

Birth Control

Making the decision to have sex can be difficult. You should make up your own mind when the time is right for you. If you are not ready for sex, say so. If you think you are ready to have sex or if you already are having sex—even only now and then—you should take steps to avoid pregnancy and **sexually transmitted infections (STIs)**. Thousands of teens get pregnant each year because they do not use birth control or they do not use it correctly.

This pamphlet explains

- types of birth control
- how to choose a birth control method that is right for you
- which birth control methods protect against STIs

Teens and Birth Control

There are many reasons teens may not use birth control, even if they do not want to have a baby. They may

- think they will not get pregnant
- be afraid to go to a health care professional or clinic to ask for birth control
- not know how to get birth control or think they cannot afford it
- worry about their parents finding out
- be afraid of what their partner thinks about birth control
- think that birth control might hurt their ability to get pregnant in the future
- have sex that was not planned
- think that they will not get pregnant the first time they have sex

Many teens are deciding to protect themselves from pregnancy and STIs, and you can too. You may have heard about “tricks” you can use to not get pregnant (read the box “What Does Not Work”). Do not depend on them—they do not work.

Sex and Reproduction

Knowing how pregnancy happens will help you understand how the different methods of birth control work. A woman has two

ovaries, one on each side of the *uterus*.

Each month, one of the ovaries releases an *egg* into a *fallopian tube*. This is called *ovulation*. It usually happens about 12 to 14 days before the start of *menstruation* (the *menstrual period*).

During *sexual intercourse* (sex), the man’s *penis* goes into the woman’s *vagina*. When a man *ejaculates* (“comes”), his penis releases *semen*, which contains millions of *sperm*. If this happens during sex, the semen is released into the vagina.

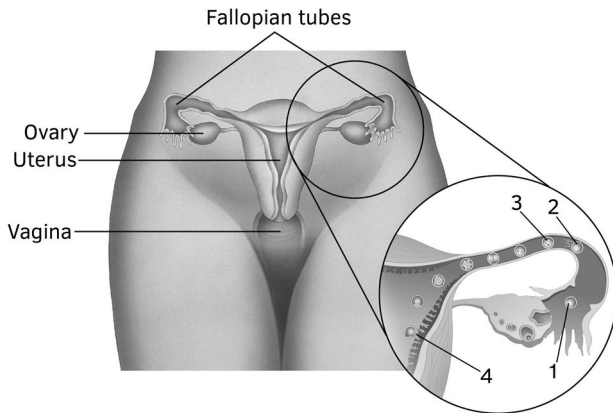
Sperm in the semen can swim up the *cervix* and into the uterus and the fallopian tubes. If a sperm meets an egg in the fallopian tube, *fertilization*—joining of an egg and sperm—can happen. The fertilized egg then can travel to the uterus and attach to the lining. Once the fertilized egg has attached to the lining of the uterus, the woman becomes pregnant, even if it is her first time having sex.

What Does Not Work

The following things DO NOT stop you from getting pregnant:

- **Douching**—Squirting water or any other liquid into the vagina after sex does not kill sperm or prevent pregnancy and may cause infections.
- **Plastic wrap instead of a condom**—Plastic wrap or a plastic bag can tear and let sperm escape.
- **Urinating right after sex**—Urine does not pass through the vagina, so it does not get rid of the sperm.
- **Having sex for the first time**—You can get pregnant from just one act of unprotected sex.
- **Having sex in a special position**—No matter what position you have sex in, if the penis enters the vagina or comes close to the vagina, you can get pregnant.

How Pregnancy Happens



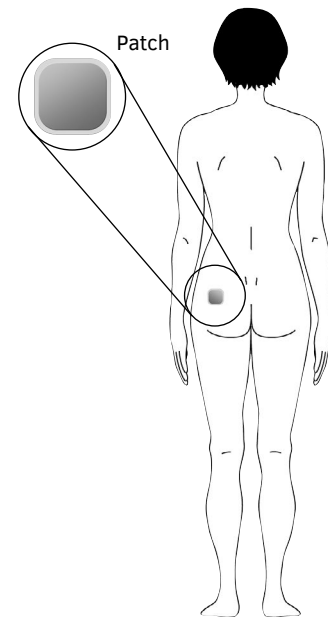
Each month during ovulation, an egg is released (1) and moves into one of the fallopian tubes. If a woman has sex around this time, and if the egg and sperm meet in the fallopian tube (2), the two may join. If they join (3), the fertilized egg then moves through the fallopian tube into the uterus (4) and attaches there to grow during pregnancy.

