STD Prevention plus Contraception: Condoms

Condoms are the only form of contraception that also prevents transmission of sexually transmitted diseases (STDs), including HIV/AIDS. Condoms alone are moderately effective as a birth control method, but when paired with another method the condom is a very effective way to prevent pregnancy and protect health.

(Male) Condom

Condoms that are worn on the penis help prevent the exchange of body fluids between partners during oral, anal, or vaginal sex. To reduce the risk of STDs, latex or synthetic condoms should be used rather than lambskin or “natural” condoms. Using extra water-based or silicone lubricant with condoms increases safety, especially during anal sex. Condoms are available without a prescription, but may also be prescribed, which can often decrease the cost. Condoms can be tricky to use correctly at first; it’s important for users to learn and practice the steps for correct use. With typical use, condoms are 82% effective at preventing pregnancy.

Planned Parenthood demonstration video—How to Put on a Condom: http://www.youtube.com/watch?v=EdSq2HB7jU&feature

Internal (female) Condom

An internal condom is a lubricated pouch with flexible rings at both ends. It is made from nitrile, a thin, soft, non-latex plastic. Inserted up to eight hours before sex, the internal condom fits inside the vagina and covers the vulva to help prevent pregnancy and to protect against STDs/HIV. A prescription is not required. With typical use, internal condoms are 79% effective at preventing pregnancy. Internal condoms can also be used for STD protection during anal sex; for this purpose some users prefer to remove the inner ring before insertion.

Planned Parenthood video—What is the Female Condom: https://www.youtube.com/watch?v=YSisMvTw-po

Bedside videos—Users talk about their experiences with the internal condom: https://www.bedsider.org/methods/internal_condom

Safer Oral Sex

Dams

Latex dams are squares that are placed over the vulva or anus during oral or anal sex to prevent STD transmission. Dams can be purchased or made by cutting open a condom.
Extremely Effective Contraception

Low maintenance methods, which include the contraceptive implant and the IUD, are the most effective methods available for pregnancy prevention. Sometimes known as Long-Acting Reversible Contraception (LARC), these birth control devices work for years without any user action.

Implant

*Nexplanon (previously Implanon)*
The implant is a flexible plastic rod, about the size of a toothpick, that contains a progestin hormone. A health care provider inserts the implant into the upper arm of a person who could become pregnant. The implant must also be removed by a provider. Insertion and removal take just a few minutes. One implant will last as long as four years, but it can be removed at any time and fertility returns immediately. The implant is over 99% effective at preventing pregnancy.

*Planned Parenthood video—Effectiveness of the Birth Control Implant in Your Arm*
https://www.youtube.com/watch?v=OmNkfA-Vwy8

IUD (Intrauterine Device)
The IUD is a small, plastic, T-shaped device that a health care provider inserts into the uterus. Strings extend from the tip of the IUD into the vagina for removal. There are two kinds of IUD. The copper IUD (*ParaGard*), which does not contain hormones, can stay in place for up to 12 years. The Levonorgestrel IUD (*Kyleena, Liletta, Mirena, or Skyla*) releases a small amount of progestin hormone each day. It can stay in place for three to seven years. IUDs are easily removed at any time by a health care provider and fertility returns quickly. While IUDs can be expensive to obtain, there are no additional costs until removal; on average the IUD is among the least expensive options if the user opts to keep it in place for several years. Both types of IUD are over 99% effective at preventing pregnancy.

*Planned Parenthood video—What is an IUD?*
https://www.youtube.com/watch?v=eXdNHIWkleA

Considerations...

When it comes to selecting birth control, effectiveness is only one factor in a young person's decision. A number of considerations may come into play, such as:

- Can the fact that I am on birth control be hidden from my parents/partners?
- Do I have control? Can I stop using it any time, for any reason?
- What are the potential side effects? Can anything be done to manage side effects?
- What is the effect on my menstrual cycle likely to be?
- How much will it cost me?
- Do I have to visit a health care provider? How often?
- How will it feel?
- Will my partner be able to feel it? How will it affect sex?
- Will I be able to get pregnant if/when I want to?

Very Effective Contraception

Shot

*Depo-Provera*
The shot is a progestin injection given every 12 weeks by a health care provider. It is very effective (94%) at preventing pregnancy. When injections stop, it can be difficult to become pregnant right away, but fertility returns within about 9-10 months.

*Planned Parenthood video—How Effective is the Birth Control Shot?*
https://www.youtube.com/watch?v=z2pAQytp-Cc
Ring

*NuvaRing*

The ring is a two-inch flexible loop that is inserted into the vagina where it releases estrogen and progestin to prevent pregnancy. The ring is worn for three weeks each month, followed by a one-week break. A prescription is required. The ring is 91% effective with typical use. Fertility returns quickly when the ring is no longer used.

*Planned Parenthood video—What Is the Birth Control Vaginal Ring?*
https://www.youtube.com/watch?v=mkSakVCq9tg

Patch

*Ortho Evra*

Worn on the skin, the patch releases small amounts of estrogen and progestin to prevent pregnancy. A patch is worn for three out of every four weeks, with a new patch put on each week. A prescription is required. With typical use the patch is 91% effective at preventing pregnancy, but people over 198 pounds may experience higher failure rates. When use stops, fertility returns quickly.

*Planned Parenthood video—Birth Control Patch*
http://www.youtube.com/watch?v=jpOPRCKOixE&feature

Pill / Oral Contraceptives

Oral contraceptives are pills that slightly alter a person's hormone levels. For oral contraceptives to work, a person who could become pregnant must take a pill at the same time each day. There are different types available. Combined oral contraceptives contain estrogen and progestin; there is also a progestin-only contraceptive sometimes called the “mini-pill.” A prescription is required. With typical use, the pill is 91% effective at preventing pregnancy. When use stops, fertility returns quickly.

