

# Which birth control method is right for me?

There are many birth control options available today, and the choices can seem confusing. This list can help you decide which method would best fit your lifestyle.

		1 HOW EFFECTIVE IS THIS METHOD?*	2 HOW MANY OPTIONS ARE AVAILABLE?	3 HOW OFTEN DO I NEED TO USE IT?	4 ARE THERE INTERRUPTIONS WITH THIS METHOD?	5 HOW QUICKLY CAN I GET PREGNANT IF I STOP USING IT?	6 DO I NEED TO SEE MY HEALTHCARE PROFESSIONAL TO START?	7 DO I NEED A PRESCRIPTION?	8 DOES THIS PROTECT AGAINST HIV AND STDs?†
<b>HORMONAL CONTRACEPTIVES</b>  Hormonal contraceptives work by preventing release of an egg from your ovaries into the uterus, and may also make the uterus an "unfriendly" environment for sperm. While most women know about the birth control pill, there are other hormonal birth control methods that are now available.	 <b>The Patch</b>	99% effective	There is only 1 contraceptive patch	The Patch is applied once a week for 3 weeks. During Week 4, no patch is used	There are no interruptions with this method	Once stopped, it may take a few cycles before you can become pregnant	You need to learn how to apply the Patch correctly	Yes	No
	 <b>Oral Contraceptive (The Pill)</b>	99% effective	There are a variety of pills available in different doses	You should take your pill every day, at approximately the same time each day	There are no interruptions with this method	Once stopped, it may take a few cycles before you can become pregnant	You may need instruction on the correct way to take your pills	Yes	No
	 <b>Contraceptive Injections</b>	99% effective	There are 2 options currently available: a monthly injection and an injection that is given every 3 months	You receive an injection either monthly or every 3 months	There are no interruptions with this method	Ovulation may be delayed up to a year	A healthcare professional administers the injection	Yes	No
	 <b>Progesterin-Releasing Intrauterine Device (IUD)</b>	99% effective	There is 1 hormone-releasing IUD currently available	The suggested length of use is 5 years or less	There are no interruptions with this method	Once removed, fertility can return within a year	Your healthcare professional inserts and removes the IUD	Yes	No
	 <b>Vaginal Ring</b>	99% effective	There is only 1 vaginal ring	Each month, the vaginal ring is inserted into the vagina and left in place for 3 weeks. During Week 4, you do not wear the ring	There are no interruptions with this method	Once stopped, it may take a few cycles before you can become pregnant	You need to learn how to insert and remove the vaginal ring	Yes	No
<b>NONHORMONAL CONTRACEPTIVES</b>  Nonhormonal contraceptives prevent pregnancy by providing a barrier against sperm, or by interfering with sperm movement, or by creating an "unfriendly" environment for sperm. These methods do not use hormones, so they do not interfere with your natural reproductive cycle.	 <b>Male Condom</b>	97% effective	There are a variety of styles, sizes, colors, materials, and textures	A new one must be used every time you have sex	Must be applied when the penis is erect. May cause a slight interruption before sex	Without this device, there is no protection against pregnancy	Tell your healthcare professional that you plan to use condoms	No	Yes
	 <b>Female Condom</b>	95% effective	There is 1 female condom currently available	A new one must be used every time you have sex	A female condom can be inserted up to 8 hours before sex	Without this device, there is no protection against pregnancy	Tell your healthcare professional that you plan to use a female condom	No	Unless the female condom slips out of place or is torn, it should provide protection against STD exposure comparable to that of male condoms
	 <b>Intrauterine Device (IUD)</b>	99% effective	There is 1 copper-T IUD currently available	Once inserted in the uterus, it can be left in place for up to 10 years	There are no interruptions with this method	Once removed, fertility can return within about 1 month	Your healthcare professional inserts and removes the IUD	Yes	No
	 <b>Spermicides</b>	94% effective — use with a vaginal barrier increases effectiveness	There are a variety of spermicides available in foams, jellies, creams, and vaginal suppositories	Must be used every time you have sex	Must be inserted no more than 1 hour before sex	Without this device, there is no protection against pregnancy	Tell your healthcare professional. You may be advised to use an additional contraceptive method	No	No
	<b>VAGINAL BARRIERS</b>  <b>Diaphragm</b>	94% effective	There are a variety of sizes available	Must be used every time you have sex (and fresh spermicide must be applied each time)	The diaphragm can be inserted 6 to 8 hours before sex	Without this device, there is no protection against pregnancy	You need to be fitted and must learn how to use the diaphragm	Yes	Diaphragms do not protect against HIV (AIDS). There is a mild reduction in the risk of some STDs
 <b>Cervical Cap</b>	84% effective in women who have had a child (91% in those who have not)	There are a variety of sizes available	Must be used every time you have sex (and spermicide must be applied when inserted)	The cervical cap provides continuous protection for up to 48 hours	Without this device, there is no protection against pregnancy	You need to be fitted and must learn how to use the cervical cap	Yes	No	
<b>PERMANENT METHODS</b>  <b>Surgical Sterilization</b>	Greater than 99% effective	For women, there is a tubal ligation (having your tubes "tied"); for men, there is a vasectomy	These procedures are permanent and irreversible	There are no interruptions with this method	You will no longer be able to get pregnant	These surgical procedures are performed by a healthcare professional	Physician recommended	No	

\*When used correctly.

†STDs = sexually transmitted diseases.