

THINK

your guide to contraception

thinkcontraception.ie

Your guide to choosing the right contraception for you.

When it comes to your sexual health, nobody else is going to do the thinking for you. It's important then to choose contraception that fits your situation and lifestyle.

In this leaflet, you'll find info on how to protect yourself and your partner from having an unplanned pregnancy and how to prevent against sexually transmitted infections (STIs). You'll also find descriptions of the main types of contraception available. Read on and then have a chat with your doctor and your partner about what's best for you. And remember, above all, to always think contraception. All the methods are very effective – and most are 99% effective – when they are used correctly and consistently.

Remember, only abstaining from (avoiding) all sexual contact offers 100% protection from pregnancy and STIs.

Disclaimer

The information in this leaflet has been supplied by the Crisis Pregnancy Programme in January 2011. It has made every effort to ensure that the information is accurate before going to print. Please remember, however, that the information in this leaflet does not replace medical advice, diagnosis or treatment. If you have questions or concerns or need further information, visit your GP, pharmacist (chemist) or local family planning clinic for professional advice.

About the HSE Crisis Pregnancy Programme

The Crisis Pregnancy Programme is a section of the Health Service Executive that has been set up to develop and implement a strategy to address the issue of crisis pregnancy in Ireland. For more information, visit crisispregnancy.ie.

Age of consent

The age of sexual consent in Ireland is 17 years.

Top tips

- Think contraception before you think about having sex! Most contraceptive methods are 99% effective when used correctly and consistently. However, only abstaining from (avoiding) all sexual contact offers 100% protection from pregnancy and STIs.
- Different contraceptives suit different people. Discuss your contraceptive choices with your GP. You may need to experiment to find the best contraception for you.
- Discuss contraception with your partner before you get intimate.
- Using 'dual protection' (condoms with another method of contraception) will help you to have safer sex.
- Over 90% of 18-24 year olds used contraception the last time they had sex (ISSHR, 2006), so plan ahead and carry contraception.
- Be prepared – research has found that the most common reason why people fail to use contraception is because sex is unplanned or they were unprepared (ICCP, 2004).
- Protect yourself, be safe and look after your sexual health. Nobody else is going to do the thinking for you.



Condom: Male and Female

how does it work?

This barrier method works by preventing the man's sperm from meeting the woman's egg.

The male condom is rolled onto a man's erect penis before sex. The female condom lines the woman's vagina.

how effective is it?

Effectiveness depends on careful and consistent use.

With careful use, the male condom is 98% effective and the female condom 95% effective.

things to know before choosing this method

- Widely available for sale without a prescription
- Helps to protect both partners from sexually transmitted infections, including HIV
- Can be used with hormonal contraceptives for additional protection
- Must be correctly and consistently used – using condoms properly requires practice



Combined oral contraception: the pill

how does it work?

This pill contains two female hormones (oestrogen and progestogen) and is taken every day for three weeks of each month. It works mainly by stopping the woman from producing an egg.

how effective is it?

If properly used, it is over 99% effective. It is less effective with less careful use. It must be taken around the same time every day.

things to know before choosing this method

- Not available without prescription
- Not suitable for women with conditions such as high blood pressure or smokers over 35
- Vomiting, diarrhoea and taking some medicines such as antibiotics can interfere with how it works
- Does not protect against sexually transmitted infections



Progestogen-only pill: the mini-pill

how does it work?

This pill contains one female hormone (progestogen) and is taken every day without a break. It works mainly by preventing sperm from getting through the fluid at the neck of the womb. It may also thin the lining of the womb, which prevents an egg from implanting there and may prevent an egg being released.

how effective is it?

Effectiveness depends on careful and consistent use.

The mini-pill is 96-99% effective with very careful use, but it must be taken at the same time every day.

things to know before choosing this method

- Available only with a prescription
- Useful for women who cannot or do not want to take oestrogen
- Can be used when breastfeeding
- May cause irregular periods
- Does not protect against sexually transmitted infections



Injectable contraception: the hormone injection

how does it work?

A woman receives an injection of a single hormone every 12 weeks. The hormone works mainly by stopping the woman from producing an egg.

how effective is it?

This method is very effective (over 99%) once the injection is given regularly.

things to know before choosing this method

- Injection must be given by a doctor or a nurse
- Useful for those who find it hard to remember to take a pill every day
- May cause irregular bleeding
- Does not protect against sexually transmitted infections



Intrauterine system (IUS)

how does it work?

The IUS is a small plastic device that is put into the womb and releases the hormone progestogen.

