

**what are
condoms?**

**what if
something
goes
wrong?**

**ask brook about
contraception**

**how does
the pill
work?**

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ask brook about contraception

Using contraception every time you have sex is the safest way to prevent an unwanted pregnancy and sexually transmitted infections (STIs).

But with so many different types of contraception available, it's not always easy to know which one is the right one for you.

You might already have used some types of contraception. You might have heard of other types, but aren't really sure what they are, how they work or where to get them from.

By reading this booklet, you'll have a better understanding of the different types of contraceptives that are available, their advantages and disadvantages, and whether they're right for you...

First up...

Sex can be a lot of fun, but it's even more fun when you're not worrying about unplanned pregnancy or STIs.

Whether you're in a long term relationship or you've just met someone new, it's always a good idea to talk about contraception and explore all the possibilities so that you're both in control as early as possible.

Nobody wants to think about the risks of unprotected sex, but if you really want to relax and get the most out of sex, it's a good idea to give contraception some thought...

Did you know?

A man's penis discharges a liquid known as precum as soon as he is aroused. Precum contains sperm, so by withdrawing the penis just before the man comes, you're still running the risk of both pregnancy and STIs.

Definitions

There are a number of words and phrases that we use in this booklet which might be helpful for us to explain upfront.

Everyone has a different word for their genitals (some people call them 'private parts') and it would be a pretty long booklet if we tried to put them all in. Throughout all our booklets, we use the standard terms – penis, testicles and vagina. We also use the term anus for the opening in your bottom.

Ovulation – releasing an egg from the ovary

Vaginal sex – the penis entering the vagina

Anal sex – the penis entering the anus

Oral sex – licking, kissing or sucking the genitals

Genital to genital contact – any contact where genitals touch each other, with skin touching skin

Straight sex – sex between a man and a woman

Gay sex – sex between two people of the same sex.

We've tried to write this booklet so it makes sense whether you are male or female and having gay or straight sex. Whether you are putting the condom on yourself, on another person, or having it put on you, we hope the advice here is easy to understand.

If you read anything in this booklet that doesn't make sense, or if you have any questions, do ask for advice from someone you trust – you can always contact Ask Brook on 0808 802 1234.

Contraceptives – what are the choices?

There are more
choices of
contraception now
than ever before –
which is why we have
written this booklet to
help you!

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Condoms

Condoms stop sperm from entering a woman's vagina: so stop pregnancy.

Condoms are number one for protection against STIs and 98% effective in preventing pregnancy... if used correctly and every time you have sex!

They're also simple to use and easy to get a hold of. That's why they're at the top of our list.

What is it?

A condom is a thin rubber balloon that fits over the penis when it's erect. It stops sperm from entering the vagina. That's how it prevents pregnancy. It's such a simple idea, and very effective. Because STIs are passed on through fluids mixing during vaginal, oral or anal sex, condoms also protect against them (in fact condoms and female condoms are the only kind of contraception that do).

How do I use a condom?

Condom use is really easy and fun once you know how.

You put the condom over the penis as soon as it's erect, long before it goes anywhere near your partner's mouth, vagina or anus.

You'll normally find instructions in the packet and once you've tried it, you'll find it easy.

You can also check out the Ask Brook about condoms booklet for a more detailed explanation of how to put one on – and take one off! It explains all the different kinds of condoms and lots of other useful stuff you probably never knew about condoms. Read it and become a condom expert!

Advantages?

- They are easy to use
- They protect you against pregnancy and STIs
- They are widely available – you can get them free from Brook Centres (for under 25s), sexual health clinics and young people's services or you can buy them from a number of places including pharmacies, local shops, on-line and vending machines in bars, clubs and public toilets.

Disadvantages?

- Some people say that it reduces pleasurable sensations during sex
- There is a risk of the condom falling off if it isn't rolled on properly or is the wrong size or shape.