Hormonal Methods

Hormonal methods of birth control contain *hormones* that prevent pregnancy. Hormones are made by the body to control its functions. The hormones in birth control keep a woman's body from releasing an egg each month. If your body does not release an egg, you cannot get pregnant. Some methods also thicken the mucus in front of the cervix, which helps prevent sperm from entering the uterus, and thin the lining of the uterus.

There are many types of hormonal methods. They are safe for most young women and work well when used as

directed. To begin using any hormonal method, you need to see a health care professional. Hormonal birth control methods do not protect against STIs. A male or female condom should be used in addition to these methods to protect against STIs.



Types of Birth Control

When choosing a type of birth control, you should know your options. Questions to think about before choosing a method include the following:

- How well does it prevent pregnancy? (See Table 1.)
- How easy is it to use?
- How easy is it to get?
- Does it protect against STIs?
- Do you have any health problems?

Some types of birth control require a prescription, and you have to see a health care professional or go to a clinic to get them. A *pelvic exam* is not needed to get most forms of birth control from a health care professional, except for the *intrauterine device (IUD)*, diaphragm, and cervical cap. If you already have had sex, you may need to have a pregnancy test and STI test before birth control can be prescribed.

If you have certain diseases or medical conditions, some birth control methods may not be recommended. You should talk with your health care professional about any possible risks and the safety of each method to find the best option for you.

If you are having sex, you also need to protect yourself from STIs. Male condoms made from latex or polyurethane provide the best STI protection for both partners. Female condoms also provide some protection against STIs. You can use a male or female condom with other forms of birth control for STI protection.

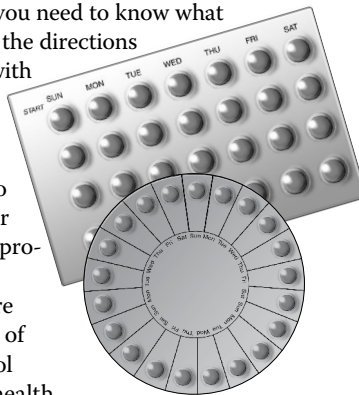
directed. To begin using any hormonal method, you need to see a health care professional. Hormonal birth control methods do not protect against STIs. A male or female condom should be used in addition to these methods to protect against STIs.

Birth Control Pills. Birth control pills, often referred to as “the pill,” are the most popular hormonal method. You have to take a pill at the same time every day. If you miss a pill, you need to know what to do. Read the directions that came with your pack of pills. You also may want to contact your health care professional.

There are many types of birth control pills. Your health care professional can help you choose the right one for you.

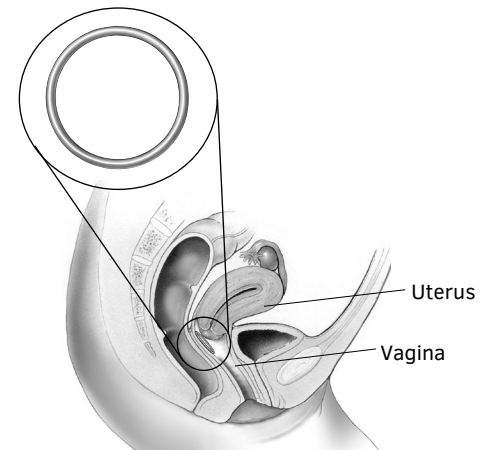
Skin Patch. The patch is a small (1.75 square inch) adhesive patch that is worn on the skin. A new patch is worn for a week at a time for 3 weeks in a row. During the fourth week, a patch is not worn, and you will have your period.

The patch can be worn on the buttocks, chest (excluding the breasts), upper back or



Birth control pills

Vaginal Ring. The ring is a flexible plastic ring that you insert into the upper vagina. It is left inside the vagina for 21 days and then removed for 7 days. During those 7 days, you will have your period. Then you insert a new ring.



