

A collage of contraceptive methods. In the foreground, a blister pack of birth control pills is visible, containing rows of white, orange, and blue pills. To the left, a white condom is partially unrolled. In the background, a pink diaphragm is visible. The entire image has a soft, pastel color palette of pinks, purples, and blues.

# Contraception

# What is Contraception?

- Contraception is the intentional prevention of pregnancy during sexual intercourse. Birth control is the device and/or practice to decrease the risk of conceiving, or bearing, offspring. With the wide assortment of birth control options available, it is possible for a woman to use several different contraceptive methods at various stages throughout her fertile years.

# Nurses Role

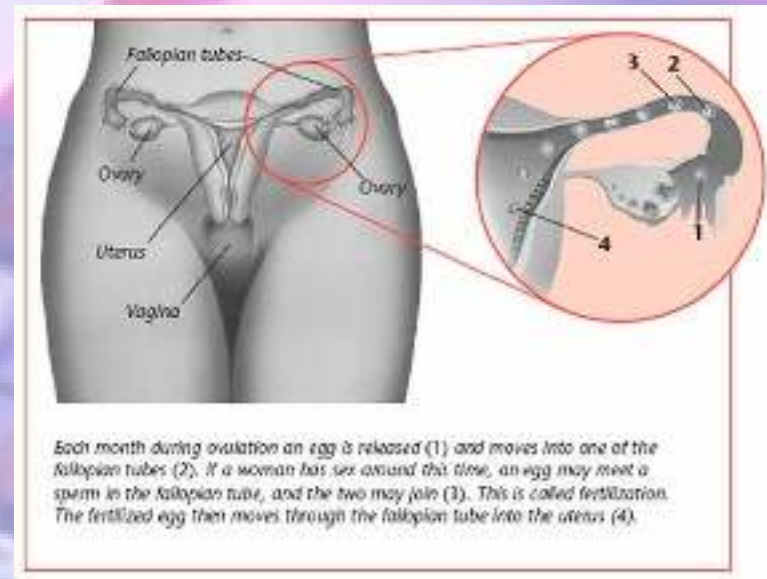
- Nurses interact with the woman to compare and contrast available options, reliability, relative cost, protection from sexually transmitted infections (STI's), the individual's comfort level, and partner's willingness to use a particular birth control method.

# Woman's Choices

- About one half of all pregnancies in the United States are unplanned. Most women can become pregnant from the time they are in their early teens until they are in their late 40s. Birth control can help couples postpone having a baby until the time is right for them—if ever. Some types of birth control also help protect against sexually transmitted diseases (STDs). Today, there are many choices of birth control for women and men.

# How Birth Control Works

- Block the sperm from reaching the egg
- Kill or damage sperm
- Keep eggs from being released each month
- Change the lining of the uterus so the fertilized egg does not attach to it
- Thicken the mucus in the cervix so sperm can not easily pass through it



# Choosing A Method

- How well the method works and the side effects
- How likely you are to use it according to the directions
- Your age and overall health
- How often you have sex
- Whether a prescription is needed
- Whether you want to have children later
- Whether it helps protect against STDs



# Special Needs Nursing Consideration

- Choosing a form of birth control is more complicated for women with special needs. Sometimes this has to do with a woman's reproductive stage—whether she is a teen, breastfeeding, or in perimenopause, for instance. Some women have chronic health problems that need to be considered. Women with disabilities also face challenges.

# Barrier Methods

- Barrier methods prevent the man's sperm from reaching the woman's egg. Types of barrier methods include:
  - Condoms (male and female)
  - Spermicides
  - Sponge
  - Diaphragm
  - Cervical cap
- Using a spermicide with a barrier method can help reduce the risk of pregnancy even more.



# Condoms

- Male Version
  - Made of Latex, Polyurethane, or Animal Skin
    - Latex condoms also protect against STDs, including HIV
- Female Version
  - Thin plastic pouch that lines the vagina
    - Can be difficult to insert
    - Use if cannot be sure partner will use a male condom
    - Can be inserted up to 8 hours before sex



# Spermicides

Spermicides often are used in suppositories, foam, cream, jelly, and film (thin sheets that contain spermicide) to kill sperm or make them inactive



# Sponge

The sponge is a doughnut-shaped device made of soft foam coated with spermicide. To use the sponge, it must be moistened with water. Once inserted in the vagina, it covers the cervix and blocks sperm from entering the uterus.



