All you need to know about the C-word | Contraceptives
What are CONTRACEPTIVES?

A CONTRACEPTIVE is something that can prevent unplanned pregnancy. Many young men and women in relationships are not ready to become parents but they shy away from talking or asking about CONTRACEPTIVES because society judges them.

If you’re sexually active and not ready to become a parent, you have a right to know about CONTRACEPTIVES and use a CONTRACEPTIVE method of your choice.

This booklet contains key information about common CONTRACEPTIVES that you can choose from. A health provider can help you decide the best method for you.

For more information visit a health provider OR:

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DON’T TAKE CHANCES, TAKE CONTROL!
Male Condom

What is it?
A thin latex rubber cover that is translucent, and contains non-spermicidal lubricant. A man wears it on his erect penis before getting into contact with the woman’s genitals. The lubricant helps to avoid condom breakage. Examples: SURE, Trust, Femiplan, Durex.

How does it work?
By forming a barrier that keeps sperm and semen out of the vagina. Also keeps infections in the man’s semen, or on his penis, or in the woman’s vagina from coming into contact and infecting the other partner. A couple must use the condoms during every act of sex.

Is it effective?
If used correctly and consistently, the chances of becoming pregnant when using male condoms are about 2 pregnancies per 100 women (2%).

Advantages:
• No hormonal side effects.
• Can protect from STIs including HIV/AIDS.
• No delay in getting pregnant after discontinuation.
• Can be started and stopped at any time without the help of a health provider.
• Both partners share the responsibility of preventing unplanned pregnancy.
• Can be used as back-up e.g. in between pill cycles or injections.

Common side effects / limitations:
• May dull the sensation of sex for some men.
• Some people have severe allergic reaction to latex rubber (very rare).
Remember!

- Store condoms in a cool, dry place away from heat or direct sunlight.
- Always check the expiry date before use; old condoms can be dry or brittle therefore can break during sex.
- Use a new condom with each act of sex - do not reuse a condom.
- Make sure the condom is worn on the man’s erect (hard) penis before the penis comes into contact with the woman’s genitals.
- Do not use teeth, scissors, or sharp nails to open a condom; these may damage the condom or cause it to tear.
- Do not have dry sex – ensure the woman’s vagina is lubricated naturally or using an artificial lubricant.
- Do not use oil-based lubricants such as Vaseline, baby oil, body lotion, massage oil, butter or margarine as these can weaken the condom and cause it to break.
Everyday Pills (Combined Oral Contraceptives)

What are they?
Pills that contain low doses of 2 hormones – a progestin and an estrogen – like the natural hormones progesterone and estrogen that are found in a woman’s body. They come in a 21 or 28 pill pack, depending on the type. Examples: Chaguo lako, Femiplan, Microgynon, Nordette.

How do they work?
Mainly by preventing the release of eggs from a woman’s ovaries (ovulation), but the eggs stay healthy inside the body until the woman is ready to get pregnant. The pills must be taken every day and whether or not the woman has sex.

One must start a new pack of pills on time even if she is still menstruating, and it is important to take the pills at the same time every day because some side effects may be reduced and it can help the woman remember to take her pills consistently.

Are they effective?
If taken correctly and consistently, the chances of becoming pregnant when using everyday pills are less than 1 pregnancy per 100 women (less than 1%).
Advantages:
• Nearly 100% effective when used correctly.
• No delay in getting pregnant after discontinuation
• Can be started without blood tests, pelvic exam, cancer screening or breast examination.
• Can be stopped at any time without a health provider’s help.
• Can help to protect against some cancers, ovarian cysts and iron deficiency anemia.
• Can reduce cramps, bleeding problems, excess hair on face or body, among other problems.

Common side effects / limitations:
• Changes in bleeding patterns e.g. irregular bleeding, spotting, or no monthly bleeding.
• Headaches, nausea & dizziness.
• Acne (can improve or worsen, but usually improves).
• Breast tenderness.
• Weight or mood changes.

• Do not protect from STIs including HIV/AIDS.

Everyday Pills DO NOT:
• Build up in a woman’s body, the pills dissolve in the body each day
• Make a woman infertile
• Cause birth defects or multiple births
• Change a woman’s sexual behavior
• Disrupt an existing pregnancy – they cannot cause an abortion.
3-month Injection (Progestin-only injection)

What is it?
A clear liquid that contains one hormone - a progestin - like the natural hormone progesterone in a woman’s body. The liquid is injected into the muscle on a woman’s upper arm, hip, or buttock after which the hormone is released slowly into the bloodstream. Examples: Depo-Provera, Femiplan, NET-EN.

