

Birth control options after having a baby

Maternity Service

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Information for Patients

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Introduction

The last thing you may want to think about after having a baby is birth control (contraception). But did you know that you could get pregnant from 3 weeks after giving birth? A gap of less than a year between babies could be exhausting. It can also increase the risk of your baby not growing well in pregnancy and/or being born too early. Many new mothers have unplanned pregnancy in the year after having a baby. This leaflet aims to help you learn about your choices if you do not want to have another baby straight away. If you want to know more about a specific method please ask your midwife or doctor/consultant.

When could I get pregnant?

You can get pregnant from 3 weeks (21 days) after the birth of your baby.

If you are not fully breastfeeding your baby at least every 4 hours day and night, then you could get pregnant any time from 3 weeks after birth. You could get pregnant before your periods re-start.

We recommend starting contraception as soon as possible (even if you are breastfeeding). It will reduce the risk of unplanned pregnancy.

Does breastfeeding stop me getting pregnant?

Breastfeeding is not a reliable method of contraception. We would advise that you use other methods of contraception to stop pregnancy.

But you are less likely to get pregnant if

- Your baby is less than 6 months old AND
- Your periods have not come back AND
- You are fully breastfeeding day and night with no bottle feeds at all.

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

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To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

What are the options for birth control?

There are a few different options. If you have certain medical conditions they may not all be right for you. Please ask your midwife or doctor. They can talk to you about which is the best choice for you. You can also contact your GP. They may be able to offer this service or they can refer you to your local sexual health clinic.

LARC (Long-acting reversible contraception) are the best ways to stop unplanned pregnancy.

These include:

- Implant (Nexplanon)
- Progestogen injection (Depot Provera)
- IUS (also known as the hormonal coil or the Mirena[®], Levosert or Kyleena[®] coil)
- IUD (also known as the copper coil)

Other methods are:

- Hormonal tablets (such as “the pill” or “mini-pill”)
- Barrier methods, e.g. condoms or diaphragm (less effective than hormonal methods or the IUD)

Implant

The implant is a tiny rod, about the size of a bendy matchstick. It is inserted under the skin of your upper arm. The implant releases a hormone called progestogen. It stops your ovaries from releasing eggs and thickens your cervical mucus. This helps to block sperm from getting to the egg in the first place.

Advantages

- 99.95% effective. Suitable for breast feeding women
- Lasts for 3 years – “fit it and forget it”
- Periods may be lighter
- Quick return to fertility on stopping

Disadvantages

- Possible irregular periods (or no periods)

When can I start?

- Right away after having your baby
- You can let your midwife know. It can be inserted before discharge, by the specialist

Injection – Depo Provera

The injection has progestogen, a hormone that stops your ovaries from releasing eggs. It also thickens your cervical mucus. This helps to block sperm from getting to the egg in the first place.

Advantages	Disadvantages	When can I start?
<ul style="list-style-type: none"> • 94% effective • Lasts for 3 months • May have lighter or no periods • Suitable for breastfeeding women 	<ul style="list-style-type: none"> • Must see a health professional every 3 months for the injection • Possible delay in return to fertility • Possible irregular periods 	<ul style="list-style-type: none"> • Right away after having your baby

Hormone Intrauterine System (IUS) Mirena® or Levosert® coil

The IUS is a T-shaped device. It is put in your womb (uterus). It releases a small amount of progestogen. This stops sperm from getting through the cervix

Advantages	Disadvantages	When can I start?
<ul style="list-style-type: none"> • More than 99% effective and suitable for breast feeding women • Lasts for up to 8 years - "fit it and forget it" • Can be inserted at the time of a planned caesarean section • Very low dose of safe hormone • Easy to remove and quick return to fertility • Periods may be lighter or stop 	<ul style="list-style-type: none"> • Likely irregular bleeding which takes a few months to settle • Must be inserted by a clinician 	<ul style="list-style-type: none"> • Can be inserted at the time of a planned caesarean section • Can be fitted right away after delivery or 6 weeks later. Your midwife or doctor will talk to you about this before you have your baby.

IUD (Intrauterine Device) or copper coil

A small "T-shaped" device. It is put in the womb. It lasts for 5 to 10 years. It depends on the device. The IUD works by slowly releasing very small amounts of copper into your womb. This is toxic to sperm. It is usually inserted via the vagina at least 6 weeks after birth (although it can sometimes be inserted within 48 hours of the birth). It can be inserted at the time of caesarean section.