Many people make putting on a condom part of the fun of sex. You'll both feel more relaxed knowing you're protected from pregnancy and STIs – and that's enough to make sex better in itself!

Did you know?

For extra protection, you can use a condom at the same time as other kinds of contraception. It's the ultimate in peace of mind. This is called the Double Dutch method!

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Female condoms

What are they?

Female condoms are like male condoms except that they fit inside the vagina instead of covering the penis. For that reason they're wider, and they're made of polyurethane instead of rubber. They have the same advantages and disadvantages as the male condom. They are 95% effective in preventing pregnancy if used correctly and every time you have sex.

Where do I get them from?

Male and female condoms are available free of charge from Brook Centres (for under 25s), contraceptive clinics, young people's services, and genitourinary medicine (GUM) clinic. Or you can buy them from pharmacies, supermarkets and many local shops. You can also buy them on-line and from some vending machines.

Advantages?

- It protects you against pregnancy and STIs
- Can be put in any time before sex
- You can use oil-based products, such as baby oil or Vaseline with a female condom.

Disadvantages?

- If you're not careful the man's penis can enter between the condom and the vagina so you must make sure the open end of the condom stays outside the vagina.

Diaphragms and caps

What are they?

Diaphragms are dome-shaped rubber devices that fit into the vagina, cervical caps are smaller and you need to put them directly onto your cervix. Both form a barrier preventing sperm from reaching an egg and should be used with spermicide (a chemical that kills sperm). Used correctly they are 92-96% effective.

Advantages?

- You can put it in any time before sex so that it does not interrupt the moment – although you'll need to use extra spermicide if you put it in more than three hours before having sex
- It's not affected by medicines
- You and your partner can't feel it when you have sex
- Your fertility should return to normal after you have stopped using it
- It doesn't disturb your menstrual cycle.

Disadvantages?

- First fitting must be undertaken by a doctor or nurse to make sure it's the right size
- It doesn't protect you against STIs
- It can take a while to become confident in using it.

Where can I get them from?

Diaphragms or caps must be fitted by a trained doctor or nurse on the first occasion. You can go to a contraceptive clinic, young people's service, your family doctor (GP) or a Brook Centre.

Pills, rings and patches

The following methods all rely on you using them either every day, every week or every month.

They need to be taken or used properly according to instructions so that they can be effective.

Used correctly they are 99% effective.

How do they work?

They work by releasing either one or two hormones into the body to stop ovulation (an egg being released). They thicken the cervical mucus to prevent sperm reaching an egg and thin the lining of the womb to stop a fertilised egg from implanting – so they prevent pregnancy!

Did you know?

There are actually two kinds of contraceptive pill – the *combined oral contraceptive pill* and the *progestogen-only pill*.

The pill

Combined oral contraceptive pill

What is it?

It's a small tablet that contains two kinds of hormones: estrogen and progestogen, which stop ovulation. So, without an egg for the sperm to fertilise – there's no pregnancy.

A woman takes a tablet every day, usually for 21 days followed by a seven day break. Some tablets are taken for 28 days with no break - but they both work to prevent against pregnancy.

Advantages?

- It doesn't interrupt sex
- It's thought to protect you against cancer of the ovary and womb
- Your periods may become lighter and you're less likely to suffer from period pain or pre-menstrual tension (PMT)
- It may improve your skin if you suffer from acne
- It may protect you against pelvic inflammatory disease.

Disadvantages?

- It doesn't protect you against STIs
- You need to remember to take it every day
- It can be affected by some medication
- You may get temporary side-effects at first, such as headaches, nausea, breast tenderness and mood changes.

Progestogen-only pill

What is it?

Also known as the 'mini-pill', it's a small tablet that only contains one type of hormone: progestogen. Some women can't take the combined pill because of the estrogen, so the progestogen-only pill is more suitable for them.

Advantages?

- It gives round the clock protection
- It doesn't interrupt sex
- It can be taken by some women who can't use the combined pill
- It can be used when breastfeeding.

