

# Birth Control Comparison Chart

## TYPE OF BIRTH CONTROL

## EFFICACY

## EFFECTS ON LACTATION

### LAM | Lactation Amenorrhea Method

- Period has not returned
- Exclusive breastfeeding without supplementation  
*\*\*with feeding intervals being no greater than 4 hours during the day and 6 hours at night*
- The infant is less than 6 months

*\*If any of these are not true, you are at risk of pregnancy*

### Failure Rate

- Less than 2%

### Adverse Effects

- None

### Withdrawal Method

### Failure Rate

- Up to 22%

### Adverse Effects

- None

### Barrier methods

- Diaphragm Cap
- Spermicide
- Condoms
- Sponge

### Failure Rate

- 17%
- 21%
- 13.1%
- Failure rate 14% for women who have not had a baby. 27% failure rate for women who have had a baby.

### Adverse Effects

- None
- None
- None
- None

### Oral Contraception

- **The Pill** | This is an oral combination pill containing the hormones estrogen and progestin that must be taken at the same time daily.

### Failure Rate

- 7%

### Adverse Effects


- Birth control with estrogen has been linked to reduced milk supply and early cessation of breastfeeding even if started after breast milk supply is well established. Use with caution.


TYPE OF BIRTH CONTROL	EFFICACY	EFFECTS ON LACTATION
<p><b>Oral Contraception</b></p> <ul style="list-style-type: none"> <li>• <b>The Mini Pill</b>   This is an oral pill containing the hormone progestin that must be taken at the same time daily.</li> </ul>	<p><b>Failure Rate</b></p> <ul style="list-style-type: none"> <li>• 7%</li> </ul>	<p><b>Adverse Effects</b></p> <ul style="list-style-type: none"> <li>• Most mothers do not experience milk supply problems if started after 6-8 weeks.</li> </ul>
<p><b>Hormonal Vaginal Contraceptive Ring</b></p> <ul style="list-style-type: none"> <li>• <b>Nuva Ring</b>   The hormones estrogen and progestin are absorbed transvaginally with this method. It is removed after 3 weeks then removed for one week to induce a period.</li> </ul>	<p><b>Failure Rate</b></p> <ul style="list-style-type: none"> <li>• 7%</li> </ul>	<p><b>Adverse Effects</b></p> <ul style="list-style-type: none"> <li>• Potential negative impact on milk supply. Recommend to wait until after breast milk supply and breastfeeding has been established.</li> </ul>
<p><b>Injection or “shot”</b></p> <ul style="list-style-type: none"> <li>• <b>Depo Provera</b>   This is a systemic birth control containing the hormone progestin. Women get a shot every 3 months in the buttocks or arm.</li> </ul>	<p><b>Failure Rate</b></p> <ul style="list-style-type: none"> <li>• 4%</li> </ul>	<p><b>Adverse Effects</b></p> <ul style="list-style-type: none"> <li>• Potential impact on supply when started in the early postpartum period. Recommended to wait to establish breast milk supply. Many IBCLC report an association with milk supply problems and early administration.</li> </ul>
<p><b>Hormonal Implants</b></p> <ul style="list-style-type: none"> <li>• <b>Nexplanon</b>   A single, thin rod that is inserted under the skin of a woman’s upper arm. This contains the hormone progestin and is released into the body over 3 years.</li> <li>• <b>IUD Copper (ParaGard)</b>   This is an intrauterine device that does not contain hormones. It can be placed for up to 10 years.</li> </ul>	<p><b>Failure Rate</b></p> <ul style="list-style-type: none"> <li>• 0.1%</li> <li>• 0.8%</li> </ul>	<p><b>Adverse Effects</b></p> <ul style="list-style-type: none"> <li>• If placed right after birth, it is associated with shorter breastfeeding outcomes. Recommended to wait 6 weeks or later when breast milk production has been established.</li> <li>• No known risks</li> </ul>

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<p><b>Hormonal Implants</b></p> <ul style="list-style-type: none"> <li> <b>Levonorgestrel IUD (Mirena)</b>            This is an intrauterine device that contains the progestin hormone. It can be placed for up to 6 years.         </li> <li> <b>Transdermal Patch  </b> The patch releases progestin and estrogen hormones into the blood stream. It is worn for 3 weeks then removed for one week to induce a period.         </li> </ul>	<p><b>Failure Rate</b></p> <ul style="list-style-type: none"> <li>0.1-0.4%</li> <li>7%</li> </ul>	<p><b>Adverse Effects</b></p> <ul style="list-style-type: none"> <li>If placed immediately, may be associated with shorter breastfeeding duration. No negative effects reported when placed after 6 weeks postpartum.</li> <li>Breastfeeding women should use this on the lowest dose possible and started after breastfeeding has been well established. Estrogen in contraception has been associated with lowered supply. Use with caution.</li> </ul>
<p><b>Permanent Methods of Birth Control</b></p> <ul style="list-style-type: none"> <li>Female tubal ligation or 'tying tubes'</li> <li>Male Vasectomy</li> </ul>	<p><b>Failure Rate</b></p> <ul style="list-style-type: none"> <li>0.5%</li> <li>0.1%</li> </ul>	<p><b>Adverse Effects</b></p> <ul style="list-style-type: none"> <li>None</li> <li>None</li> </ul>

## References

 <https://abm.memberclicks.net/assets/DOCUMENTS/PROTOCOLS/13-contraception-and-breastfeeding-protocol-english.pdf>

 <https://www.llli.org/breastfeeding-info/birth-control/>

 Goulding Alison N., Wouk Kathryn, and Stuebe Alison M., Contraception and Breastfeeding at 4 Months Postpartum Among Women Intending to Breastfeed. Breastfeeding Medicine. January 2018, 13(1): 75-80.

 U.S. Selected Practice Recommendations for Contraceptive Use, 2016, K. Curtis et al, Division of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion

 <https://www.cdc.gov/reproductivehealth/contraception/index.htm>