

BIRTH CONTROL METHOD COMPARISON CHART

Method	Percentage effectiveness at preventing pregnancy	Protects against STDs/STIs?	Advantages	Disadvantages	Availability	Notes
Abstinence	100%	Yes	<ul style="list-style-type: none"> Highly effective No side effects, as with other methods No cost 	<ul style="list-style-type: none"> May be difficult to abstain from all sexual activity for extended periods of time 		
Male latex condom	86%-95% Can increase to 98% by using with a contraceptive jelly	Yes	<ul style="list-style-type: none"> Available over the counter (OTC) Comes in an easy-to-carry packet Helps prevent STD transmission 	<ul style="list-style-type: none"> Decreases spontaneity May break during use, especially if it is used improperly possible latex allergies 	OTC, no prescription	<ul style="list-style-type: none"> Actively involves the male partner in contraception Check latex allergies Use water-based lubricants
Female condom	An estimated 74%-95% effective	Yes	<ul style="list-style-type: none"> Female-controlled More comfortable to men, less decrease in sensation than with the male condom Offers greater protection (covers both internal and external genitalia) More convenient (can be inserted before sex) Stronger (polyurethane is 40% stronger than latex) 	<ul style="list-style-type: none"> Not aesthetically pleasing Difficulties in insertion/removal Not easy to find in drug-stores or other common sources of condoms 	OTC, no prescription	<ul style="list-style-type: none"> Available online Should not be used together with a male condom
Sponge	72%-91%	No	Immediate and continuous protection for 24 hours	<ul style="list-style-type: none"> May be difficult for some women to insert or remove May cause vaginal irritation. May make sex too messy or too dry. 	OTC, no prescription	Using a water-based lubricant may help dryness.

BIRTH CONTROL METHOD COMPARISON CHART (CONTINUED)

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Vaginal Spermicide (used alone)	70%-80%	No	<ul style="list-style-type: none"> • Easy to insert • Enhances vaginal lubrication 	<ul style="list-style-type: none"> • Must be inserted before each act of intercourse • May leak from vagina 	OTC, no prescription	<ul style="list-style-type: none"> • Follow package directions for insertion time, which may vary from 15 minutes to 8 hours before intercourse. • May be a foam, cream, suppository, or jelly
Diaphragm with spermicide	82%-94%	No	<ul style="list-style-type: none"> • Can be carried in pocket or purse • Can be used while breastfeeding • Can't be felt by you or your partner • Has no effect on natural hormones • Immediately effective. • Can be inserted hours ahead of time 	<ul style="list-style-type: none"> • Requires fitting and periodic refitting • Requires insertion of additional spermicide before each sex act or after 2 hours have passed 	Prescription	
Cervical cap with spermicide	80%-96%	No	<ul style="list-style-type: none"> • Smaller version of the diaphragm • Can remain in place for 48 hours • Few side effects • Reusable and relatively inexpensive • Requires less spermicide than a diaphragm • Rarely hinders the sexual experience 	<ul style="list-style-type: none"> • Requires consistent use • Spermicide may be messy • May need to be resized • May cause toxic shock syndrome • May be difficult to insert or remove • May produce an allergic reaction 	Prescription	

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Method	Percentage effectiveness at preventing pregnancy	Protects against STDs/ STIs?	Advantages	Disadvantages	Availability	Notes
Oral contraceptives (Pill)	95%-99%	No	<ul style="list-style-type: none"> • Very effective against pregnancy if used correctly • Makes menstrual periods more regular and lighter • Decreases menstrual cramps and acne • Does not interfere with spontaneity 	<ul style="list-style-type: none"> • Cost • Must be taken every day at the same time • Can't be used by women with certain medical problems or by women taking certain medications • Can occasionally cause side effects such as nausea, increased appetite, headaches, and, very rarely, blood clots 	Prescription	Using a water-based lubricant may help dryness.
Depo-Provera	99%	No	<ul style="list-style-type: none"> • Convenient—one injection prevents pregnancy for 11 – 13 weeks • Birth control effects begin as soon as first injection • Is reversible (most women can get pregnant within 12-18 months of last injection) • Can be used while breastfeeding 	<ul style="list-style-type: none"> • May cause the following adverse effects: irregular bleeding; amenorrhea; weight gain; headache; nervousness; stomach pain; dizziness; weakness; depression; decreased libido • Ovulation may not recur for a year after injection 	Prescription	<ul style="list-style-type: none"> • Many women who experience side effects during the first few months of use report that these decrease over time • Can be used in patients with sickle cell disease • May cause significant bone mineral density loss
Vaginal ring	99%	No	<ul style="list-style-type: none"> • Easy to use • Can be worn for three weeks • Effects fertility one month at a time • Does not interfere with spontaneity 	Increased risk of heart attack and stroke.	Prescription	Must be taken out and replaced monthly

BIRTH CONTROL METHOD COMPARISON CHART (CONTINUED)

Method	Percentage effectiveness at preventing pregnancy	Protects against STDs/STIs?	Advantages	Disadvantages	Availability	Additional notes
IUD	95%	No	<ul style="list-style-type: none"> • Nothing to put in place before intercourse • Some do not change hormone levels • Some may reduce period cramps and make your period lighter. For some women, periods stop altogether. • Can be used while breast-feeding • The ability to become pregnant returns quickly once IUD is removed 	<ul style="list-style-type: none"> • Cost • Some IUDs can cause hormonal side effects similar to those caused by oral contraceptives, such as breast tenderness, mood swings, and headaches 	Prescription	Must be inserted and removed by a clinician
Sterilization	99%	No	<ul style="list-style-type: none"> • Highly effective • Long lasting contraceptive solution 	<ul style="list-style-type: none"> • Usually permanent • Reversal procedures are expensive and complicated 	Surgical procedure	<ul style="list-style-type: none"> • Male: tying off or removing portion of vas deferens (vasectomy) • Female: tying off or removing portion or all of the uterine tubes
Contraceptive patch	99%	No	<ul style="list-style-type: none"> • Easy to use • Small • Stays on 	<ul style="list-style-type: none"> • Not effective on all women • Skin reactions 	Prescription	Must be replaced

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Method	Percentage effectiveness at preventing pregnancy	Protects against STDs/ STIs?	Advantages	Disadvantages	Availability	Additional notes
Emergency contraception ("Morning after pill" or Plan B)	89%	No	<ul style="list-style-type: none"> Reduces the risk of pregnancy by 89 percent when started within 72 hours after unprotected intercourse. Available over the counter to women 18 and older 	<ul style="list-style-type: none"> Must be taken as soon as possible after unprotected intercourse. Possible side effects, including nausea, vomiting, and irregular bleeding. 	OTC, no prescription	The medication should be taken within 120 hours (5 days) of unprotected sex, but the sooner it is taken the more effective it is.
Fertility Awareness <i>Rhythm (Calendar Method), Basal Body Temperature (BBT) Method, Cervical Mucus (Ovulation or Billings) Method</i>	Varies	No	<ul style="list-style-type: none"> Requires no drugs or devices Inexpensive May be acceptable to members of religious groups 	<ul style="list-style-type: none"> Requires good record keeping before and during use of method Restricts sexual spontaneity during fertile period Requires extended periods of abstinence Unpredictability of cycle 	No prescription	Requires abstaining from sex during the entire first cycle to chart mucus characteristics