1. Smoking (more serious concern for 35+)
2. Reproductive system cancer
3. Asthma
4. Epilepsy
5. Diabetes
6. Acne
7. Heart or circulatory problems
8. Liver problems
9. Blood clots
10. High blood pressure
11. Gallbladder disease
12. Undiagnosed vaginal bleeding
13. Depression
14. Uterine cysts
15. Migraines
16. Breast cancer

What are the side effects . . .

Milder side effects that will usually subside within 3 months:

1. Nausea
2. Breast tenderness
3. Headaches
8. Decreased menstrual flow
9. Decreased sex drive
10. Acne

Sterilization: Vasectomy and Tubal Ligation

nis (the vas deferens) are cut and blocked. It is performed under local anesthetic.

How it works . . .

By cutting the vas, sperm has no way of getting out of the testes into the vagina. The man will still ejaculate and have orgasms, but fertilization cannot take place. Patients should be advised of the importance of having 2 sperm counts done after the procedure to ensure it has been successful.

Who shouldn't use it . . .

There are no contra-indications to the procedure. Even though reversals are being performed, patients should still consider the method permanent as the success rate of reversals are extremely low.

What are the side effects . . .

1. Temporary swelling and discomfort
2. Risks associated with anesthesia

Effectiveness Rates . . . 99%

Cost . . .

Vasectomy covered by Sask Health, reversal is not (approx. \$1700)



Sterilization: Vasectomy and Tubal Ligation

that carry the egg from the ovaries to the uterus are closed. It is performed in a hospital under a general anesthetic.

How it works . . .

By closing the tubes, the egg has no way of getting out of the ovaries and so the sperm cannot get to the egg.

Who shouldn't use it . . .

There are no contra-indications to the procedure. Even though reversals are being performed on occasion, patients should still consider the method permanent as the success rates of reversals are extremely low.

Younger women who have no children should be aware that many doctors will not refer them for this procedure as it is permanent and there is a greater possibility that she will change her mind.

What are the side effects . . .

Women should be aware of the possibility of complications as with any surgery under general anesthetic.

Effectiveness rates. . . 99%

Where to get it . . .

Talk to your doctor about making an appointment.

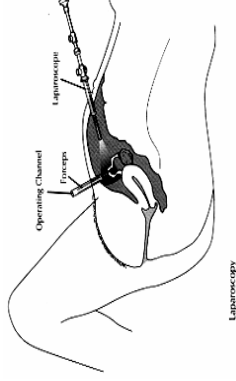
Cost . . .

Tubal ligation is covered by Sask Health.

Vasectomy

What it is . . .

A vasectomy is an operation in which the tubes that carry sperm from the testes to the pe-



Hormonal Contraceptives: Birth Control Pill, Depo

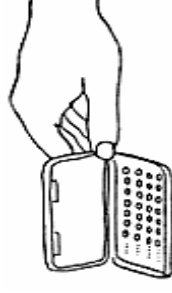
4. Spotting
5. Weight gain
6. Depression
7. Darkened facial skin
11. Vaginal itching or discharge
12. Missed periods
13. Blood clots

Serious side effects that should be discussed with the doctor:

1. Gallbladder disease with indigestion and abdominal pain
2. Hypertension shown by high blood pressure

Very serious side effects – stop taking the pill immediately and see the doctor as soon as possible:

1. Severe abdominal pain
2. Chest pain or shortness of breath
3. Severe headaches
4. Eye problems such as blurred vision or blindness
5. Severe leg pain in the calf or thigh



Effectiveness Rates . . .

Typical use: 97% Perfect use: 99.5%

The pill is usually effective after taking it for 7 consecutive days. However, we recommend that new pill users use a back up method of birth control such as condoms for the first month. This gives them an opportunity to become used to taking a pill at the same time every day.

Women should be advised that there can be many drug interactions with the pill and that they should use a back up method when taking other medications (even over the counter cold remedies can sometimes interfere – it is a good idea to check with a pharmacist).

Where to get it . . .

Birth Control is available by prescription at Sexual Health Centre Saskatoon for \$7 a month after consultation with a doctor and a nurse. Of you can go to the doctor of your choice. Prescriptions can be filled at any pharmacy with prices ranges from \$25–\$32 for a two month supply. Doctors will often give two months supply for free at first. Feel free to talk to someone at SHCS about cheap or free birth control options.

