

Fertility and contraception advice for people with sickle cell disease

Sickle Cell and Thalassaemia Service

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Information for patients

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Introduction

During the teenage years our bodies produce more natural chemicals (hormones). These can make your sickle cell disease worse.

Some women with sickle cell disease find that their pain is worse during their menstrual period.

Fertility (women)

Sickle cell disease does not seem to affect the fertility of women. However, it can cause problems during pregnancy and childbirth, so it is important that pregnancy is well planned.

Fertility (men)

Sickle cell disease can reduce fertility in men, especially if they have had a condition that causes painful erections known as 'priapism'.

If you have had difficulty becoming pregnant (conceiving) after one year of regular unprotected sex, you should be offered tests to look into this.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Contraception

It is important to use contraception if you are not planning to have children. An unplanned pregnancy can be challenging for the health and wellbeing of women with sickle cell disease.

There is a wide range of contraception available. You can discuss different methods of contraception with your health care team. They will take into account your medical history.

Oral contraceptive pills

There are two types:

- **Combined oral contraceptive pill**

This is sometimes called 'the pill'. It contains the hormones 'progesterone' and 'oestrogen' which stop an egg from being released by the ovaries each month.

The pill may not be suitable for you if you have had a blood clot in your legs or lungs. The combined oral contraceptive pill slightly increases your risk of developing a blood clot. People with sickle cell disease have higher risk of developing blood clots so doctors usually advise against this type of contraceptive method.

- **Progestogen only pill (POP) also called the 'mini pill'**

The progestogen-only pill contains the hormone progestogen. It does not contain oestrogen. It works by thickening the mucus in the cervix to stop sperm from reaching the egg. If the pill is taken carefully, following the instructions as prescribed, it is 99 per cent effective.

There are two different types of progestogen-only pill:

- 3-hour progestogen-only pill (traditional progestogen-only pill): this must be taken within three hours of the same time each day.
- 12-hour progestogen-only pill (desogestrel progestogen-only): this must be taken within twelve hours of the same time each day.

You must follow the instructions that come with your pill packet for further advice and what to do if you miss a dose.

There is some evidence that progesterone protects against sickling so it may be a suitable choice for those with sickle cell disease.

What should I do if I have diarrhoea and vomiting whilst taking oral contraception?

With all pills, another method of contraception should be used if you have had diarrhoea or sickness (vomiting) at any time while taking the pill.

Contraceptive injections

Contraceptive injections contain the hormone progestogen. There are three types: Depo-Provera, Sayana Press and Noristerat (not commonly used in the UK). They work by stopping your ovaries releasing eggs each month (ovulation). They also thicken the mucus from your cervix (entrance to the womb), making it difficult for sperm to move through it to reach an egg. They also make the lining of the womb thinner therefore less likely to accept a fertilised egg.

The injection needs to be given as prescribed. It is 99 per cent effective and safe to use if you are breastfeeding.

Contraceptive injections are a safe and effective choice for women with sickle cell disease.

Implants

The contraceptive implant is a small flexible plastic rod that is placed under the skin in your upper arm by a doctor or nurse. It steadily releases the hormone progestogen into your bloodstream, which stops the release of an egg each month. It lasts for three years. One of the most commonly used implant is known as 'Nexplanon'. Sometimes irregular bleeding happens, especially in the first six months.

Implants are 99 per cent effective. Implants are a safe and effective contraceptive choice for women with sickle cell disease.

- **Intrauterine device (IUD or coil)**

An intra-uterine device IUD is a small T-shaped device made from plastic and copper that is fitted in your uterus (womb) by a doctor or nurse. It has one or two thin threads on the end that hang through your cervix (the entrance to the uterus) into the top of your vagina. It releases copper to stop you getting pregnant. It works by stopping sperm reaching an egg.

An IUD works for contraception for five or ten years, depending on the type. An IUD is sometimes called a 'coil' or 'copper coil'. There are different types and sizes. It is 98-99 per cent effective.

Some types of IUD may increase the risk of infection or heavy bleeding. Two types of IUD are used in the UK: hormonal (Mirena coil) and non-hormonal (copper coil or ParaGard). The Mirena coil is the preferred choice for women with sickle cell disease.

- **Intra Uterine System (IUS)**

An IUS is a small, T-shaped plastic device that is put into your womb (uterus) by a doctor or nurse. It releases the hormone progestogen to stop you getting pregnant and lasts for three to five years. Two brands of IUS are used in the UK: Mirena and Jaydess.