Disadvantages?

- You normally need to ensure that you take it at the same time every day for it to work properly
- It doesn't protect against STIs
- It makes some women's periods irregular.

Where do I get them from?

Both the combined oral contraception pill and the progestogen-only pill are available free of charge from contraceptive clinics, young people's services, through your GP and at Brook Centres.

Contraceptive vaginal ring

What is it?

The vaginal ring is a soft, plastic ring that is placed in the vagina. It works by releasing two types of hormones, estrogen and progesterone, that stop ovulation.

Advantages?

- You replace it every month – so you don't have to think about it every day
- It's easy to put in and take out
- Bleeding during periods may become lighter, shorter and less painful
- It may help reduce pre-menstrual tension (PMT).

Disadvantages

- Some women may not like putting it in or taking it out
- You may get some temporary side effects, like vaginal discharge, headaches and nausea
- It doesn't protect you from STIs.

Where can I get it from?

The contraceptive vaginal ring is a new method of contraception and is not yet widely available. You can get it from some contraceptive or sexual health clinics or your GP.

Contraceptive patch (also known as 'Evra')

What is it?

It's a small patch which is applied to the skin like a sticky plaster. It works by releasing the same hormones as the combined pill. You can wear it even when you're swimming, having a bath or exercising.

Advantages?

- It doesn't interrupt sex
- You don't have to think about it every day – you replace it once a week
- It can make period pain or pre-menstrual tension (PMT) less likely
- It's easy to use.

Disadvantages?

- It doesn't protect against STIs
- It can temporarily cause headaches and skin problems
- It contains the same hormones as the combined pill, which in a small number of women can cause serious side-effects such as blood clots and high blood pressure.

Where do I get them from?

Patches are available free of charge from contraceptive clinics, young people's services, though your GP and at Brook Centres.

Long-acting reversible contraception (LARC)

There are four types of long-acting reversible contraception (LARC). This means that the methods don't rely on you having to remember to take them. But they do require a professional to administer them.

They are all very effective - in fact over 99%...

How do they work?

All of the methods overleaf except the IUD (which doesn't have any hormones), work by releasing a hormone into the body. This stops ovulation and thickens the mucus in the cervix to prevent the sperm reaching the egg. They also thin the lining of the womb to prevent an egg from implanting.

Contraceptive implant

What is it?

Implants are small, flexible rods (about 40mm long). A single implant is inserted under the skin of the upper arm to protect against becoming pregnant for up to three years. It releases the hormone progestogen.

Advantages?

- It doesn't interrupt sex
- It works for up to three years
- Fertility returns immediately after the implant is removed.

Disadvantages?

- It doesn't protect against STIs
- It can make your periods regular, heavier or stop them altogether
- It can temporarily cause headaches and skin problems.

Where can I get it from?

Implants can only be inserted by qualified doctors and nurses. They're available free of charge at contraceptive clinics, young people's services, through your GP and at Brook Centres.

Contraceptive injections

What are they?

They are progestogen-based contraceptive injections that last for either eight weeks (Noristerat) or 12 weeks (Depo-Provera). The Depo-Provera injection is more commonly used in the UK.

Advantages?

- It doesn't interrupt sex
- You don't have to remember to take a pill
- It may protect against cancer of the womb
- It may reduce heavy periods
- It can make period pain or pre-menstrual tension (PMT) less likely.

Disadvantages?

- It doesn't protect against STIs
- It can make your periods longer, irregular or stop them altogether
- It could lead to some weight gain
- It can take a year or more for regular periods to return after you've stopped using the injection
- Depo-Provera is a brand of injection that works by lowering levels of the female hormone estrogen and this can cause slight thinning of the bones by reducing bone mineral density.

Where can I get it from?

Contraception injections are given only by a qualified doctor or nurse. They're available free of charge at contraceptive clinics, young people's services, through your GP and at Brook Centres.

Intrauterine system (IUS or the 'Mirena')

What is it?