Hormonal Contraceptives: Birth Control Pill, Depo

Contraceptive Patch

What it is . . .

The **contraceptive patch** contains a combination of low dose hormones. The patches are applied weekly for three weeks and removed for a fourth week, usually when a woman has her period.

How it works . . .

The patch, basically 'tricking' the body into thinking that it is pregnant, works in several ways:

1. Prevents the ovaries from releasing an egg by changing the woman's hormone levels
2. Changes the lining of the uterus (endometrium) making it harder for the fertilized egg to implant
3. The hormones cause changes in the cervical mucus making it more difficult for sperm to get to the egg

Who shouldn't take it . . .

Women who have a personal or family history of the following should seek advice from their doctor about using the contraceptive patch:

1. Smoking (more serious concern for 35+)
2. Reproductive system cancer
3. Asthma
4. Epilepsy
5. Diabetes
6. Acne
7. Heart or circulatory problems
8. Liver problems
9. Blood clots
10. High blood pressure
11. Gallbladder disease
12. Undiagnosed vaginal bleeding
13. Depression
14. Uterine cysts
15. Migraines
16. Breast cancer
17. Skin sensitivity

What are the side effects . . .

Milder side effects that will usually subside within 3 months:

1. Nausea
2. Breast tenderness
3. Headaches
4. Spotting
5. Weight gain
6. Depression
7. Darkened facial skin
8. Decreased menstrual flow
9. Decreased sex drive
10. Acne
11. Vaginal itching/discharge
12. Missed period
13. Blood clots
14. Skin sensitivity

Intra—Uterine Device (IUD):

1. Have multiple sexual partners because of an increased risk of STI
2. Have not had a previous pregnancy – may not be a good candidate because her uterus may not be large enough to accommodate it and because of the possibility of Pelvic Inflammatory Disease
3. Are allergic to copper
4. Have an active pelvic infection

The IUD is not recommended for women who have:

1. Recent or recurrent pelvic infections
2. Valvular heart disease
3. Acute cervical or vaginal infections
4. Abnormal pap smears
5. A history of ectopic pregnancy

What are the side effects . . .

1. Increased menstrual bleeding and cramping
2. Spotting between periods
3. May make user more susceptible to STIs such as chlamydia
4. IUD may move, possibly puncturing the uterine wall
5. In rare cases, may cause infection associated with pelvic inflammatory disease which may lead to infertility
6. If a pregnancy occurs when an IUD is in place, the woman should see her doctor as soon as possible to discuss options regarding removal of the IUD
7. There is a higher incidence of PID and ectopic pregnancy in IUD users

Effectiveness rates . . . 95-99%

Where to get it . . .

It must be put in at a doctor's office. You can buy them at a pharmacy with a prescription. You can also get them at Sexual Health Centre Saskatoon for \$50 or \$300 depending on which type you choose.

Tubal Ligation

What it is . . .

A tubal ligation is an operation in which the fallopian tubes

Barrier Methods: Diaphragm, Sponge, and Condom

4. There have been reports that it makes noise while using it

What are the side effects . . .

No known side effects.

Effectiveness rates . . .

Typical use: 85-90% Perfect use: 90-95%

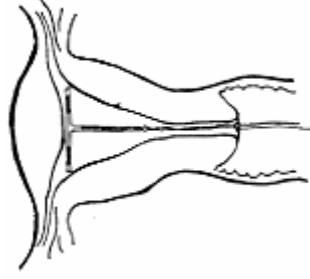
Where to get it . . .

Female condoms are available in most pharmacies, and are available for free at AIDS Saskatoon.

Intra—Uterine Device (IUD):

What it is . . .

An IUD is a specially shaped piece of plastic wrapped with copper wire. It must be inserted and removed by a doctor. The IUD has strings attached that will be trimmed so that they protrude slightly from the cervix. These must be checked every month after the woman's period.



How it works . . .

The IUD works by doing one or more of the following:

1. Changing the chemical makeup of the lining of the uterus (egg couldn't implant)
2. Increasing the speed with which the egg travels down the fallopian tube (i.e. shorter window for fertilization)
3. It may immobilize sperm
4. It may dislodge a fertilized egg implanted in the uterine wall

IUDs can be left in place for possibly up to 5 years. Generally, 2-3 years is recommended. A woman should have it checked after 2 years by her doctor or if she cannot find the strings.

Who shouldn't use them . . .