Advantages	Disadvantages	When can I start?
<ul style="list-style-type: none"> 94% effective Lasts for 5 to 10 years depending on the coil Suitable for breastfeeding women 	<ul style="list-style-type: none"> Possible heavier, longer periods 	<p>It is usually inserted via the vagina at least 6 weeks after birth (although it can sometimes be inserted within 48 hours of the birth).</p> <p>Or it can be fitted if you have a planned caesarean section</p>

Progesterone only pills (minipill)

These pills have only 1 hormone, progestogen. The pills are taken every day with no break. There are 2 kinds of progestogen only pill:

- the traditional ones that thicken cervical mucus. They stop sperm reaching the egg
- newer one that stops the ovary from releasing the egg.

Advantages	Disadvantages	When can I start?
<ul style="list-style-type: none"> 91% effective Quick return to fertility on stopping Suitable when breastfeeding Safe for women who can't have oestrogen May have no bleeding 	<ul style="list-style-type: none"> May have irregular bleeding Must remember to take at the same time each day 	<ul style="list-style-type: none"> Right after having your baby

Combined hormonal contraception pills

These methods have 2 hormones, oestrogen and progestogen. These stop your ovaries from releasing an egg.

It is a pill that you take at the same time every day.

There are lots of different kinds of pills on the market.

There are also patches or vaginal rings which work in the same way.

Advantages

- 91% effective
- Shorter, lighter, and less painful period
- Reversible after stopping

Disadvantages

- May have irregular bleeding, usually improves over time
- Must use the method correctly
- Some women cannot take oestrogen for health reasons

When can I start?

- If you are breast feeding, you **cannot** use this contraception until 6 weeks after you have had your baby.
- If you are breastfeeding and notice your milk supply is reduced when you start taking the combined pill, speak to your GP.
- If you are **not** breast feeding, you may be able to start this at 3 weeks after you have your baby
- Some women may need to wait 6 weeks after delivery for health reasons.

Surgery leading to permanent sterilisation

Sterilisation is an operation to stop pregnancy. Men and women can both be sterilised.

Female sterilisation

This involves blocking the fallopian tubes so that sperm cannot get through to meet an egg. You will need to have it done in hospital. Talk to your doctor as soon as possible. They can advise you about what your options are.

Remember that the intrauterine methods (hormone IUS and copper IUCD) and implant mentioned in this leaflet work as well as female sterilisation.

Advantages	Disadvantages	When can I have it?
<ul style="list-style-type: none"> 95% effective Permanent No change in periods 	<ul style="list-style-type: none"> Higher failure rate if done during caesarean section Cannot be reversed Must be certain you never want another pregnancy Surgical procedure Will need a general anaesthetic unless it is done at same time of a planned caesarean section. 	<ul style="list-style-type: none"> Can be done at time of a planned caesarean section but failure rates are higher if the procedure is carried out at the time of delivery as are rates of regret. You will need to discuss timings with your GP who will be able to arrange a referral.

Male sterilisation (vasectomy)

This involves blocking the tubes (vas deferens) that take sperm from the testicles to the penis. It is a quick procedure. It is done under local anaesthetic. It can be done in a community clinic. Talk to your GP for a referral to the right service. Male sterilization works better than female sterilisation. It is a much simpler procedure but cannot be reversed.

Advantages	Disadvantages	When can my partner have it?
<ul style="list-style-type: none"> 99% effective Permanent Local anaesthetic 	<ul style="list-style-type: none"> Irreversible Surgical procedure Risk of complications see Having a vasectomy 557 (local anaesthetic) or 558 (general anaesthetic) for more information on YourHealth 	<ul style="list-style-type: none"> You will normally be advised to wait until your youngest child is a year old before you have a vasectomy. Ask your GP for referral when your baby is 8 to 9 months

Can I use emergency contraception?

Emergency contraception (EC) is contraception that is

- taken after sex has taken place without contraception or
- where the contraception has failed (for example you have missed your pill, or a condom has come off during sex).

EC can be given by taking a tablet, or inserting an IUD.

You can use an emergency contraceptive pill from 21 days after the birth, or the IUD from 28 days after the birth.

When and where can I access different methods?

It may be possible to insert a contraceptive implant, coil, or to start the injection or mini pill on the postnatal ward before you go home – please ask if you would like one of these.

You can get contraception from your GP or local Family Planning Clinic (see below).

Useful Contact:

Leicester Sexual Health Clinic

Haymarket Health, 1st Floor, Haymarket Shopping Centre LE1 3YT

Appointments: leicestersexualhealth.nhs.uk

Phone: 0300 124 0102

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Previous reference:

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