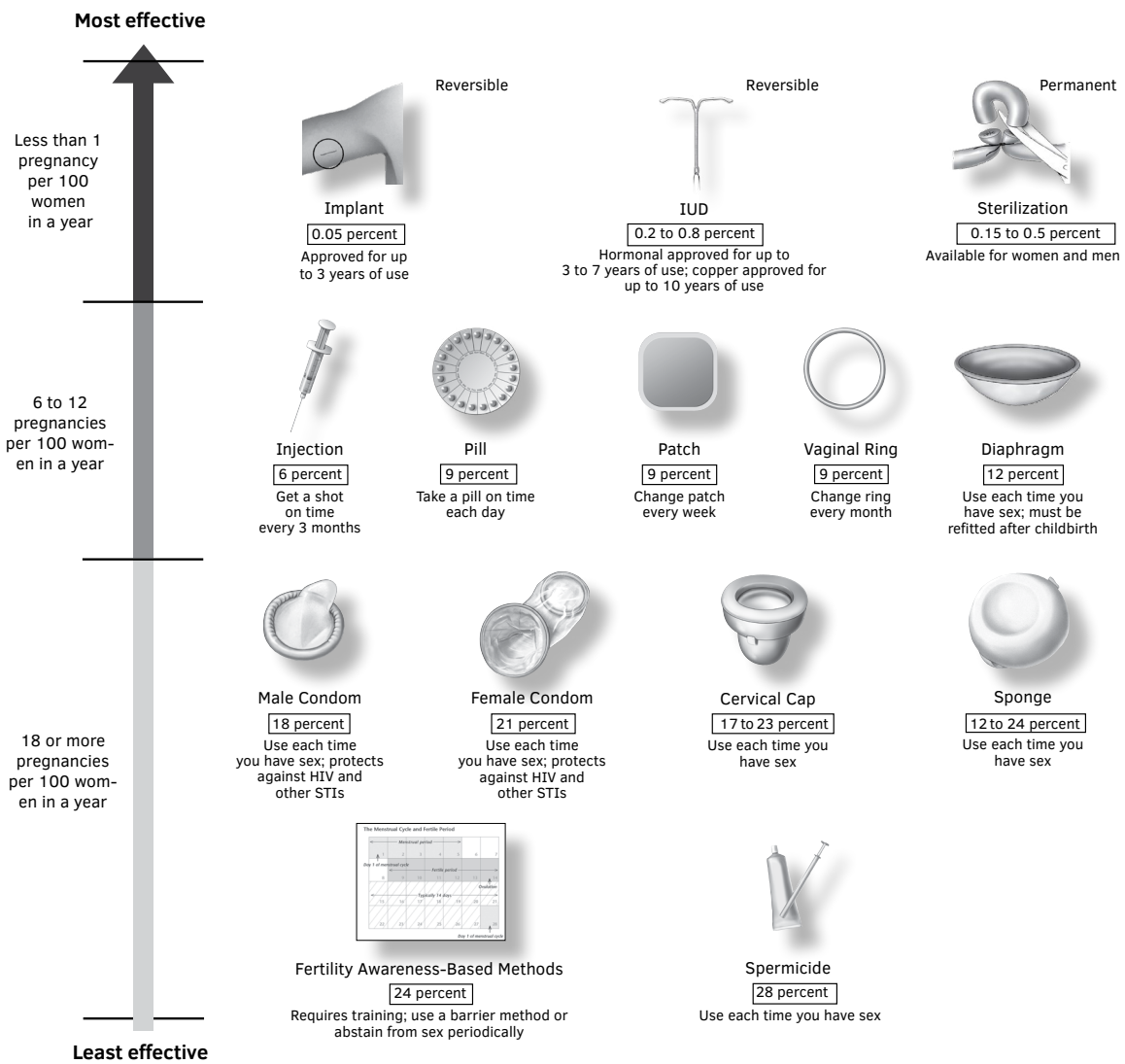
Vaginal ring

Birth Control Shot. This shot (depot medroxyprogesterone acetate [DMPA]) is given in the upper arm or buttock every 3 months. The birth control shot may be a good choice if you do not want to remember to take a daily pill.



Shot

Table 1. Effectiveness of Birth Control Methods *



Abbreviations: HIV, human immunodeficiency virus; IUD, intrauterine device; STIs, sexually transmitted infections.

