Barrier Birth Control Methods



This decision aid is to help you and your health care provider talk about methods of birth control and choose what's right for you. Most people can safely use these methods. Your health care provider can tell you whether these methods are safe for you.

	MALE CONDOM	FEMALE CONDOM	SPERMICIDE	SPONGE	CERVICAL CAP	DIAPHRAGM
					(with spermicide)	(with spermicide)
How is it used?	A thin latex or polyurethane sleeve is put on the erect penis before sex ¹	You put a thin sleeve in your vagina before sex ¹	You put a foam, cream, gel, film, or suppository in your vagina before sex ¹	You put a round foam device (that already contains spermicide) in your vagina before sex ¹	You put a silicone-rubber device in your vagina, with a spermicide, before sex ^{1,2}	You put a latex or silicone device in your vagina, with a spermicide, before sex ¹
How often?	Every time you have sex ¹	Every time you have sex ¹	Every time you have sex ¹	Every time you have sex1	Every time you have sex1	Every time you have sex ¹
How does it work?	Prevents sperm from reaching an egg ¹	Prevents sperm from reaching an egg ¹	Prevents sperm from reaching an egg ¹	Prevents sperm from reaching an egg ¹	Prevents sperm from reaching an egg ¹	Prevents sperm from reaching an egg ¹
When does it start working?	Immediately ³	Immediately ³	Depends on the brand ³	Immediately ³	Immediately ³	Immediately ³
How many people become pregnant in the first year?						
Not always following the instructions:	18 in 100 people ⁴	21 in 100 people ⁴	28 in 100 people ⁴	12 in 100 people (if never given birth) ⁴ • • • • • • • • • • • • • • • • • • •	14 in 100 people (if never given birth vaginally)² 29 in 100 people (if given birth vaginally)²	12 in 100 people ⁴ ● ● ○ ○ ○ ○ ○ ○ ○
Always following the instructions:	2 in 100 people ⁴	5 in 100 people ⁴	18 in 100 people ⁴	9 in 100 people (if never given birth) ⁴ 20 in 100 people (if given birth) ⁴ •••••••••	No information available	6 in 100 people ⁴
What are some of the side effects?						
Allergic reaction?	Possible ¹	Possible ¹	Possible ¹	Possible ¹	Possible ¹	Possible ¹
Vaginal symptoms (e.g., odor, irritation, infection, vaginitis)?			Possible ¹	Possible ¹	Possible ¹	Possible ¹
Toxic shock syndrome?				Possible ¹	Possible ⁵	Possible ¹
Does it protect against sexually transmitted infections (STIs)?	Provides the best protection ^{1,6}	Provides some protection ^{1,6}	No ¹⁶	No ¹	No ¹	No ^{1,6}

This decision aid is for use only during a visit with your health care provider. It is not intended to give you medical advice or recommend a birth control method. For more information, including authors, information sources, and terms of use, see www.rightforme.org/decision



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Supporting Document

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The authors do not stand to gain or lose anything by the birth control choices people make after using this decision aid

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Notes:

- This decision aid includes a statement about the general safety of the birth control methods described. The *U.S. Medical Eligibility Criteria* for Contraceptive Use⁷ and published updates^{8,9} provide guidance on who can safely use each birth control method and may be used to facilitate the provision of individualized information on method safety.
- For the Male Condom, natural membrane condoms are not included in the description so as not to imply that they provide the same protection against sexually transmitted infections as latex and polyurethane condoms.
- For the Cervical Cap, 12-month typical-use effectiveness data are for the original (unstrapped) FemCapTM. The qualifier 'if never given birth vaginally' pertains to people who have never been pregnant (and use the 22mm FemCapTM) or have been pregnant but have never given birth vaginally (and use the 26mm FemCapTM). The qualifier 'if given birth vaginally' pertains to people who have given birth vaginally (and use the 30mm FemCapTM).
- For the Cervical Cap, no comparable data on 12-month perfect-use effectiveness were identified.
- To enhance comprehension, 12-month typical-use and perfect-use effectiveness data are displayed both using raw numbers ("X in 100 people") and using a visual aid based on the following:

o Less than 1%: 000000000 o 1% to 9%: 000000000 o 10% to 19%: 00000000 o 20% to 29%: 00000000

Information Sources:

- 1. American College of Obstetricians and Gynecologists. *Barrier Methods of Birth Control: Spermicide, Condom, Sponge, Diaphragm, and Cervical Cap (FAQ022).*; 2016.
- U.S. Food and Drug Administration. FemCap[™] P020041. 2013. http://www.fda.gov/MedicalDevices/ProductsandMedicalProcedures/DeviceApprovalsandClearances/Recently-ApprovedDevices/ucm082597.htm.
- 3. Author Consensus.
- 4. Trussell J. Contraceptive Efficacy. In: Hatcher R, Trussell J, Nelson A, Cates W, Kowal D, Policar M, eds. *Contraceptive Technology*. 20th ed. New York, NY: Ardent Media; 2011.
- 5. FemCap Inc. The FemCapTM: Physician Labeling. Del Mar, CA; 2003.
- 6. Workowski KA, Bolan GA. Sexually Transmitted Diseases Treatment Guidelines, 2015. MMWR Recomm Rep. 2015;64(3):1-137. doi:10.1097/00008480-200308000-00006.
- Centers for Disease Control and Prevention. U.S. Medical Eligibility Criteria for Contraceptive Use, 2010. MMWR Recomm Rep. 2010;59(4):1-85. http://www.cdc.gov/reproductivehealth/unintendedpregnancy/usmec.htm.
- 8. Centers for Disease Control and Prevention. Update to CDC's U.S. Medical Eligibility Criteria for Contraceptive Use, 2010: Revised Recommendations for the Use of Contraceptive Methods During the Postpartum Period. MMWR. 2011;60(26):878-883. http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6026a3.htm.

9.	Centers for Disease Control and Prevention. Update to CDC's U.S. Medical Eligibility Criteria for Contraceptive Use, 2010: Revised Recommendations for the Use of Hormonal Contraception Among Women at High Risk for HIV Infection or Infected with HIV. MMWR. 2012;61(24):449-452. http://www.cdc.gov/mmwr/preview/mmwrhtml/mm6124a4.htm.					