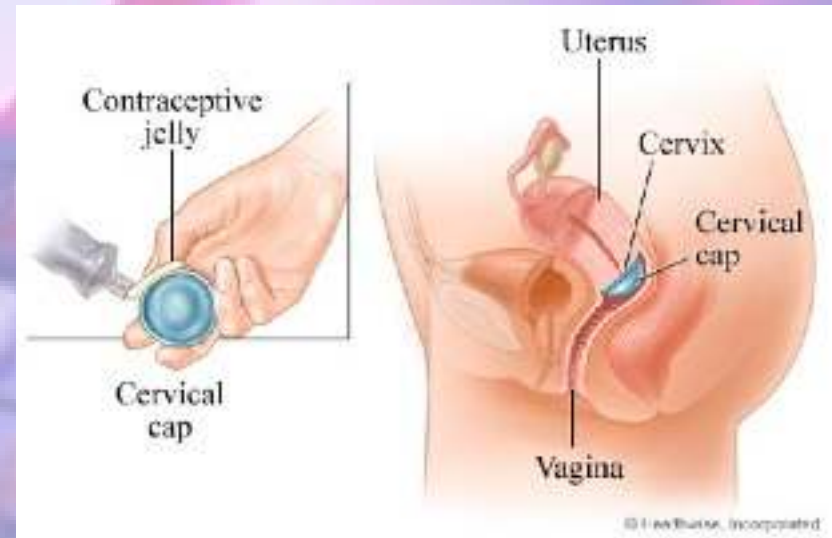
# Diaphragm

The diaphragm is a small, latex, dome-shaped device that fits inside the vagina and covers the cervix. It is used with spermicide. A diaphragm requires a prescription and needs to be fitted by a doctor.



# Cervical Cap

The cervical cap is a small, thin, dome-shaped device made of latex or plastic. It fits tightly over the cervix and stays in place by suction. A cervical cap must be fitted and prescribed by a doctor.



# Hormonal Methods

With hormonal birth control, a woman takes hormones similar to those her body makes naturally. In most cases, these hormones prevent ovulation and change the lining of the uterus. The hormones also cause the cervical mucus to thicken, which makes it hard for the sperm to get through the cervix to the uterus. Hormonal birth control comes in several forms, pill, skin patch, vaginal ring, injection, and implant.



# Birth Control Pills

There are many different brands of pills that use certain hormones or a combination of hormones. This variety allows a woman to find a pill that is right for her.



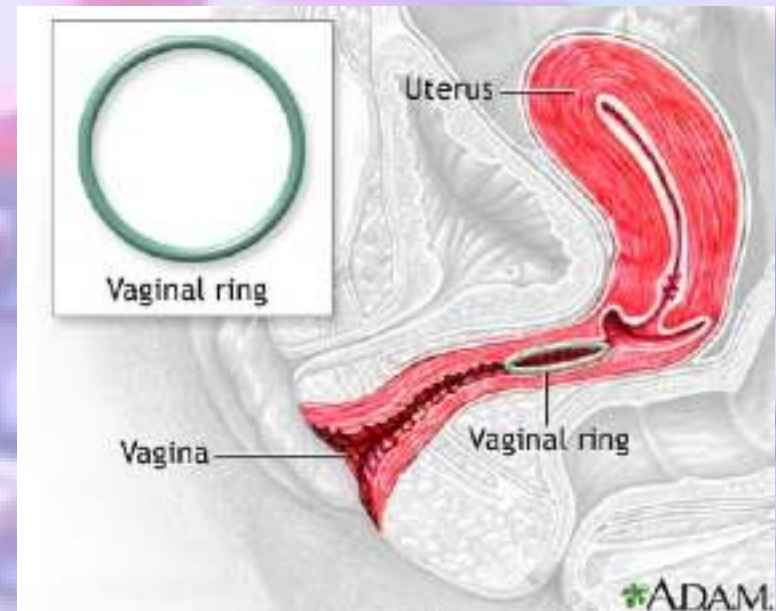
# Skin Patch

The contraceptive skin patch is a small (1.75 inch) adhesive patch that is worn on the skin to prevent pregnancy. With the patch, estrogen and progestin are absorbed through the skin into the bloodstream. The patch may offer many of the same benefits and risks as the combination birth control pill. Once a woman obtains a prescription for the patch, she does not need to visit her doctor to apply or remove it.



# Vaginal Ring

The vaginal ring is a flexible, plastic ring that is placed in the upper vagina. It releases both estrogen and progestin. The ring may have the same benefits and risks as those of the combination birth control pill.



# Injections

An injection or "shot" of depot medroxyprogesterone acetate (DMPA) provides protection against pregnancy for 3 months. It works the same way as other forms of hormonal birth control.