Other methods of birth control:

Lactational amenorrhea method: This is a temporary method of birth control that can be used for the first 6 months after giving birth by women who are exclusively breastfeeding.

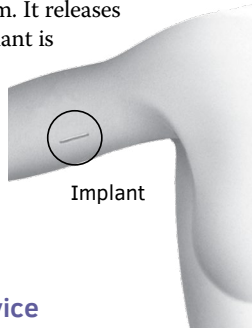
Emergency contraception: Emergency contraceptive pills taken or a copper IUD inserted within 5 days of unprotected sex can reduce the risk of pregnancy.

Withdrawal: The man withdraws his penis from the vagina before ejaculating. 22 out of 100 women using this method will become pregnant in the first year.

*Percentage of women who will become pregnant within the first year of typical use of the method

Adapted from the U.S. Department of Health and Human Services/Centers for Disease Control and Prevention; World Health Organization (WHO) Department of Reproductive Health and Research, Johns Hopkins Bloomberg School of Public Health/Center for Communication Programs (CCP). Knowledge for health project. Family planning: a global handbook for providers (2011 update). Baltimore, MD; Geneva, Switzerland: CCP and WHO; 2011; and Trussell J. Contraceptive failure in the United States. Contraception 2011;83:397-404.

Implant. The implant is a small plastic rod about the size of a matchstick that your health care professional inserts under the skin of the upper arm. It releases hormones. The implant is approved for 3 years of use. It may be a good choice if you do not want to remember to take a daily pill.



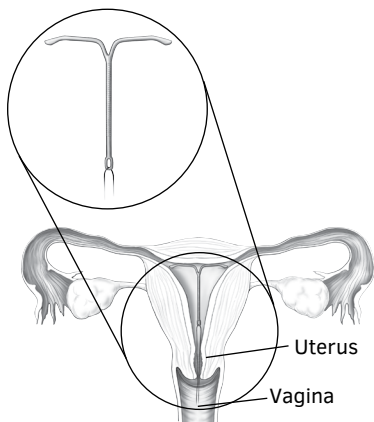
Intrauterine Device

The IUD is a small, T-shaped, plastic device that is inserted into and left inside the uterus. The IUD must be inserted and removed by a health care professional. Three types of hormonal IUDs are available in the United States. There also is a copper IUD.

There are different brands of hormonal IUDs that last for different lengths of time. Depending on the brand, they are approved for up to 3 to 7 years of use. The copper IUD is approved for up to 10 years of use.

The IUD does not protect against STIs. A male or female condom should be used in addition to the IUD to protect against STIs.

Once the IUD is inserted, nothing else needs to be done to prevent pregnancy. The IUD has a string that can be checked to be sure the device is in place.



Intrauterine device

Barrier Methods

Barrier methods keep sperm from reaching the egg. These methods include *spermicide*, condoms, diaphragms, cervical caps, and sponges. You must use barrier methods each time you have sex. Condoms, sponges, and spermicides can be bought in

drugstores. A diaphragm or cervical cap must be fitted to your body and requires a prescription.

Spermicides. These are chemicals that are put into the vagina to make sperm inactive. There are many types of spermicides: foam, gel, cream, film (thin sheets), or suppositories (solid inserts that melt after they are inserted into the vagina).

Follow the directions carefully. For many spermicides, you need to wait 10 to 15 minutes after insertion for them to start to work. Spermicides are effective for only 1 hour after they are put in the vagina. If more than 1 hour goes by, you need to reinsert the spermicide. You must reinsert spermicide for each act of sex. The spermicide needs to stay in place for 6 to 8 hours after the last act of sex.

When used alone, spermicides do not protect against STIs, including infection with *human immunodeficiency virus (HIV)*. Frequent use of spermicides may increase the risk of getting HIV from an infected partner. Spermicides should only be used if you are at low risk of HIV infection (read the box “A Warning About Using Spermicides”).



Condoms. Condoms come in male and female versions. The male condom (“rubber”) covers the penis and catches the sperm after a man ejaculates (read the box “How to Use a Condom”). Male condoms are easy to use and can be bought in many places, including drugstores, without a prescription.

