METHOD	EFFECTIVENESS	HOW TO USE	BENEFITS	SIDE EFFECTS	WARNINGS
HORMONAL **				· · · · · · · · · · · · · · · · · · ·	
The Pill	P 99.9% T 91.0 %	Take a pill at the same time every day	 Lighter/shorter periods Cycle regulation Less cramping Improves acne 	 Irregular bleeding Nausea Breast tenderness 	 Slight risk of blood clots DO NOT use if you get migraines with aura Does not protect against STIs May interact with other medications
Progestin Only Pill (POP)	P 99.9 % T 89-94%	Take a pill at the same time every day	 Lighter/shorter periods (some women will have no period) Less cramping Can be used if estrogen can't be taken 	 Spotting in the 1st cycle Slight risk of headache, acne, bloating and breast tenderness 	 Must be taken within a 3 hour time frame to be effective Does not protect against STIs
<u>The Ring</u>	P 99.9 % T 91.0%	Insert 1 ring into the vagina and leave in for 3 weeks, remove for 1 week then insert a new ring and repeat	 Private Does not require daily attention Usually not noticeable during sex 	 Irregular bleeding/spotting Headache Nausea Breast tenderness Vaginal discharge 	 Slight risk of blood clots DO NOT use if you get migraines with aura Does not protect against STIs May interact with other medications
The Patch	P 99% T 90.0%	Apply a patch to the abdomen, upper arm or back weekly	 Lighter/shorter periods Cycle regulation Less cramping Improves acne Do not need to remember daily 	 Irregular bleeding Nausea Breast tenderness Skin reactions at the site of application 	 Slight risk of blood clots DO NOT use if you get migraines with aura Does not protect against STIs May interact with other medications
Depo Provera (The Shot)	P 99.9% T 99.6%	See your health care provider for an injection every 12 weeks	 Does not require daily attention Reliable Economical 	 Unpredictable bleeding Weight gain Headache Nausea Breast tenderness 	 Decrease of bone density (might not be completely reversible) May not be suitable for people with a history of depression or diabetes Does not protect against STIs
Intrauterine System (IUS)	P 99.8% T 99.8	To be prescribed and inserted into the uterus by a trained health care provider	 Reversible Works for 3-5 years 	 Light periods Many experience no periods after 1 year Depression Acne Headache Breast tenderness 	 Need to be screened for vaginal infections prior to insertion as the risk of Pelvic Inflammatory Disease is increased in the first 3 weeks. Slight chance of uterine perforation Costly Does not protect against STIs
Emergency Contraceptive Pill	P 95% T 58-95%	Take a pill as soon as possible after unprotected sex	 Can be taken after unplanned or unprotected sex 	 Nausea Vomiting Dizziness Fatigue Abdominal pain 	 Works best the sooner it is taken after unprotected sex. Can work for up to 5 days but effectiveness decreases over time Consider a pregnancy test if no period 21 days after taking Does not protect against STIs

METHOD	EFFECTIVENESS	HOW TO USE	BENEFITS	SIDE EFFECTS	WARNINGS			
NON-HORMONAL**								
<u>Intrauterine</u> <u>Device</u> (IUD)	P 92.0% T92.0%	To be prescribed and inserted into the uterus by a trained health care provider	 Private Long term No hormones	Irregular bleedingHeavier periods	 Slight risk of uterine perforation Infection risk is increased during the 20 days after insertion Pelvic Inflammatory Disease Does not protect against STIs 			
<u>Internal</u> <u>Condoms</u>	P 98.0% T 82.0%	Ensure the unattached ring lies within the closed end of the pouch Insert the condom into the vagina just prior to or up to 8 hours before sex	 High level of pregnancy prevention Covers more genitals than the external condom, therefore added STI protection Made of polyurethane so no risk of latex allergy 	• N/A	 Costly May be difficult to insert at first, may need practice May slip during sex 			
<u>External</u> condoms	P 95.0% T 78.0%	Put the condom on the tip of an erect penis, pinch air from the tip and roll down the shaft.	 Reduces risk of STBBIs Reduces the risk of pregnancy Very accessible 	 Possible allergy to latex 	 Non latex are costly 2-8% of condoms will come off or break during sex If using condoms with a spermicide STI transmission risk is increased. 			
Tubal Ligation	99%	Surgery	 Safe Permanent Cost covered by OHIP 	 Shoulder pain Lower abdominal or pelvic pain Bruising or bleeding from incisions Post-op nausea or light- headedness 	 Risks associated with any surgery Does not protect against STIs Need to be sure If pregnancy occurs post tubal ligation 33% chance of ectopic pregnancy Reversal requires major surgery and is very expensive, not covered by OHIP 			
Vasectomy	99.9%	Surgery	 Safe Permanent Cost Covered by OHIP 	 Localized pain Swelling Bruising 	 Reversal can be done but not guaranteed, cost is not covered by OHIP Does not protect against STIs Complications are rare, but infection is possible 			

P= Perfect use

T= Typical use ** For more detailed information see link to Simcoe Muskoka District Health Unit