How does it work?
Mainly by preventing the release of eggs from a woman’s ovaries (ovulation), but the eggs stay healthy inside the body until the woman is ready to get pregnant. One injection protects a woman from pregnancy for 3 months. The woman must always get her next injection on time and not miss any injection.

Is it effective?
If used correctly and consistently, the chances of becoming pregnant when using a 3-month injection are less than 1 pregnancy per 100 women (less than 1%).

Advantages?
• Nearly 100% effective when used correctly
• Very private; no one else can tell that a woman is using contraception
• Can be started without blood tests, pelvic exam, cancer screening or breast examination.
• Does not require daily action; one injection every 3 months.
• Can help to protect against endometrial cancer, uterine fibroids and iron-deficiency anemia.
• Can reduce sickle cell crises among women with sickle cell anemia.
3-Month Injections DO NOT:
• Disrupt an existing pregnancy – they cannot cause an abortion.
• Cause birth defects or multiple births.
• Make a woman infertile or cause menopause. There may be a delay in regaining fertility, but in time the woman will be able to become pregnant as before.
• Cause blood to build up in a woman’s body if she stops getting monthly periods.

Common side effects / limitations?
• Pregnancy may be delayed by 1 - 4 months or more after discontinuation.
• Changes in bleeding patterns e.g. irregular bleeding, prolonged bleeding, or no monthly bleeding (but this is not harmful to the woman’s health).
• Headaches & dizziness.
• Weight gain.
• Mood changes or changes in sex drive.
• Abdominal bloating or discomfort.
• Possible decrease in bone density.
• Can only be stopped once the 3 months are over.
• Do not protect from STIs including HIV/AIDS.
What are they?
Small rods or capsules, each about the size of a matchstick, containing one hormone – a progestin - like the natural hormone progesterone in a woman’s body. A specially trained health provider makes a small incision on the inside of a woman’s upper arm and inserts the implants under the skin, after which the hormone is released slowly into the bloodstream. Examples; Implanon, Jadelle, Sinoplant, Norplant.

How do they work?
Mainly by thickening the cervical mucus which blocks sperms from meeting an egg, and preventing the release of eggs from the ovaries every month (ovulation) but the eggs stay healthy inside the body until the woman is ready to get pregnant. They protect a woman from pregnancy for 3-5 years depending on the type.

Are they effective?
If inserted correctly, the chances of becoming pregnant when using implants are less than 1 pregnancy per 100 women (less than 1%). For women weighing 80kgs or more, Jadelle and Norplant become less effective after 4 years of use.

Advantages:
- Nearly 100% effective when inserted correctly.
- No delay in getting pregnant after discontinuation.
- Provide long term protection from pregnancy; 3-5 years depending on the type.
- A bit private, as they are inserted on the inside of the upper arm.
- Can be removed at any time that a woman wants to become pregnant.
- Does not require daily action, regular checkups, or repeat visits.
- Can be started without blood tests, pelvic exam, cancer screening or breast examination.
- May help to protect against iron-deficiency anemia & reduce the risk of ectopic pregnancy.
Common side effects / limitations:
• Must be inserted and removed by a specially trained health provider.
• Changes in bleeding patterns e.g. irregular bleeding, or no monthly bleeding.
• Headaches, nausea & dizziness.
• Acne (can improve or worsen).
• Breast tenderness.
• Weight or mood changes.
• Do not protect from STIs including HIV/AIDS.

Implants DO NOT:
• Continue working after they are removed; the hormones do not remain in the woman’s body.
• Cause blood to build up in a woman’s body if she stops getting monthly periods.
• Make a woman infertile.
• Cause birth defects or multiple births.
• Disrupt an existing pregnancy – they cannot cause an abortion.
• Move out of the arm and travel to other parts of the body.
• Cause cancer.
Copper IUCD (Intrauterine Contraceptive Device)

What is it?
A small, flexible plastic frame with copper wire around it and plastic strings at the bottom. A specially trained health provider inserts it into a woman’s uterus through her vagina and cervix, after which the strings are cut short and left to hang in the vagina to enable removal.

How does it work?
Mainly by releasing copper ions into the uterus; these copper ions weaken the sperms so that they’re unable to move and reach the woman’s eggs. One Copper IUCD can protect a woman from pregnancy for up to 12 years.

Is it effective?
If inserted correctly, the chances of becoming pregnant when using a Copper IUCD are less than 1 pregnancy per 100 women (less than 1%).