Hormonal Contraceptives: Birth Control Pill, Depo

Serious side effects that should be discussed with the doctor:

1. Gallbladder disease with indigestion and abdominal pain
2. Hypertension shown by high blood pressure

Very serious side effects – remove the patch immediately and see the doctor as soon as possible:

1. Severe abdominal pain
2. Chest pain or shortness of breath
3. Severe headaches
4. Eye problems such as blurred vision or blindness
5. Severe leg pain in the calf or thigh

Effectiveness Rates . . .

Perfect use: 99%

The patch is usually effective if you apply it within 24 hrs after beginning menstruation. However, if you are unable to begin at that time, it is recommended that you use backup contraception for the first 7 days.

Women should be advised that there can be many drug interactions with the patch and that they should use a backup method when taking other medications (even over the counter cold remedies can sometimes interfere – it is a good idea to check with a pharmacist).

Where to get it . . .

Contraceptive patches are available by prescription at Sexual Health Centre Saskatoon after a consultation with the doctor and the nurse. Or you can go to the doctor of your choice.

Cost:

Contraceptive patches are available at Sexual Health Centre Saskatoon for a cost of \$7.00 per month after consultation with a doctor and a nurse. Or you can go to the pharmacy of your choice with prices ranging from \$30-40 per month. Doctors will sometimes give one month's worth for free.

Hormonal Contraceptives: Birth Control Pill, Depo

What it is . . .

The **vaginal ring** contains a combination of low dose hormones. Once a month, you insert the vaginal ring into your vagina for 21 days, and then removed for 7 days. After a 7 day break, you insert a new ring.

How it works . . .

The ring, basically 'tricking' the body into thinking that it is pregnant, works in several ways:

1. Prevents the ovaries from releasing an egg by changing the woman's hormone levels
2. Changes the lining of the uterus (endometrium) making it harder for the fertilized egg to implant
3. The hormones cause changes in the cervical mucus making it more difficult for sperm to get to the egg

Who shouldn't take it . . .

Women who have a personal or family history of the following should seek advice from their doctor about using the vaginal ring:

1. undiagnosed vaginal bleeding
2. Blood clots
3. Stroke or heart attack
4. Know or suspected cancer of the breast or sex organs
5. Problems associated with the use of the pill or other estrogen-containing products
6. Jaundice
7. Allergic reactions or hypersensitivity to the hormones found in the contraceptive
8. Pregnant or breastfeeding
9. High blood pressure
10. Cigarette smoking
11. Plans for forthcoming surgery
12. High cholesterol or triglycerides
13. Depression
14. Epilepsy
15. Gallbladder or pancreatic disease
16. Diabetes
17. Mental depression

Barrier Methods: Diaphragm, Sponge, and Condom

Perfect use with separate spermicide: 95-98%

Where to get it . . .

Latex condoms are widely available at pharmacies, supermarkets, convenience stores, etc. The price ranges from \$7–\$24. They are also available for free at Sexual Health Centre Saskatoon, AIDS Saskatoon, and many other community organizations. Polyurethane and animal skin condoms are more difficult to find.

Female Condoms

What it is . . .

The female condom is a polyurethane pouch with a flexible ring at either end.

How it works . . .

The female condom provides a barrier along the entire length of the vagina, one ring anchors it inside (like a diaphragm) while the other holds it in place outside. It is not sufficiently lubricated, so extra lubrication is necessary to reduce friction that could cause the condom to break. There are presently studies being done to determine whether or not it is safe to re-use female condoms, but right now no one is sure whether or not it is safe.

Who shouldn't use it . . .

There are currently no known contra-indications for the female condom. Because it is not latex, those with allergies to latex can use it.

However,

1. It can be messy
2. It takes practice to use
3. Some people do not like the appearance



Barrier Methods:Diaphragm, Sponge, and Condom

Where to get it . . .

At any pharmacy.

Male Condom

What it is . . .

A male condom is a thin, skin-tight sheath made of latex, plastic or animal tissue such as sheep skin, or polyurethane. It is placed on an erect penis. Condoms come with or without spermicide and with or without lubrication.

How it works . . .

1. It traps sperm
2. It stops it from entering the woman's vagina
3. It protects against HIV and STI's by acting as a barrier to fluid transfer



NOTE: -Spermicidal condoms do not contain enough spermicide to be effective in killing all sperm. Therefore, we recommend using a separate spermicide.
-Animal tissue condoms are not as effective as latex in preventing STI infection.