This is a small plastic T-shaped device that is fitted into the womb. It slowly releases progesterone to protect against pregnancy for up to five years. It may stop ovulation.

Advantages?

- It doesn't interrupt sex
- It works for up to five years
- Your periods usually become lighter and less painful - they may stop altogether after a year
- Your normal fertility returns after the IUS has been removed
- It's not affected by other medicines

Disadvantages?

- It doesn't protect you against STIs
- If it fails, there's a small increased risk that a pregnancy will develop in the fallopian tube (known as an ectopic pregnancy)
- It may cause you to have temporary side effects like headaches, tender breasts or getting spots.

Where can I get it from?

The IUS can only be fitted by a trained doctor or nurse. It usually takes about 15-20 minutes and may hurt a bit although this shouldn't last for long and you may be given painkillers or a local anesthetic gel to help. You can go to a contraceptive clinic, young people's service, or a Brook Centre. They can also be fitted in some GPs, though not all. Once it is fitted you will need to go back for a check up three to six weeks later.

Intrauterine device (IUD or 'the coil')

What is it?

The intrauterine device is a small device made from plastic and copper – there are a range of different types available. When one is fitted in the uterus sperm react to the copper, preventing them from reaching an egg. The IUD may also stop an egg settling in the womb. It is the only LARC method that doesn't have any hormones in it.

What are the advantages?

- It doesn't interrupt sex
- It works straightaway
- It lasts for 3-10 years depending on the type of IUD fitted
- It can easily be removed by a professional.

What are the disadvantages?

- It doesn't protect against STIs
- It can make your periods heavier, more painful or last longer
- If it fails, there is a risk that a pregnancy will develop in the fallopian tube (known as an ectopic pregnancy) but this is very rare.

Where can I get it from?

The IUD can only be fitted by a trained doctor or nurse. It usually takes about 15-20 minutes and may hurt a bit although this shouldn't last for long and you may be given painkillers or a local anesthetic gel to help. You can go to a contraceptive clinic, young people's service, or a Brook Centre. They can also be fitted in some GPs, though not all.

Natural family planning

You should ideally be taught this by a specialist teacher so you can use it effectively.

What is it?

Natural family planning is when you work out when a woman is in the most fertile phase of her monthly cycle, and avoiding unprotected sex during this time.

Advantages?

- There are no side-effects
- It doesn't interrupt sex
- You can use it to plan or avoid becoming pregnant.

Disadvantages?

- It doesn't protect you against STIs
- You need to avoid sex, or use another method of contraception (such as condoms) if you have sex during fertile times
- It requires discipline and commitment from both partners, and a willingness to keep daily records.

Where can I find out more about contraception?

- You can find out more about contraception and discuss all your options at Book Centres, contraceptive clinics, young people's services or at your local GP surgery (or you can go to a different GP if you prefer).
- Why not go with your girlfriend/boyfriend? That way you'll both get the facts straight right from the start – so talking about it afterwards will be a lot easier.
- Or maybe you'd rather bring someone else – a friend for a bit of support. That's fine too.

Remember...

Not all types of contraception are suitable for all people. Sometimes the doctor or nurse will ask a few questions about your medical and family history to help you decide which method is most suitable for you.

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talking about contraception

Whether you're in a long-term relationship or you've met someone new, you'll really enjoy sex fully when you know you're safe from unplanned pregnancy and STIs.

“Who’s responsible for contraception?”

You're both responsible! The idea that it's just the woman – or just the man – is old fashioned, and simply wrong! But it's both of you, which means you're going to have to talk about it with your partner.

“How should I bring up the subject?”

Only you can choose the right moment and words to get a conversation going. Just remember – your partner probably finds it awkward too, and may be relieved that you got the ball rolling.

In any case, an honest chat and agreement about what to use will take away your worries – and theirs.

It may help you to look at this booklet together and go through all the different options to work out which is the best one for both of you.