Advantages:
- Nearly 100% effective when inserted correctly.
- Very private; no one else can tell that a woman is using contraception.
- Provides long term protection from pregnancy; up to 12 years.
- No delay in getting pregnant after discontinuation.
- Does not require daily action, regular checkups, or repeat visits.
- Does not contain any hormones therefore has minimal or no side effects at all.
- May help protect against endometrial cancer & reduces the risk of ectopic pregnancy.
Common side effects / limitations?
• Must be inserted and removed by a specially trained health provider.
• Changes in bleeding patterns within the first 3-6 months e.g. prolonged or heavy bleeding, irregular bleeding, or more cramps.
• Does not protect from STIs including HIV/AIDS.

IUCDs DO NOT:
• Increase the risk of contracting STIs, including HIV/AIDS.
• Increase the risk of miscarriage after the IUCD is removed.
• Make a woman infertile.
• Cause birth defects or multiple births.
• Cause cancer.
• Move out of the uterus and travel to other parts of the body.
• Prevent a woman from doing heavy work.
• Harm the man during sex unless the IUCD has not been inserted correctly.
• Enter the baby’s body if a woman gets pregnant and carries the baby with the IUCD in place.
EC Pills (Emergency Contraceptive Pills)

What are they?
EC pills are also known as ‘morning after pills’. They contain high doses of either 1 or 2 hormones – a progestin and an estrogen – like the natural hormones progesterone and estrogen that are found in a woman’s body.

A woman takes EC pills to help prevent pregnancy within 120 hours (5 days) after having unprotected sex. Examples of dedicated EC products: Postinor 2, Smart Lady, Ecee, and Truston. A woman can also use Oral Contraceptives, such as Femiplan and Microgynon, as EC pills but they must be taken in high dozes as advised by a pharmacist or health provider.

How do they work?
EC pills work in various ways depending on the time in a woman’s menstrual cycle when unprotected sex took place and when the EC pills are taken. They may:
- Inhibit or delay an egg from being released from the ovary (ovulation).
- Prevent sperm and egg from uniting (fertilization).

Are they effective?
EC pills are highly effective in preventing pregnancy if taken correctly and within 120 hours of having unprotected sex.

EC pills should only be used in an emergency situation such as:
- A condom breaks during sex.
- A woman is forced to have sex or raped without a condom.
- A woman fails to use her regular contraceptive as required e.g. forgetting to take Everyday Pills for more than 3 days, or delaying to get the next injection by more than 2 weeks.
Are they safe?
All women can use EC pills safely and effectively, including women who cannot use hormonal contraceptives such as Everyday Pills and 3-month injection. Because of the short-term nature of their use, there are no medical conditions that make EC pills unsafe for any woman.

Advantages:
• Offer women a second chance at preventing pregnancy in case of an emergency.
• Reduce the need to seek out abortion in case a regular contraceptive is not used correctly or consistently.
• Can be used without tests and examinations.

Common side effects / limitations?
• Only prevent pregnancy from sex acts that took place 5 days (120 hrs) before taking the pills. Sex acts that take place after taking EC pills, even after a few hours, are not protected.
• Not as effective as regular contraceptives such as Everyday Pills and 3-month injections; EC pills are about 50 – 90% effective in preventing pregnancy depending on when the pills are taken.
• Changes in bleeding patterns e.g. slight irregular bleeding for 1-2 days after taking pills, or monthly bleeding starts earlier or later than expected.
• Mild short term side effects in the week after taking EC pills e.g. nausea, vomiting, headaches, fatigue, abdominal pain, breast tenderness, & dizziness.
• Do not protect from STIs including HIV/AIDS.

EC Pills DO NOT:
• Disrupt an existing pregnancy – they cannot cause an abortion.
• Harm the baby if taken by mistake early in the pregnancy.
• Cause birth defects if a pregnancy occurs after taking the pills.
• Promote sexual risk-taking.
• Make a woman infertile or cause delay in getting pregnant.
• Build up in a woman’s body - the pills dissolve and the hormones leave the body within a few days.
• Increase the risk of ectopic pregnancy.
IMPORTANT!
Condoms are the only CONTRACEPTIVES that can protect you from STIs, including HIV/AIDS. To avoid the risk of contracting STIs, protect yourself by using a condom every time you have sex.

Do not rely on another person’s positive or negative experience with their CONTRACEPTIVE to decide which method is best for you - everyone is different. What works for you may or may not work for someone else.

A health provider can help you to choose the best method for you based on your individual circumstances such as medical status (e.g. history of high blood pressure) and social lifestyle (e.g. smoking vs non-smoking).
DON’T TAKE CHANCES.
TAKE CONTROL!

Mnakatiana?
Mko ready kuwa mapero? Zi?
Basi jueni about the C-word

Contraceptives