

Family Planning after Pregnancy

Commonly asked questions:

When is it safe to become pregnant again?

Spacing pregnancies is important. It gives your body time to heal and recover. It is safest to wait at least 12 months if you have had a vaginal delivery, and 18 months if you have had a cesarean birth. This reduces the risk your baby will have a low birth weight or deliver preterm.

Is breastfeeding birth control?

Breastfeeding can be birth control. Breastfeeding is birth control when ALL of the following are true: 1) You are feeding baby directly from your breast (not pumping); 2) Breastfeeding is around-the-clock without gaps in time (at least every 4 hours); 3) You do not need to give your baby anything other than breast milk (no formula or other food); 4) You stop bleeding within 6 weeks of delivery and you do not get periods; 5) Your baby is younger than 6 months old. If you are pumping, this may not be as effective for birth control as compared with feeding your baby directly at the breast.

What birth control methods can be used while breastfeeding?

Methods with estrogen may reduce milk supply. These include estrogen + progesterone birth control pills, the vaginal ring, and the skin patch.

Methods with no hormones have no effect on breastfeeding. These include vasectomy, tubal sterilization, copper IUD, and condoms.

Progesterone-only birth control pills and hormonal IUDs placed at 6 weeks postpartum or later do not affect breastfeeding.

When placed during the hospitalization for the birth, there is a low chance that the arm implant (Nexplanon), the birth control shot (Depo Provera), and hormonal IUDs could affect milk supply when the method is started before the milk supply is established. There is not enough research data to provide an accurate risk assessment, or to determine which individuals will have low milk supply. There are no studies assessing risk for those who have had preterm babies, babies with unique health needs, twins (or more than 1 baby), and many other individualized circumstances.

Nexplanon and the birth control shot (Depo Provera) are believed to have less effect on milk production when started at 6 weeks or later, rather than right after birth. Nexplanon is reversible and can be removed if milk production drops significantly. The Depo Provera shot cannot be removed, so in the unlikely event that it reduces milk production, it's effect cannot be reversed.



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After delivery, when can I start birth control?

Every method can be started at your 6-week postpartum visit, and many methods can be started before you leave the hospital after delivery.

What if I have sex without birth control?

You may get pregnant even if exclusively breastfeeding. If you have sex without any birth control or the birth control method did not work (for instance, the condom broke during sex), you can use emergency birth control to prevent pregnancy. Emergency birth control is available in a pill form or as a copper IUD. The pills must be taken or the IUD inserted within 5 days of having unprotected sex. Both of these are safe during breastfeeding.

Where can I get emergency birth control?

The most effective form of emergency contraception is Paragard IUD, which must be placed by your doctor. One type of pill (Plan B One-step) is available at any pharmacy without a prescription, however this method is not effective with a BMI over 25 or weight over 180lbs. You can discuss other emergency birth control options with your health care provider.

Important facts about tubal sterilization (permanent, non-reversible) birth control:

This choice should only be made when you are certain you never want to become pregnant again. Sterilization is permanent, and cannot be reversed if you regret the choice. A “tubal ligation” or “tubes tied” is also considered permanent, and not reversible. You cannot “untie” the tubes, this is a myth. If you have Medicaid insurance, you must sign a consent form 30 days prior to the date of the procedure. It expires after 180 days, if not performed. It is recommended to sign this consent between 20 weeks gestation and 32 weeks gestation, if you want the procedure during your delivery hospitalization. If you sign the consent and then decide you don’t want the procedure, it is not a problem. For all insurance types, a procedure also requires a written consent form to be signed on the day of the procedure. The doctor will confirm that you still want it, before it is done.

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Family planning and birth control is an important part of health. We encourage you to use the “worksheet” to help you identify what is important to you, and to help communicate those priorities to your providers. As your providers, we want to partner with you, so that you are able to make the right choice for you. We can give you more information on any of the methods.