Condoms that are made of latex or polyurethane are the best way to reduce the risk of getting an STI. They can be used alone or with other birth control methods to protect against STIs. For example, you may decide to use the IUD or implant, which are both very effective in preventing pregnancy, with a condom to protect against STIs.

The female condom is a thin plastic pouch that lines the vagina. It may be put in place up to 8 hours before you have sex. It can be bought in drugstores. The female condom may be a good choice for women whose partners will not use a male condom. It provides some protection against STIs.

Condoms work better to prevent pregnancy when used with spermicide. Spermicides should only be used if you are at low risk of HIV infection (read the box “A Warning About Using Spermicides”).

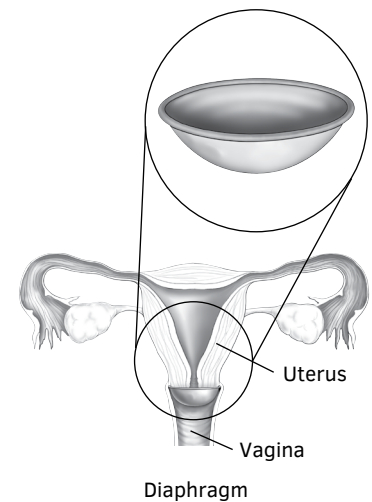
Diaphragm. The diaphragm is a small dome-shaped device made of latex or silicone that fits inside the vagina and covers the cervix. Diaphragms are available by prescription only.

With one type of diaphragm, your health care professional needs to do a pelvic exam to find the right size. Another diaphragm is “one size fits all.”

Diaphragms always are used with a spermicide. Birth control methods that need spermicides to work should only be used if you are at low risk of HIV infection (read the box “A Warning About Using Spermicides”).

The diaphragm does not protect against STIs. A male or female condom should be used with the diaphragm to protect against STIs.

A diaphragm must be left in place at least 6 hours after sex, but not more than 24 hours total. If you have sex again within this time frame, you need to add more spermicide and wait another 6 hours before removing the diaphragm.



Diaphragm

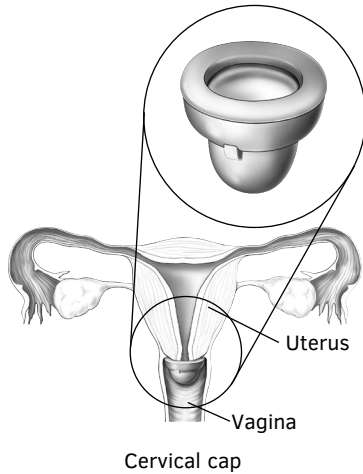
Cervical Cap. The cervical cap is a small, thin latex or plastic dome shaped like a thimble. It fits tightly over the cervix.

Like the diaphragm, it is available by prescription only, and a health care professional needs to do a pelvic exam to find the right size for you.

The cervical cap must be used with a spermicide. After sex, the cap should be left in place for 6 hours but not longer than

48 hours total. You do not need to add more spermicide if you have sex again within this time frame. Birth control methods that need spermicides to work should only be used if you are at low risk of HIV infection (read the box “A Warning About Using Spermicides”).

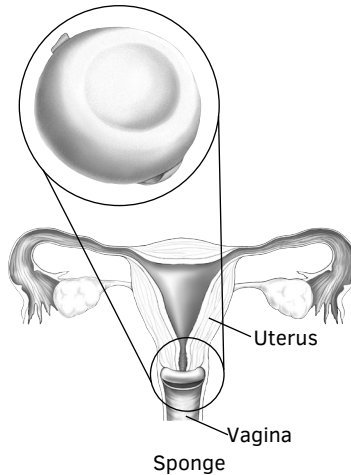
The cervical cap does not protect against STIs. A male or female condom should be used with the cervical cap to protect against STIs.



Sponge. The sponge can be bought without a prescription at pharmacies and other stores. It is a round device made of soft foam that is coated with spermicide. It is pushed up into the vagina to cover the cervix.

The sponge is effective for up to 24 hours. It is good for more than one act of sex during this time. It must be left in at least 6 hours after the last act of sex. It must be removed within 30 hours of the time it is inserted.

Birth control methods that need spermicides should only be used if you are at low risk of HIV infection (read the box “A Warning About Using Spermicides”).