The IUS is similar to the IUD, but instead of releasing copper like the IUD it releases the hormone progestogen into the womb. It thickens the mucus in the cervix which makes it more difficult for sperm to move through the cervix and thins the lining of the womb so that the egg cannot implant itself. When inserted correctly, it is 99% effective. An IUS is a suitable choice for those with sickle cell disease.

Barrier methods

These are very safe, but less reliable, forms of contraception:

- **Male condom**

This is a rubber sheath-shaped barrier device. It is the most common barrier method. The man puts it on his penis to stop sperm from entering inside the woman's body during sex. It is 98 per cent effective if used correctly. It also prevents most types of sexually transmitted infections including HIV, gonorrhoea and chlamydia.

- **Female condom**

This works the same way as the male condom but is inserted inside the woman before having sex. If used correctly, it is 95 per cent effective.

- **Diaphragm or cap**

This is a rubber circular dome that has a chemical on it that destroys sperm (spermicide). It is placed over the cervix before having sex. It covers the cervix so that sperm cannot get into the womb. It is prescribed by a doctor or nurse who will show you how to use it. If used properly it is 92.96 per cent effective. It does not protect against sexually transmitted infections.

Sterilisation

This is a permanent solution for men and women who are very sure that they have completed their family and people who never want to have children. It involves a small surgical procedure.

- **Female sterilisation**

The fallopian tubes which carry the egg from the ovary to the womb are either blocked or sealed off. This involves a minor operation, usually done as a day case (you can go home the same day). Sterilisation is meant to be permanent: although there are reversal operations, they are not usually successful. This procedure is 99 per cent effective.

- **Male sterilisation (vasectomy)**

This involves a surgical procedure to cut or seal the tubes that carry a man's sperm to permanently prevent pregnancy. The man can still ejaculate but there will be no sperm in the semen. It does not affect sex drive or production of male hormones. Vasectomy reversal is possible but the procedure is not always successful. This procedure is 99 per cent effective.

What should I do if I want to start a family?

- Before planning a family, we recommend that you both have some tests to see if you are at risk of having a child with sickle cell disease. This information can help you to make an informed choice about having children.
- You should also talk to your doctor to check that any medical treatment or medicines you are taking can be reviewed. Some drugs can be harmful to a developing baby.
- As soon as you think you are pregnant you should tell your family doctor (GP) or hospital doctor. There may be extra health risks for you and your unborn baby due to sickle cell disease, and your anaemia levels should be checked carefully .

Who can I contact for more information?

We are always pleased to hear from patients and carers. If you have any suggestions about how our service is run please speak to a member of the team or telephone: 0116 258 6081

To discuss the different types of contraception further, please make an appointment to see your doctor (GP), practice nurse or family planning clinic.

Contraceptive & Sexual Health Service - Leicester Sexual Health

Haymarket Health, 1st floor, Haymarket Shopping Centre, Leicester LE1 3YT

www.leicestersexualhealth.nhs.uk

Telephone: 0300 124 0102

Free, confidential service . With various clinics in Leicestershire, the service offers:

- Testing and treatment for sexual infections
- Contraceptive pills
- Contraceptive injection
- Contraceptive implant
- Emergency contraceptive pill (morning after pill)
- Free pregnancy testing, and referral for abortion (or to a midwife)
- Free condoms
- Sexual violence support (including child sexual exploitation, female genital mutilation and domestic violence)

Useful contacts

Sickle Cell and Thalassaemia Service

Ground Floor, Osborne Building

Leicester Royal Infirmary

Telephone ; 0116 258 6081

UHL Medicines Information

(Monday to Friday 8.30 am to 5.30 pm)

Telephone: 0116 258 6491

Sickle Cell Society

www.sicklecellsociety.org

Email: info@sicklecellsociety.org

UK Thalassaemia Society

www.ukts.org

Telephone: 020 8882 0011

Email: office@ukts.org

NHS website

www.nhs.uk/conditions/contraception

www.nhs.uk/conditions/sickle-cell-disease

FPA

Sexual advice and information.

www.fpa.org.uk

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغةٍ أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

જો તમને અન્ય ભાષામાં આ માહિતી જોઈતી હોય, તો નીચે આપેલ નંબર પર કૃપા કરી ટેલિફોન કરો

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Aby uzyskać informacji w innym języku, proszę zadzwonić pod podany niżej numer telefonu

If you would like this information in another language or format such as EasyRead or Braille, please telephone 0116 250 2959 or email equality@uhl-tr.nhs.uk



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