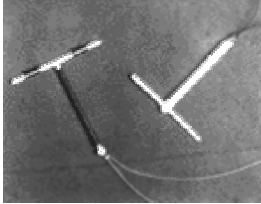




## If You Choose the IUD (Intrauterine Device)...



...your clinician will put a small plastic device in your uterus.

The IUD contains copper or hormones that:

- keep sperm from joining egg
- rarely, prevent fertilized egg from implanting in uterus

### 99.4–99.9% Effective

Not effective against sexually transmitted infections – use latex or female condoms to reduce the risk.

### Advantages of the IUD

- nothing to put in place before intercourse
- ParaGard® (copper IUD) may be left in place for up to 12 years, Mirena® (hormone IUD) for five years
- no pill to take daily
- the IUD with hormones may reduce menstrual cramps
- ability to become pregnant returns quickly when use is stopped

### Possible Disadvantages of the IUD

- increase in cramps and heavier and longer periods (copper IUDs)
- spotting between periods
- increased chance of tubal infection leading to infertility if inserted when a woman has a sexually transmitted infection
- rarely, wall of uterus is punctured during insertion
- rarely, insertion can cause infection
- pregnancies, which rarely occur, are more likely to be ectopic (in a fallopian tube)

### Cost

\$175–\$400/exam, insertion, and follow-up visit. Some family planning clinics charge according to income. Costs vary from community to community, based on regional and local expenses.

## If You Choose Prescription Barrier Methods...

... your clinician will fit you with a shallow latex cup — **diaphragm** —, a silicone cup shaped like a sailor's hat — **FemCap** —, or a silicone cup with an air valve — **Lea's Shield**. The clinician also will show you how to put spermicide into the **diaphragm, cap, or shield** and insert it in your vagina to keep sperm from joining egg.

### Effectiveness

84–94% — **diaphragm**

about 85% — **Lea's Shield**

about 86% — **FemCap** for women who have never been pregnant or given birth vaginally\*

about 71% — **FemCap** for women who have given birth vaginally\*

\* Effectiveness rates for FemCap are those for an earlier version of the device. Although no studies have been published yet, the manufacturers of FemCap report that the current device is likely to be more effective.

- not effective against sexually transmitted infections
- latex or female condoms can reduce risk of infection

### Advantages of Prescription Barrier Methods

- no major health concerns
- can last from six months up to several years

### Possible Disadvantages of Prescription Barrier Methods

- can be messy
- allergies to latex, silicone, or spermicide
- should not be used during vaginal bleeding or infection



### Diaphragm

- increased risk of bladder infection
- can only be left in place for up to 24 hours

### FemCap

- difficult for some women to use
- can only be left in place for up to 48 hours

### Lea's Shield

- difficult for some women to use
- may cause discomfort for some women or their partners
- can only be left in place for up to 48 hours

### Cost

\$15–\$75 for diaphragm, cap, or shield. Often costs less at family planning clinics.

\$50–\$200 for examination.

\$8–\$17 for supplies of spermicide jelly or cream.

Some health centers charge according to income. Costs vary from community to community, based on regional and local expenses.

**Caution** — Prescription methods like the diaphragm, FemCap, Lea's Shield, and the Pill are intended for each woman's use. Do not share them with friends. The **diaphragm** should be checked to see if it's the right size after a change of 20 percent of your weight, childbirth, or abortion. **FemCap** is prescribed based on whether a woman has been pregnant — some women may need a new FemCap following pregnancy. All prescription barrier methods should be checked for weak spots or holes by being held up to a light or filled with water and checked for leaks.

**Using the spermicide nonoxynol-9** many times a day, by people at risk for HIV, or for anal sex, may irritate tissue and increase the risk of HIV and other sexually transmitted infections.