Birth Control in an Emergency

If you have sex without using any birth control, if your birth control method did not work (for example, the condom broke during sex), or if you are raped, you can use **emergency contraception (EC)** to prevent pregnancy. It should only be used in an emergency—not for regular birth control. EC can prevent some, but not all, pregnancies. It is most effective when taken as soon as possible after having unprotected sex.

There are two main types of EC: 1) the copper IUD and 2) pills. The IUD must be inserted by a health care professional or the pills taken within 5 days of having unprotected sex. Some EC pills are available at pharmacies to anyone of any age without a prescription.

Copper IUD. The copper IUD is the most effective form of EC. A health care professional must insert the IUD. You can call your health care professional or go to a family planning clinic to have the IUD inserted. You then can rely on the copper IUD for long-term birth control (for up to 10 years). You can have the IUD removed at any time if you wish to get pregnant.

How to Use a Condom

Using a condom the right way can prevent pregnancy and help protect you and your partner against STIs. A condom should be put on before you have sex, not during sex.

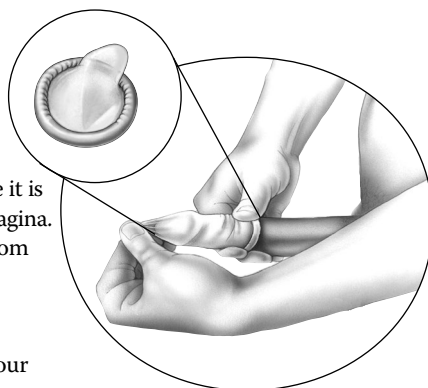
Using a lubricant with a condom will make it less likely to break or tear. Use the right kind. Do not use lotion, petroleum jelly, or baby oil with latex condoms. They can weaken latex and cause the condom to break.

To use the male condom, place the rolled-up condom over the tip of the erect penis. Hold the end of the condom to allow a little extra space at the tip.

With the other hand, unroll the condom over the penis.

Right after ejaculation, hold the condom against the base of the penis while it is withdrawn from the vagina. Then throw the condom away. Do not reuse it.

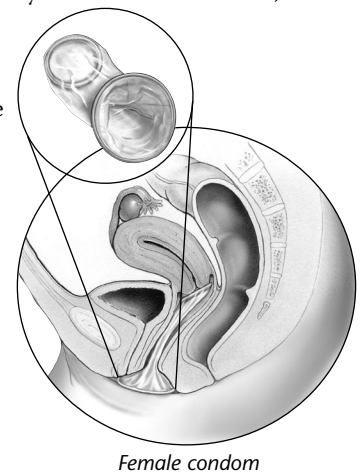
To use the female condom, squeeze the inner ring between your



fingers and insert it into the vagina (like a tampon). Push the inner ring into the vagina as far as it can go. Let the outer ring hang about an inch outside your body. Guide the penis through the outer ring.

Right after ejaculation, squeeze and twist the outer ring and pull the pouch out gently. Like the male condom, it should be thrown away—never use it again.

Do not use the male and female condom at the same time. It makes both condoms more likely to break.



A Warning About Using Spermicides

Nonoxynol-9 (N-9) is a chemical found in all spermicides sold in the United States. Frequent use of N-9 may cause changes in the vagina and rectum that increase the risk of getting HIV from an infected partner.

You should only use a spermicide for birth control—by itself or with another barrier method—if you are at low risk of HIV infection. You are at high risk of HIV infection if you

- have had more than one sexual partner since your last HIV test or a sexual partner who has had more than one partner since the partner's last HIV test
- have been diagnosed with an STI in the past year
- have a history of exchanging sex for money or drugs, or of injected drug use
- have had a past or present partner who is HIV positive or who injects drugs
- have a history of invasive cervical cancer
- live in an area where there is a high rate of HIV infection
- are entering a detention facility

EC Pills. There are three types of EC pills:

1) ulipristal, 2) *progestin*-only pills, and 3) combined birth control pills taken in certain amounts.

Ulipristal is the most effective EC pill. You need a prescription to get it. You can ask your health care professional to give you a prescription in advance. This way, it is there when you need it.

All of the progestin-only pills are available over the counter in pharmacies and other stores to anyone of any age. The progestin-only pill usually can be found in the family planning section. Not all stores carry it, so it is best to call ahead to see if it is available.