Who shouldn't use them . . .

Men or women who are allergic to latex should try polyurethane condoms, or try pairing a latex condom with an animal skin condom (animal skin on outside for female allergy, on inside for male allergy).

What are the side effects . . .

1. Latex or spermicidal allergy

Effectiveness Rates . . .

Typical use: 85-90%
Perfect use: 90-95%

Hormonal Contraceptives:Birth Control Pill, Depo

What are the side effects . . .

Milder side effects that will usually subside within 3 months:

1. Vaginitis
2. Headaches
3. Upper respiratory infection
4. Leucorrhea
5. Sinusitis
7. nausea
8. weight gain

Serious side effects that should be discussed with the doctor:

1. Gallbladder disease with indigestion and abdominal pain
2. Hypertension shown by high blood pressure

Very serious side effects – remove the ring immediately and see the doctor as soon as possible:

1. Severe abdominal pain
2. Chest pain or shortness of breath
3. Severe headaches
4. Eye problems such as blurred vision or blindness
5. Severe leg pain in the calf or thigh

Effectiveness Rates . . .

Perfect use: 99% Typical use: 95%

The ring is usually effective if you insert it within 5 days after beginning menstruation. It is recommended that you use backup contraception for the first 7 days.

Women should be advised that there can be many drug interactions with the vaginal ring and that they should use a back up method when taking other medications (even over the counter cold remedies can sometimes interfere – it is a good idea to check with a pharmacist).

Where to get it . . .

Vaginal rings are available by prescription at Sexual Health Centre Saskatoon for \$10 a month after a consultation with the doctor and the nurse. Or you can go to the doctor of your choice with prices ranging from \$20 to \$30.

Hormonal Contraceptives: Birth Control Pill, Depo

Depo Provera

What it is . . .

Depo Provera is a progesterone-only injection given every 12 weeks. The injection is intramuscular meaning it is given directly into the muscle of the shoulder or cheek of the bum.

How it works . . .

Depo Provera works by:

1. Stopping ovulation
2. Changing the lining of the uterus to make it harder for a fertilized egg to implant
3. Thickening the cervical mucus making it more difficult for sperm to get into the uterus

Who shouldn't take it . . .

Women who:

1. Are pregnant
2. Want to become pregnant in the near future – fertility may take up to two years to return
3. Have lumps, swelling or tenderness of the breast not known about by the doctor
4. Have unusual or unexplained vaginal bleeding not known about by doctor
5. Liver problems or disease
6. Are taking blood thinners
7. Are allergic to any of the ingredients in Depo Provera

The doctor should be made aware if the woman seeking Depo Provera has a personal or family history of the following conditions. These women may need more frequent follow-up.

1. Breast cancer, abnormal breast exam or mammogram
2. Diabetes
3. Migraines
4. Heart problems
5. Kidney problems
6. Depression
7. Seizures, convulsions or epilepsy
8. Asthma
9. Stroke or blood clots
10. High blood pressure
11. Scanty or irregular periods



Barrier Methods: Diaphragm, Sponge, and Condom

Where to get it . . .

Diaphragms must be fitted at a doctor's office. The cost of a diaphragm is approximately \$50.

Sponge

What it is . . .

Currently the only sponge available in Canada is the Protectaid Sponge. It is a small sponge filled with spermicide that covers the cervix. It is one size fits all.

How it works . . .

1. The sponge prevents sperm from entering the uterus
2. The spermicide kills the sperm absorbed by the sponge.
3. Can be inserted up to 24 hours prior to intercourse.
4. Effective for up to 12 hours after insertion.
5. Must be left in place for at least 6 hours after last intercourse.

Who shouldn't use it . . .

Women who:

1. Are not comfortable enough with their bodies to insert and remove the sponge
2. Are allergic to spermicides
3. Have a history of persistent yeast infections or bacterial vaginosis

What are the side effects . . .

1. Spermicidal allergies
2. Vaginal infection due to leaving sponge in place too long
3. May cause yeast infections or bacterial vaginosis
4. May cause toxic shock syndrome (rare)

It shouldn't be used while a woman has her period.

How effective is it . . .

80-85% for women who have not had a vaginal delivery
60-65% for women who have

This is because vaginal delivery changes the size of the cervix which may effect how well the sponge covers it.

Barrier Methods: Diaphragm, Sponge, and Condom

Diaphragm

What it is . . .

