

Contraception options after having a baby

Maternity Service

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Information for Patients

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Introduction

For many women the last thing on their minds is contraception after having a baby, 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, but could also increase the risk of your baby not growing well in pregnancy and/or being born too early. Many new mothers experience unplanned pregnancy in the year after having a baby, so we have put together this information leaflet to help you understand your choices if you don't want to have another baby straight away. If you are interested in a specific method please ask your midwife or doctor/consultant for further information.

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 become pregnant any time from 3 weeks after birth, and you could get pregnant before your periods re-start.

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

Does breastfeeding stop me getting pregnant?

Breastfeeding is not a reliable method of contraception.

However, 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**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

What are the options for contraception?

There are several different options. If you have certain medical conditions they may not all be suitable so please ask your midwife or doctor who will be able to discuss which option is best for you. You can also contact your GP who may be able to offer this service or they can refer you to your local sexual health clinic.

The most effective methods of preventing unplanned pregnancy are LARC – Long-acting reversible contraception.

These include:

- Implant
- Progestogen injection (Depo)
- IUS (also known as the hormonal coil or the Mirena® 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 (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 that 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 and 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?

- Immediately after having your baby
- You can let your midwife know and it can be inserted before discharge, by the specialist

Injection – Depo Provera

The injection contains progestogen, a hormone that stops your ovaries from releasing eggs. It also thickens your cervical mucus which 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"> • Immediately after having your baby

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

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

Advantages	Disadvantages	When can I start?
<ul style="list-style-type: none"> • >99% effective and suitable for breast feeding women • Lasts for up to 5 years - "fit it and forget it" • Can be inserted at the time of a planned caesarean section • Extremely 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 caesarean section • Can be fitted immediately after delivery or 6 weeks later - this will be discussed by your midwife or doctor before having your baby.

IUD (Intrauterine Device) or copper coil

A small "T-shaped" device that is placed in the womb, and lasts for 5 to 10 years, depending on the device. The IUD works by slowly releasing very small amounts of copper into your womb, which is toxic to sperm. It is usually inserted via the vagina at least 4 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 4 weeks after birth (although it can sometimes be inserted within 48 hours of the birth).</p> <p>Or it can be fitted at caesarean section</p>

Progesterone only pills (minipill)

These pills contain 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 and stop sperm reaching the egg and
- 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"> Immediately after having your baby

Combined hormonal contraception pills

These methods contain 2 hormones, oestrogen and progestogen, that prevent your ovaries from releasing an egg. Usually this 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	Disadvantages	When can I start?
<ul style="list-style-type: none"> • 91% effective • Shorter, lighter, and less painful period • Reversible after stopping 	<ul style="list-style-type: none"> • May have irregular bleeding, usually improves over time • Must use the method correctly • Some women cannot take oestrogen for health reasons 	<ul style="list-style-type: none"> • If you are breast feeding, you CANNOT use this contraception until 6 weeks after you have had your baby • 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 prevent 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. You should speak to your doctor as soon as possible so 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 are at least as effective 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 (not if done at same time of caesarean section) 	<ul style="list-style-type: none"> Can be done at time of caesarean section but failure rates are higher if 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 done under local anaesthetic. It can be done in a community clinic. To arrange this, you should ask your GP for a referral to an appropriate service. Male sterilization is more effective than female sterilisation and 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.

Contraception is available from your GP or local Family Planning Clinic (see contact details 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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