Remember, by talking about contraception you're showing you care about the other person enough to want to protect them and yourself.

“When should we start to talk?”

Start now, start anytime – just don't wait to start until you're about to have sex. That's always going to be an awkward moment, so you need to be prepared before then.

“But I'm not planning to have sex in the near future”

It doesn't matter. Whoever you go to see will be impressed that you've decided to learn more. Finding out more about contraception is the smart thing to do. Sex or no sex, it's better to learn about the choices you have, so when the time comes, you know what's best for you and why.

excuses, excuses...

Your handy guide to the contraception-dodging excuses that put you both at risk.

“But putting on a condom stops me feeling sexy”

Using a condom can be as sexy as you want it to be. You can roll on a condom as part of foreplay. Have fun with them, they're free!

“I haven't got any condoms – it'll be alright just this once”

It only takes once to get pregnant or to pass on an STI.

So if you're out of condoms – sex can wait.

It can only make sex more relaxed and rewarding when it finally happens.

“I can't use contraceptives because of the side effects”

You don't need to put up with unpleasant side-effects. If one type of contraception doesn't suit you, switch to another type. There will always be at least one method that will be just right for you. So visit your contraceptive clinic, Brook Centre, young people's service or GP and discuss an alternative method.

Need to know

Emergency contraception is not meant to be used as your regular form of contraception. The emergency pill and intrauterine device are simply there for you if all else fails.

if it all goes wrong...

Sometimes accidents happen. If something goes wrong, like the condom breaks or you have unprotected sex, don't cross your fingers and hope for the best.

Did you know?

You can find out more about emergency contraception in Brook's leaflet:

Ask Brook about emergency contraception.

If you're female and you've had unprotected sex, or think the contraception you use has failed, here's what you should do:

- Firstly – don't panic. You still have options to avoid pregnancy
- Act quickly, as you have only a short period of time to get it sorted – just three days to get the emergency contraceptive pill or five days (or up to five days after the earliest time you could have ovulated) for an intrauterine device to be fitted
- So seek help straightaway – the earlier the better
- You can get free emergency contraception from your GP, nearest Brook Centre or your local contraceptive or sexual health clinic (you can get this even if you're under 16)
- While you're there you should also get tested for STIs (this goes for guys as well as girls)
- If you're 16 or over you can also buy the emergency contraceptive pill at a pharmacy
- If you've missed these deadlines and missed your period it's really important to seek help as soon as possible to discuss your options.

Where to get more help and advice...

Now you've read this booklet, if you have more questions, just **Ask Brook**.

Ask Brook is for all young people under 25 anywhere in the UK.

Did you know?

Brook has a network of centres around the UK offering free and confidential sexual health advice and contraception to all young people under the age of 25. To find your nearest Brook Centre visit our website: www.brook.org.uk or contact the **Ask Brook** information service.

Ask Brook offers a confidential helpline, secure online enquiry service and text information service. **Ask Brook** is available free and in confidence to all young people on **0808 802 1234** or via **Ask Brook** on Brook's website, www.brook.org.uk

The **Ask Brook** helpline is free from all telephones, including mobiles.

Anyone under 25 can ask us anything about sexual health, including information, support and signposting about relationships, contraception, abortion, body issues around sexual health, STIs and sexuality. Tell us what's worrying you and we won't laugh, tut or tell.

For information on key sexual health issues any time of day or night call our 24-hour information line **020 7950 7700**. You will hear a recorded message and will then be asked to choose the topic you want more information on from a list of options.

Other organisations you can contact are:

- **fpa's** helpline. Open from 9am until 6pm Monday to Friday on 0845 122 8690.
- **Sexwise** (for under 19s only). Open 7am to midnight every day on 0800 28 29 30.
- **NHS Direct** (for all ages). For medical advice 24 hours a day on 0845 46 47 (local call rate).

Thank you to **fpa** for checking the clinical and factual accuracy of this booklet. *June 2009*

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