What are my birth control options postpartum?

Although in the first few weeks or months after delivery you may feel like you will never be sexual again, be assured that this will pass. Try not to worry too much about it. Patience and communication with your partner are very important. A lowered libido (sex drive) is expected while you are breastfeeding due to lower estrogen levels. Nature wants you to be nurturing this new baby rather than making another one. Your libido will return once breastfeeding occurs less often with an older baby or when weaning has occurred.

Depending on your plans for future pregnancy, there are a number of birth control (contraceptive methods) available. Don't forget to protect yourself from pregnancy until you are ready for another child, as well as using condoms for infection protection if this is a newer relationship. Speak to your health care provider about any questions specific to your situation.

Below is a list pointing out the special considerations in the postpartum period. For more information about a particular method please ask your midwife or doctor.

Oral contraceptive pill (OCP)

- •Can be started at 3 weeks if not breastfeeding
- •The combined pill (estrogen + a progestin) can decrease breast milk production so should not be used while breastfeeding.
- •The Progestin-Only Pill does not affect milk supply and can be used during breastfeeding. When combined with the decreased fertility of breastfeeding, it makes a great choice for breastfeeding Moms.

Contraceptive Patch or Vaginal Ring

•Similar to the combined OCP; start at 3 weeks if not breastfeeding & should not be used if breastfeeding. May be used with breastfeeding if a decrease in supply is not a concern to the mother baby pair (as with an older baby).

Intrauterine Device or Intrauterine System

- •Inserted into uterus by a midwife or doctor at 6 weeks after delivery if not breastfeeding and at 8 weeks if breastfeeding.
- Reliable, long-term birth control for up to 5 years (Mirena) up to 10 years (ParaGard) but can be removed at any time.
- •The hormonal intrauterine system is as effective as tubal ligation.

Injection Depo-Provera™

•One shot every 12 weeks

- •Can be given postpartum regardless of breastfeeding.
- •No known effects on breast milk or infant ingestion of the hormone

Barrier Methods

- •Hormone-free, only needed when you are actually having sex
- •Condoms can be used anytime, and are commonly used temporarily while breastfeeding or to space out babies
- •Use non-spermicidal condoms with lots of extra water-based lubricant to avoid vaginal irritation
- •Diaphragms and cervical caps need to be re-fitted at 6 weeks postpartum

Emergency Contraception

- Emergency Contraception (EC) pills are effective up to 5 days after unprotected intercourse but best if used within the first 24-48 hours.
- Emergency IUD is available up to 7 days after unprotected intercourse

Sterilization

Female sterilization = tubal ligation

- •Permanent; only for couples who are absolutely sure their family is complete
- Abdominal surgery
- •Can be performed the day after delivery while still in hospital through a 2 3 cm incision at the belly button
- •Or, laparoscopically through one or 2 small incisions after 6 weeks
- •Or hysteroscopically, where two small coils are placed in the openings of the tubes into the uterus

Male sterilization = vasectomy

- •Permanent; only for couples who are absolutely sure their family is complete
- •An outpatient procedure
- •Less risk and more effective than tubal ligation