Combined birth control pills are the least effective type of EC. The number of pills needed for EC differs for each brand of pill. A health care professional can tell you how many pills you should take for the type that you have.

If you need more information about emergency birth control or you need to find a local clinic, go to www.womenshealth.gov/a-z-topics/emergency-contraception. Some health care professionals will give you a prescription for emergency birth control in advance. This way, you will have it on hand if you need it.

Your Parents and Your Privacy

In most states, minors (people younger than 18) have the right to make choices about birth control without their parents' permission. Ask your health care professional if the visit will be kept private.

Be aware that if you use your parents' health insurance to pay for birth control or a special health care professional's visit, it may appear on the bill that your parents receive. You may want to talk about birth control with your health care professional at a visit for something else, such as a physical exam.

Often, the best way for a teen to have privacy and to afford birth control is to go to a family planning clinic. Some clinics may provide free birth control.

Talk to Your Partner

Before you have sex, talk to your partner about using condoms. This is the best way to prevent STIs. Do not be shy—be direct. Be honest about your feelings and needs. You can talk about it in many ways. The following are some examples:

- “You know, it makes sex even better for me knowing that both of us are protected. Let's use a condom.”
- “I'd really like to have sex with you as long as we use condoms. Condoms protect both of us.”

Make sure that you feel safe with your partner. No one should force you to have sex. If you feel scared of your partner or have experienced physical, emotional, or sexual abuse, tell a trusted adult.

Finally...

As a teen, you face many decisions. To help you make choices that are right for you, talk with someone you trust, such as your parents, your health care professional, or

your school counselor. If you decide to have sex, use birth control and protect yourself against pregnancy and STIs. No matter which method of birth control you choose, be sure that you know how to use it correctly.

Glossary

Cervix: The lower, narrow end of the uterus at the top of the vagina.

Egg: The female reproductive cell made in and released from the ovaries. Also called the ovum.

Ejaculates: Releases semen from the penis at the time of orgasm.

Emergency Contraception (EC): Methods that are used to prevent pregnancy after a woman has had sex without birth control, after the method has failed, or after a rape.

Fallopian Tube: A tube through which an egg travels from the ovary to the uterus.

Fertilization: A multistep process that joins the egg and the sperm.

Hormones: Substances made in the body that control the function of cells or organs.

Human Immunodeficiency Virus (HIV): A virus that attacks certain cells of the body's immune system. If left untreated, HIV can cause acquired immunodeficiency syndrome (AIDS).

Intrauterine Device (IUD): A small device that is inserted and left inside the uterus to prevent pregnancy.

Menstrual Period: The monthly shedding of blood and tissue from the uterus.

Menstruation: The monthly shedding of blood and tissue from the uterus that happens when a woman is not pregnant.

Ovaries: The organs in women that contain the eggs necessary to get pregnant and make important hormones, such as estrogen, progesterone, and testosterone.

Ovulation: The time when an ovary releases an egg.

Pelvic Exam: A physical examination of a woman's pelvic organs.

Penis: The male sex organ.

Progestin: A synthetic form of progesterone that is similar to the hormone made naturally by the body.

Semen: The fluid made by male sex glands that contains sperm.

Sexual Intercourse: The act of the penis of the male entering the vagina of the female. Also called “having sex” or “making love.”

Sexually Transmitted Infections (STIs): Infections that are spread by sexual contact.

Sperm: A cell made in the male testicles that can fertilize a female egg.

Spermicides: Chemicals (creams, gels, foams) that inactivate sperm.

Uterus: A muscular organ in the female pelvis. During pregnancy, this organ holds and nourishes the fetus. Also called the womb.

Vagina: A tube-like structure surrounded by muscles. The vagina leads from the uterus to the outside of the body.

This information is designed as an educational aid for the public. It offers current information and opinions related to women's health. It is not intended as a statement of the standard of care. It does not explain all of the proper treatments or methods of care. It is not a substitute for the advice of a physician. For ACOG's complete disclaimer, visit www.acog.org/WomensHealth-Disclaimer.

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This is EP112 in ACOG's Patient Education Pamphlet Series

ISSN 1074-8601

American College of Obstetricians and Gynecologists
409 12th Street SW
Washington, DC 20024-2188