	Tubal sterilization	Copper IUD	Condoms	Exclusive Breastfeeding	Fertility Awareness Method (No Breastfeeding)
How is it used?	Procedure in operating room	Placed in uterus in clinic or hospital after birth	Place on the penis whenever you have sex	Only breastfeeding (no food or formula) for first 6 months + no period	Track your menstrual cycle and changes to your body every day
How do you stop it?	Permanent	Clinic removal	Stop using	Stop exclusive breastfeeding or get a period or your baby is older than 6 months	Stop using
How long does it last?	Permanent	Up to 10 years	Single use for each episode of sex	Up to 6 months after the birth	As long as you track it
How long does it take to stop working?	Permanent	Immediately after removal	Immediately after stopping use	Less than 3 months	Immediately after stopping tracking
Risk of pregnancy (out of 100) in 1 year	Less than 1	Less than 1	Greater than 10	Between 1 and 9	Greater than 10
Will it impact breastfeeding/decrease milk supply?	No	No	No	No	No
What are the side effects or risks?	Small incision site scars; surgical risks; risk of regret	Small infection risk the 2 weeks after placement; falling out or wrong position; Cramps and irregular bleeding for days to weeks after insertion, improves over time	Irritation/allergy	Related to breastfeeding: dry vagina, painful sex, decreased risk breast, ovarian, uterine cancer, decreased risk of diabetes, heart disease, stroke, high blood pressure	None
What impact does it have on periods/bleeding?	No changes	Heavier or crampier, timing unchanged	No changes	You don't get a period once delivery bleeding stops (If you do, method is not working)	No changes
Protects against most sexually transmitted infections?	No	No	Yes	No	No

	Progesterone IUD	Arm Implant	Shot	Ring	Patch	Estrogen + Progesterone Pills	Progesterone Pills
How is it used?	Placed in uterus in clinic or hospital after birth	Implanted in your arm in clinic or hospital after birth	Injected in arm or butt in clinic or hospital after birth, and every 3 months	Place a ring in the vagina that you change monthly	Wear a patch that you change weekly	Take a pill every day	Take a pill every day
How do you stop it?	Clinic removal	Clinic removal	Stop receiving, wait to wear off	Stop using	Stop using	Stop taking	Stop taking
How long does it last?	Up to 3-8 years	Up to 3 years	3 months	As long as you use it	As long as you use it	As long as you take it	As long as you take it
How long does it take to wear off?	Less than 3 months after removal	Less than 3 months after removal	3-12 months	Less than 3 months	Less than 3 months	Less than 3 months	Less than 3 months
Risk of pregnancy (out of 100) in 1 year	Less than 1	Less than 1	Between 1 and 4	Between 1 and 9	Between 1 and 9	Between 1 and 9	Between 1 and 9
Will it impact breastfeeding/ decrease milk supply?	Low risk right after birth; No risk after 6 weeks	Low risk right after birth; Lowest after 6 weeks	Low risk right after birth, Lowest risk after 6 weeks. Some have increased milk if given after 72 hours	Moderate risk of decreasing milk supply			No
What are the side effects or risks?	Cramps and irregular bleeding for days to months after insertion, improves over time; falling out or wrong position; Small infection risk the 2 weeks after placement; decreased risk ovarian/ uterine cancer	Temporary arm bruise; Very rare serious harm to arm; Tiny scar; Decreased risk ovarian/ uterine cancer	Bone thinning; Increased appetite-> weight gain; Hair changes; breast tenderness; nausea; mood changes; headache; decreased risk ovarian/ uterine cancer	Rare clot in leg or chest; rare stroke; Hair changes; breast tenderness; nausea; mood changes; headache; decreased risk ovarian/ uterine cancer	Skin irritation at patch site; Rare clot in leg or chest; rare stroke; Hair changes; breast tenderness; nausea; mood changes; headache; decreased risk ovarian/ uterine cancer	Rare clot in leg or chest; rare stroke; Hair changes; breast tenderness; nausea; mood changes; headache; decreased risk ovarian/ uterine cancer	Hair changes, breast tenderness, nausea, mood changes, headache, decreased risk ovarian/ uterine cancer
What impact does it have on periods/ bleeding?	No period or irregular/light; heavy bleeding rare			Monthly, lighter, less cramps			Variable (period or no period, irregular/light)
Protects against most sexually transmitted infections?	No	No	No	No	No	No	No