It works in several different ways - by stopping sperm from meeting the egg, by delaying the egg getting to the womb or by preventing the egg from implanting in the womb.

how effective is it?

This is a highly effective method (more than 99% effective).

things to know before choosing this method

- Works as soon as it is inserted and can stay in place for five years
- Can only be inserted and removed by a specially trained doctor
- May cause irregular bleeding for the first few months
- Does not protect against sexually transmitted infections



The implant

how does it work?

The implant is a small flexible rod that contains the hormone progestogen. It is inserted under the skin of the upper arm.

It works mainly by stopping the woman from producing an egg. It also thickens the fluid at the neck of the womb and thins the lining of the womb.

how effective is it?

This method is highly effective (over 99%).

things to know before choosing this method

- Lasts for up to three years
- Can only be inserted and removed by a specially trained doctor
- May cause irregular bleeding
- Does not protect against sexually transmitted infections



The patch

how does it work?

The patch is like a thin plaster that contains two hormones (oestrogen and progestogen). A woman wears the patch for three weeks out of every four.

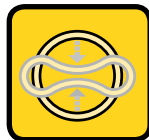
In this way, it works like the combined oral contraceptive pill.

how effective is it?

This method is 99% effective when used correctly.

things to know before choosing this method

- Available only with a prescription
- Has the same effects as the combined oral contraceptive pill
- Costs more than the pill
- Timing may be easier to remember (patch replaced once a week)
- Does not protect against sexually transmitted infections



The vaginal ring

how does it work?

The ring contains two hormones (oestrogen and progestogen) and is inserted into the vagina for three weeks of every month.

It works like the combined oral contraceptive pill.

how effective is it?

This method is 99% effective when used correctly.

things to know before choosing this method

- Available only with a prescription
- Can be inserted by the woman herself
- Has the same effects as the combined oral contraceptive pill
- Costs more than the pill
- Timing may be easier to remember (inserted once a month)
- Does not protect against sexually transmitted infections

Emergency Contraception

If you have had sex without using contraception or if you think your method might have failed (for example a burst condom or forgotten pill), you can use emergency contraception. This will usually stop you becoming pregnant.

You can get emergency contraception through your local doctor or a family planning clinic.

Most doctors prescribe emergency contraception, but if you are unsure, ring to ask. From January 2011, you can also get emergency contraception directly from a number of pharmacies (chemists) following a consultation with the pharmacist.

The emergency contraception pill can be taken up to 72 hours after unprotected sex, but the sooner it's taken the more effective it is.

As the name suggests, emergency contraception is for emergencies only. You should not use it as your regular method of contraception.

For a list of participating pharmacies where you can get emergency contraception without having to visit the doctor first, visit thinkcontraception.ie

Make the right choice for you

It is your right to decide when, with whom, how and where you want to have sex.

It is your right to make your own choices.

It is your right not to engage in sexual activity.

It is your right to protect yourself from pregnancy and disease.

It is your right to enjoy yourself.

Only you can protect yourself from unplanned pregnancy and STIs, so make sure you know your stuff and look after yourself.

Facts

Fact: You can get pregnant even if it's the first time you have had sex.

Fact: A woman can get pregnant if the man comes near or around her genitals or even if he pulls out before he comes.

Fact: Fact: Up to 86% of women and 50% of men with gonorrhoea have no symptoms (HPSC, 2010).

Sexually transmitted infections (STIs)

STIs are most highly reported among 20-29 year olds (where age is recorded)
(Health Protection Surveillance Centre (HPSC), 2009)

Condoms offer protection against most STIs, but only total abstinence from all sexual contact offers 100% protection from pregnancy and STIs.

Get advice from your doctor, a family planning clinic, an STI clinic or genito-urinary medicine (GUM) clinic if you are worried about STIs or are sexually active and notice any of the following symptoms:

- unusual discharge from penis or vagina,
- pain when passing urine,
- unusual sores or blisters in the genital area,
- itching or irritation in the genital area, or
- pain during sex
(HSE, 2007)

Once diagnosed, most STIs (except for HIV) can be cured with treatment. But make sure you get treatment early, as some infections can have long-term effects.

STI screening

It is good sexual health practice to get an STI check regularly. Your doctor can arrange tests for you or you can visit a family planning clinic, an STI clinic or a genito-urinary medicine (GUM) clinic.

What happens at an STI or a GUM clinic?

You will need to make an appointment for most clinics, unless they provide a drop-in service. You don't have to be referred by your GP. The service is confidential, which means that you are identified by a number rather than by your name.

