

## **BARRIER METHODS FOR WOMEN**

A method of contraception is to cover the opening of the uterus with a synthetic cup filled with spermicide. The diaphragm, cervical cap, contraceptive sponge and spermicides are the methods currently in use. They work in two (2) ways:

- By providing a physical barrier to semen; and
- By killing sperm before they can enter the uterus to fertilise an egg.

After intercourse, the diaphragm, cap, or sponge must be left in place for six (6) hours.

The reliability of these methods varies widely, even among women who receive good education about their use and use them consistently. For couples who have intercourse frequently, these methods may be less effective. Women who have intercourse infrequently, or whose fertility is low because of age, will find barrier methods reasonably reliable. Women who use these methods of contraception, however, are at higher risk of vaginal infection, urinary tract infection, and possibly toxic shock syndrome. For this reason, some of these should not be left in place for more than 24 to 48 hours, depending on the method; and, neither the cap nor sponge should be used during menstruation.

### **Diaphragm**

The diaphragm is a soft rubber or latex cup that must be fitted for size by your health provider. The device must be of the right size to work properly. Each woman must be fitted for her own diaphragm by a trained health provider. About a tablespoon of spermicide should be spread inside the dome and around the edges of the cap. The diaphragm is then inserted into the vagina so that it covers the cervix. It is held securely in place behind the pubic bone and rear walls of the vagina by the spring in the rim of the diaphragm. If intercourse is repeated while the diaphragm is in place, contraceptive cream or jelly should be applied each time. This is inserted with a special applicator while the diaphragm is still in place.

Each time the diaphragm is used you should check it for holes or tears. A woman must be refitted after childbirth, miscarriage, abortion, or after any weight loss or gain of 10 pounds or more. Also with regular use you should have the size rechecked annually. A diaphragm may need to be replaced every two (2) years.

Consider this method of contraception only if you are committed to following the procedures for using it properly; proper placement is essential.

### **How Effective is it?**

As commonly used, the diaphragm has an 84 percent success rate in preventing pregnancy when used with spermicidal, i.e. if 100 women use this method for one (1) year, approximately 84 of every 100 women will not get pregnant.

## **Cervical Cap**

The cervical cap is a soft, deep, latex or rubber cup that snugly covers the cervix. Your health provider will identify the size to fit you. The cap, held in place by suction, is partially filled with contraceptive jelly or cream and then inserted so that it covers the cervix. If intercourse is repeated, it is not necessary to reapply spermicide, but you should check to make sure that the cap is still in place. The cervical cap is as effective as a diaphragm in women who have not had children, but the higher failure rates applies to women who have given birth.

Some women cannot be fitted for a cervical cap or cannot easily reach their cervix and must choose a different form of contraception. Each time you use the cap, it should be checked for cracks or tears. Replace it if it shows signs of deterioration. As with the diaphragm, with regular use you should have the size and fit rechecked annually or if you gain or lose ten (10) or more pounds in weight.

### **How Effective is it?**

Among users who have not given birth, as commonly used, 84 of every 100 women using the cap with spermicide over the first year will not become pregnant.

## **Frequently Asked Questions**

For other information and frequently asked questions and answers about the Cervical cap please refer to

**(Pages 237-239)**

<http://info.k4health.org/globalhandbook/handbook.pdf>

## **Female Condoms**

The female condom is a thin plastic sheath with two (2) soft rings at each end. One (1) ring fits over the cervix, acting as an anchor; the larger open ring stays outside the vagina, covering the labia during intercourse.

These can be obtained in some pharmacies. Because the condom is not made of latex, it will not deteriorate when used with oil-based lubricants. It can be inserted up to eight (8) hours before intercourse but should be removed immediately after. Some women find the outer ring causes discomfort during use. Male and female condoms should not be used at the same time.

### **How Effective is it?**

The Female Condom is 79 percent effective. This means that 79 of every 100 women using female condoms over the first year will not become pregnant.

### **Frequently Asked Questions**

For other information and frequently asked questions and answers about the Female Condom please refer to

(Pages 211-220)

<http://info.k4health.org/globalhandbook/handbook.pdf>