*Planned Parenthood video—How Does the Birth Control Pill Work?*
https://www.youtube.com/watch?v=jIolmLbBiw0

Moderately Effective Contraception

Sponge

*Today Sponge*

The contraceptive sponge is made of soft polyurethane foam that contains spermicide. It is inserted up into the vagina to cover the cervix; a small, nylon loop attached to the sponge is used for removal. Like condoms, it is a barrier method: it prevents sperm from reaching the egg, and also uses spermicide. However, it does not protect against STDs/HIV. No prescription is required. It must be left in place for at least six hours after sex, and can be inserted up to 24 hours in advance. With typical use, the sponge is 88% effective for those who have never given birth and 76% effective for those who have previously given birth.

Prescription Methods

These methods:

- Require a visit to a health care provider.
- May have side effects, which may be different from person to person. (Note that side effects are not included in this brief.)

Users should be aware that side effects can often be managed in consultation with a health care provider.

- Are not for everyone: what works for one person may not work for another.
- Do not protect against STDs/HIV – condoms should be used whenever STDs might be a concern.

For more information on each method, including common side effects, visit:

Planned Parenthood
http://www.plannedparenthood.org/learn/birth-control/

Bedsider
https://www.bedsider.org/methods

To find a family planning clinic, visit:

Title X Family Planning Clinics
https://www.hhs.gov/opa/
(Scroll down for "Find a Family Planning Clinic" tool)

New York State Family Planning Program Sites
http://www.health.ny.gov/community/pregnancy/family_planning/progr m_sites.htm
Diaphragm and Cervical Cap  
_FemCap (cervical cap)_  
Diaphragms and cervical caps are latex and silicone cups that cover the opening of the uterus (cervix). They require a prescription and must be fitted by a health care provider. These barrier methods are put into the vagina before sex and can be left in place up to 24 hours (diaphragm) or 48 hours (cervical cap). They do not protect against STDs/HIV. Used with spermicide, with typical use, the diaphragm is 88% effective at preventing pregnancy. The cervical cap is less effective: with typical use, the cap is 86% effective for women who have never given birth and 71% effective for women who have previously given birth.

What about Withdrawal?  
Withdrawal refers to pulling the penis out of the vagina just before ejaculation. Because it is much less effective than other methods, some experts and educators do not consider it a contraceptive method at all – however, withdrawal does offer considerably more pregnancy protection than going without any contraception. Adolescents and those new to penetrative sex are generally not good candidates for withdrawal, as success requires experience with one’s own sexual response. Withdrawal does not prevent STD transmission.

Emergency Contraception (EC)  
Emergency Contraception IUD  
ParaGard  
The copper IUD can be used as emergency contraception when inserted within five days of unprotected sex. This type of EC is over 99% effective – the most effective form of EC – and has the additional advantage of then serving as an extremely effective regular method of birth control.

Emergency Contraception Pills  
EC pills are birth control pills that are formulated to be taken after unprotected sex to greatly reduce the risk of pregnancy. They are not recommended as a person’s primary form of birth control because they are less effective than other methods; however, using EC pills is certainly more effective than using no method at all. EC pills should not be confused with abortion medication. They work primarily by delaying ovulation. If a fertilized egg is implanted, EC will not end the pregnancy. The two types of EC pills most commonly available are progestin-only and ulipristal acetate. A third method uses certain brands of everyday birth control pills (combined pills containing both estrogen and progestin) in a specific protocol known as the Yuzpe Method. EC pills can be purchased in advance to insure quick access when needed. Note that EC pills may be less effective for people who are very overweight, but the ParaGard IUD is extremely effective for all body types.

_Ulipristal Acetate_  
_ella_  
Ulipristal acetate EC pills, marketed under the brand name “ella,” are effective up to five days after unprotected sex, and do not diminish in effectiveness in that period. It can be more difficult to obtain ella in a timely way, as a prescription is required; however, ella is the most effective EC pill. For those who are obese, ella may be more effective than progestin-only pills; studies are mixed.
Progestin-only
Plan B One-Step and generics such as Next Choice One Dose, My Way, Take Action, and AfterPill
At the time of this update (August 2017) progestin-only EC is available over the counter in pharmacy family planning aisles without age restrictions. No prescription is necessary and it is now legal for anyone to purchase the medication without showing ID. Though they can be effective up to five days after unprotected sex, progestin-only EC pills are most effective when taken within three days – the sooner the better. These pills appear to be less effective than ulipristal acetate (ella) for those who are obese; research continues.

Combined EC Pills / Yuzpe Method
Many (but not all) brands of daily birth control pills can be used as emergency contraception by following a protocol known as the Yuzpe method within three days of unprotected sex. This method is less effective than ella or progestin-only EC pills, and is more likely to cause nausea and vomiting. For more information on brands and protocols, visit:
Emergency Contraception Website (Princeton University)—Types of Emergency Contraception
http://ec.princeton.edu/questions/dose.html
(Scroll down to Table 1.)

More on EC Pills
The Office of Population Research at Princeton University provides a wealth of information on The Emergency Contraception Website, including regulation status, news, and frequently asked questions:

What is EC?
http://ec.princeton.edu/emergency-contraception.html

EC in the News
http://ec.princeton.edu/news/

Answers to Frequently Asked Questions
http://ec.princeton.edu/questions/index.html

References
Planned Parenthood Federation of America. (2010-2017). YouTube: Birth control videos. [Links for individual videos are provided above. For full list see link below.] https://www.youtube.com/playlist?list=PLA46DFCD237A38D37