

Applying CDCs Evidence Based Contraceptive Methods Guideline

(Information for Case Managers only)

Teen use less effective methods and use these methods inconsistently

Contraceptive Methods:

- Pills 55%
- Condoms 22%
- DMPA 10%
- IUD 4%
- Other 8%

Tier 1: Most effective less than 1% pregnancy (LARC, Implant, and IUD devices)

Tier 2: Injectable, Pills, Patch, Ring, Diaphragm

Tier 3: Condoms, Withdrawn, Sponge, Spermicide 18-28%

Teens commonly used Pills and Condoms

Tier 1 Most effective 99%

- Long Acting Reversible Contraception (LARC) only by health care provider
- Levonorgestrel- Releasing Intrauterine System
- Copper IUD
- Implant
- **Highly recommended (LARC)**
 - Forgettable contraception
 - Non Dependent on compliance
 - LARC Declared A National Priority
 - Should be considered first line choice for all woman
 - **Levonorgestrel:** e.g Mierna effective for 5 years
 - Skyla effective for 3 years
 - S/E Irregular bleeding, Dysmenorrhea, Menstrual Blood Loss, Does not protect against STIs
- **Copper IUD:**
 - Approved for 10 years
 - Effective for at least 10 years
 - S/E Irregular bleeding/ heavy bleeding, most effective emergency contraception, does not protect against STIs
- **Implant:**
 - Only one available and effective for 3 years
 - S/E Irregular bleeding and does not protect against STIs

Tier 2: Most effective less than 6-12% pregnancy

- **Includes:** Injectable, Pills, Patch, Ring
- It requires more efforts by user and has higher typical failure rates
- Correct and consistent use of pills and condoms may be difficult to use
- Women ages 18-24 in last 3 months 45% missed more than 1 pill
- **Depo (DMPA):**
 - One injection every 3 month reliable contraception for 3 months and effects for 9 months
 - S/E irregular bleeding and Amenorrhea
 - Does not protects against STIs
- **Contraceptive Pills:**
 - combine pill contain estrogen and progestin
 - Extended use
 - S/E Irregular bleeding
 - Does not protect against STIs
- **Contraceptive Patch:**
 - Release estrogen and progestin. One patch per week than 1 patch free week
 - S/E Irregular Bleeding
 - Does not protect against STIs
- **Vaginal Ring:**
 - Release estrogen and progestin
 - One Ring 3 week than one week
 - S/E Irregular Bleeding
 - Does not protect against STIs

Tier 3: Needs more efforts 12-28% pregnancy

- **Includes:** Condoms, Diaphragm, Fertility awareness based methods, Withdrawal (**High failure rate**), Spermicide
- Male condoms reduce risk for STIs, HIV when used correctly and consistently
- **Quick Start:**
 - Initiation of contraception on any day of cycle.
 - More reliable and faster protection from unplanned pregnancies.
 - Advise 7 days of back up or abstinence.
 - No increase in unscheduled bleeding
- **US Family Planning Guidance: Evidence Based**
 - **Barriers to LARC provision**
 - Patient preference
 - Concern about safety e.g. risk of PID
 - Not trained in IUD insertion
 - IUDs not available
- **Teen Use of LARC**
 - Barriers e.g. Cost, Knowledge, attitude and never heard IUD

Least Effective Emergency Contraception if primary method of birth control fails

- **Plan B:** swallowing the pills within 3 days after having unprotected sex.
- **Ella:** Swallow the pill within 5 days after having unprotected sex.

References

- Teen Pregnancy Prevention: Application of CDC's Evidence Based contraception Guidance
- www.reproductiveaccess.org
- www.fda.gov/birthcontrol