An STI screening can take around two hours. First, a doctor will take your sexual history. Don't worry about shocking them - they've heard it all before. Then you will have a series of tests. Blood tests are used to test for HIV, Hepatitis B and syphilis. Swabs are used to examine material from a discharge or an infected area. If you are having a HIV test, an advisor will talk you through it.

You may receive some results while you are at the clinic. If you need treatment, they will give you the medication there and then. A sexual health advisor will meet you to explain safer sex practices, answer any questions you may have and discuss your results. You will get another appointment to come back for the rest of your results.
(HSE, 2007)

How to use a male condom

Condoms are the most common form of contraception used by 18-24 year olds (ISSHR, 2006). Male condoms are really effective when they are used properly. They protect against most (but not all) STIs. It takes a little practice to use one properly - here are some tips.

- Make sure you buy a good quality condom. Look for the BSI Kitemark or CE mark and check the expiry date.
- Be careful that condoms don't tear when you open the packet - don't use your teeth and be careful with long nails and jewellery.
- Put the condom on before there is any genital contact or penetration - there can be semen on the penis before ejaculation.
- Put the condom on before there is any genital contact or penetration - there can be semen on the penis before ejaculation.
- Don't try to put a condom on if the penis is not hard.



- Hold the condom at the head of the penis. Pinch the top to get rid of any air and with your other hand gently roll it down over the penis.
- Use water-based lubricants if necessary - they are designed especially for use with condoms. Most pharmacies stock these products close to the condom range. Remember that oil-based lubricants (massage or baby oil, petroleum jelly) and products such as body cream can damage condoms, making them split.
- When pulling out after sex, hold the base of the condom. Be careful when removing the condom so that you don't spill any semen. There will still be semen on the penis, so keep it away from the vagina.
- Wrap the condom in a tissue and dispose of it safely and hygienically (not down the toilet).

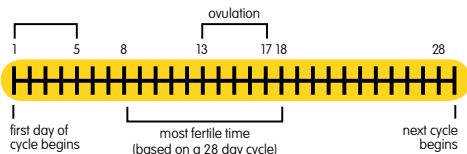


A variety of condom types are available. If one condom doesn't feel comfortable, check out other condom options.

Fertility

Lots of people do not know when a woman is most fertile during her cycle (in other words, when pregnancy is most likely to occur). Research has found that only 31% of men and 56% of women know a woman's most fertile time (ISSHR, 2006).

A woman releases an egg (ovulates) every month 12-16 days before the onset of her next menstrual period. This is the most fertile time of her menstrual cycle.



Where women have regular, 28 day cycles, this occurs around the middle of her cycle. As the egg can survive for approximately 12-24 hours and sperm may survive for between 5-7 days, the fertile time can extend from 7-10 days each month.

Many women have irregular cycles, so it can be difficult to identify their likely fertile time in each cycle. If a woman has sex without using contraception, she may become pregnant, even at a time in her cycle when she thought she was safe.

STI screening

crisispregnancyprogramme



Get advice from your doctor, a family planning clinic, an STI clinic, a student health service or a genito-urinary medicine (GUM) clinic if you are worried about STIs.

Dublin

Dublin Well Woman

Lower Liffey Street.....	01 872 8051
Ballsbridge.....	01 660 9860
Coolock.....	01 848 4511

IFPA Medical Centres

Cathal Brugha St.....	01 872 7088
Tallaght.....	01 459 7685/6
GUIDE Clinic, St. James' Hospital....	01 416 2315/6

Limerick

Family Planning Clinic.....	061 312026
STI Clinic.....	061 482382

Cork

Family Planning Clinic.....	021 427 7906
Youth Health Service.....	021 422 0490
STI Clinic.....	021 496 6844

Galway

Family Planning Clinic.....	091 562992
STI Clinic.....	091 525200

Waterford

STI Clinic.....	051 842646
-----------------	------------

Sligo

GUM Clinic.....	071 917 0473
-----------------	--------------

Positive Options

If you're facing an unplanned pregnancy, you can freetext the word **'list'** to **50444** or visit **positiveoptions.ie** for a list of free, non-judgemental and trustworthy support services.

The Crisis Pregnancy Programme would like to thank our colleagues in the Health Promotion team in the Health Service Executive (HSE) and the Health Protection Surveillance Centre (HPSC) for providing information for use in this leaflet.

Please recycle 

crisispregnancyprogramme



**TV off.
Music on.
Candles lit.
Phones silent.
Cat out.
Takeaway in.
Contraception.**

NOBODY ELSE IS GOING TO DO THE THINKING FOR YOU



thinkcontraception.ie