A diaphragm is a dome-shaped rubber cup with a flexible metal rim. It is inserted into the vagina and sits at the back of the vaginal canal. A diaphragm needs to be fitted by a doctor.

How to use it . . .

1. The diaphragm acts as a physical barrier to sperm and the spermicide used with it kills sperm.
2. The diaphragm can be inserted from 2 hours up until right before intercourse takes place, but must be in place before intercourse occurs.
3. If there is more than one act of intercourse while the diaphragm is in place, extra spermicide should be inserted **without** removing the diaphragm.
4. The diaphragm must be left in place for at least 6 hours after intercourse for the spermicide to work properly.
5. After each use the diaphragm should be washed with mild soap and water.



Who shouldn't use it . . .

Women who:

1. Are allergic to latex or spermicides
2. Have a predisposition to urinary tract infections
3. Are not comfortable enough with their bodies to insert and remove the diaphragm

What are the side effects . . .

1. Pelvic pain, cramps, urinary or bladder problem – may be helped by change in size.
2. Sensitivity to latex or spermicide
3. Increase in vaginal discharge caused by leaving diaphragm in place too long

Effectiveness Rates . . .

Typical use: 85-90% Perfect use: 90-95%

Hormonal Contraceptives: Birth Control Pill, Depo

What are the side effects . . .

Women should be made aware that Depo Provera is effective for 3 months and that side effects may continue after the birth control effect is over.

1. Changes in menstrual periods are almost guaranteed to occur. Changes such as:

- prolonged bleeding
- irregular bleeding
- no bleeding

2. Return to fertility may be delayed. Most women will have to wait at least 6-8 months after the last injection to start ovulating, have regular periods, and be able to become pregnant.
3. Weight gain due to an increase in appetite. If more than 15 pounds over a short period of time, the doctor should be advised.
4. Women with a history of depression may find that Depo will worsen the condition.

Other possible side effects include:

1. Headaches
2. Nausea or vomiting
3. Nervousness
4. Stomach cramps
5. Backache
6. Stomach bloating
7. Breast discharge and tenderness
8. Spotty darkening of the skin
9. Skin rash
10. Depression
11. Tiredness
12. Dizziness
13. Loss of hair from head
14. Increase in growth of body hair
15. Vaginal dryness
16. Change in sex drive
17. Change in blood pressure

How effective is it . . . 99.7%

If a woman has her first injection during the first five days of her period, Depo Provera is effective immediately. If not, she should use a back up method of birth control for 2-3 weeks after the injection.

Where to get it . . .

The injection is available at Sexual Health Centre Saskatoon for a cost of \$25. Or you can go to the doctor of your choice with prices ranging from \$27-\$35. Because Depo Provera often causes loss or lightening of menstrual bleeding, it is recommended that women do a pregnancy test prior to each injection.

Spermicide: Vaginal Contraceptive Film, Advantage 24, Foam

Spermicide

What it is . . .

Spermicide is a chemical preparation that kills sperm.

How it works . . .

It kills the sperm

NOTE:

We do not recommend use of spermicide alone, but always with another method such as condoms, diaphragm, cap, etc.

Who shouldn't use them . . .

Men or women who are allergic to spermicide. If any irritation occurs, use should be discontinued.

Note: Because of sores or wounds that can be caused by spermicidal allergies, spermicide can increase the risk of HIV transmission because the wound provides an entry point for the virus.

What are the side effects . . .

Spermicidal allergy

What types are available . . .

1. Vaginal Contraceptive film (VCF) – small square of film that is inserted into the vagina with the finger. Starts working 15 minutes after insertion, lasts for no more than 1 hour.
2. Foam – inserted into the vagina with an applicator similar in size and shape to a tampon. Starts working immediately after insertion.
3. Advantage 24 – comes packaged in its own applicator to insert into the vagina. Can be inserted up to 24 hours prior to intercourse, but must be reinserted with each act of intercourse. Similar in appearance, texture, and smell to white glue.
4. Spermicidal Gel – a wide variety are available in pharmacies. Come with or without applicators. For use with diaphragms and cervical caps.

Spermicide: Vaginal Contraceptive Film, Advantage 24, Foam

Effectiveness Rates . . .

Spermicide alone: 65-85%

Spermicide with condoms: 95-99%

Where to get it . . .

At any pharmacy (freestanding, in supermarkets, in department stores, etc.). The price ranges from \$5–\$15.