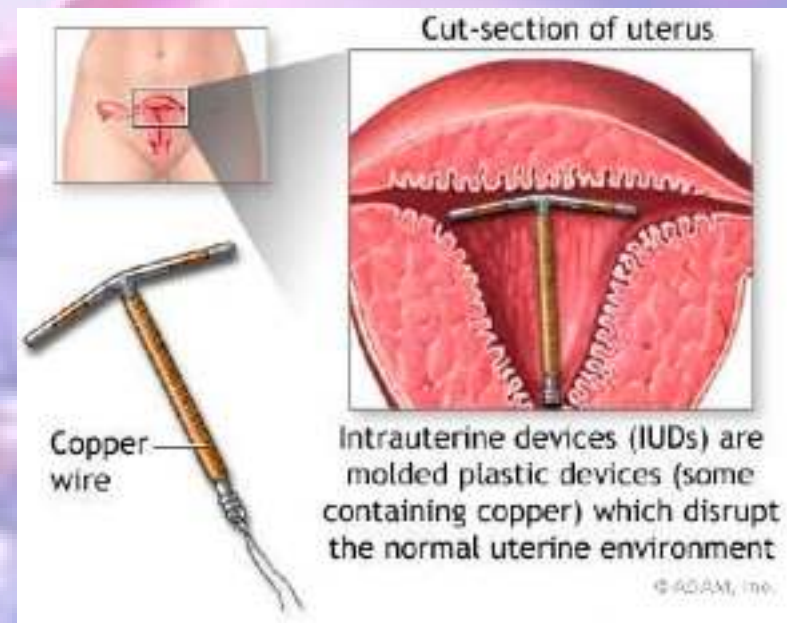
# Implant

A contraceptive implant is a single rod that is inserted under the skin of the upper arm. It protects against pregnancy for 3 years. The implant releases a progestin that works similar to other hormonal methods of birth control—it prevents ovulation.



# Intrauterine Device

The IUD is a small, T-shaped, plastic device that is inserted and left inside the uterus to prevent pregnancy. There are two types available in the United States: the hormonal IUD and the copper IUD. The IUD does not protect against STDs.



# Emergency Contraception

If a woman has sex without any type of birth control or if she thinks her method did not work (for instance, a condom slipped or broke), she may want to use emergency contraception. Emergency contraception reduces the risk that pregnancy will occur. There are two types of emergency contraception available in the United States: Plan B and the IUD.



# Case Study / Care Map

## The Sexually Active Adolescent Who Is Uncertain About Using Contraception

A sexually-active 15-year-old comes to your clinic with her grandmother.

During your social review you learn that she has a 13-month-old child, multiple partners and has never used contraception. When you inquire about her reasoning for not using contraception she says that she is concerned about her weight and doesn't want to get the symptoms that come with most of the methods.

Her grandmother wants her to stay in school. She would like you to prescribe an oral contraceptive but the granddaughter is uncertain.

# NANDA's

- **DECISIONAL CONFLICT** related to CONTRACEPTIVE ALTERNATIVES
- **FEAR** related to CONTRACEPTIVE METHOD SIDE EFFECTS
- **RISK FOR INFECTION** related to UNPROTECTED SEXUAL INTERCOURSE



# Outcomes

Planning is a collaborative effort among the woman, her sexual partner (when appropriate), the primary health care provider, **and the nurse.**

- Verbalize understanding about contraceptive methods
- Verbalize understanding of all information necessary to give informed consent
- State comfort and satisfaction with the chosen method
- Use the contraceptive method correctly and consistently
- Prevent unplanned pregnancy or plan a pregnancy



# Plan of Care & Interventions

- Unbiased client teaching is fundamental to initiating and maintaining any form of contraception.
- A care provider relationship based on trust is important for adherence by the client.
- To foster a safe environment for consultation, a private setting should be provided in which the client can feel free to be open.
- Distractions should be minimized, and samples of birth control devices for interactive teaching should be available.
- THE NURSE counters myths with facts, clarifies misinformation, and fills in gaps of knowledge.
- The ideal contraceptive should be safe, easily available, economical, acceptable, simple to use, and promptly reversible.

# Evaluation

- Patient was able to choose a birth control to suit her needs with the understanding of its side effects (good & bad).
- Patient able to verbalize understanding on how to use birth control safely and effectively.



# Women's Health & Pregnancy Community Resources



- **Planned parenthood - (517) 351-0550**
- **MSU's Olin Health Center Gynecology Clinic - (517) 355-4510**
- **Women, Infants and Children - (517) 887-4326**
- **Ingham County Health Department - (517) 887-4300**

# Test Questions

1. Which Contraception practice is BEST?

**A. The ideal contraceptive should be safe, easily available, economical, acceptable, simple to use, and promptly reversible.**

B. Morning After pill

C. Use it once remember

2. T or F

The pill, contraceptive patch, injection and the IUD all protect against STD's.

3. T or F

With a 97% effectiveness rate, the condom also protects against STD's.

4. T or F

The injection works by getting a shot in the butt daily for the whole time you are on it.

5. T or F

There are NEVER prescriptions needed for any contraception used.

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