

CONTRACEPTION DURING BREASTFEEDING

It's very important to discuss contraception options before you deliver. Discuss with your partner what is convenient and comfortable for both of you. Talk with your health care provider and ask questions. Your physician will provide you with information on methods of contraception. Although the sucking of the nipple helps prevent ovulation, breastfeeding moms CAN become pregnant. Do not rely solely on breastfeeding as a form of contraception. Below is a general guide to help you make an informed decision.

NON-HORMONAL CONTRACEPTION METHODS

The following may be used with NO impact on breastfeeding:

1. Condoms
2. Spermicides
3. Copper IUD: This is a long-term method of birth control. It releases copper which alters the lining of the uterus, inhibits egg transport, fertilization, sperm motility and integrity.
4. Natural Family Planning: This method involves tracking normal monthly changes in your body and determines whether you are likely to get pregnant on a given day. Your health care provider can instruct you on the rhythm method.
5. Bilateral Tubal Ligation: This method involves surgery and can be done at the time of a c-section or post-partum. Bilateral tubal ligation (tubal) is permanent sterilization meaning it is not reversible. With some insurance, you may need to sign a consent form 30 days prior to the surgery being performed so it is important that you discuss this form of contraception with your physician in advance.

HORMONAL CONTRACEPTION METHODS

The following may be used with POSSIBLE impact on breastfeeding:

1. The Minipill (Progestin-only oral contraception): The minipill contains only progestin and has a slightly higher failure rate than combination pills. A small amount of hormone may pass into the breast milk, but no harmful effects on infants have been documented. It is suggested that women switch to combination oral contraceptive pills once breastfeeding ends to help increase effectiveness of the pill.
2. Progesterone IUD (Progesterone Intrauterine Device): This IUD renders the lining of the uterus unfavorable for implantation, thickens the cervical mucus, and may inhibit ovulation. This is a long-term method of contraception and may be effective for up to five years.
3. Plan B (The Morning After Pill): Plan B is intended to prevent pregnancy after known or suspected contraceptive failure. It must begin within 72 hours after having sex. This is not intended to be a regular form of birth control. Plan B contains the hormone progestin. Small amounts of progestin can pass into breast milk, however, no side effects have been identified .

People react differently to medications and contraception. Certain contraceptive methods may adversely affect one woman's milk supply and have little or no effect on another. Consult your physician to discuss which method is best for you.

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