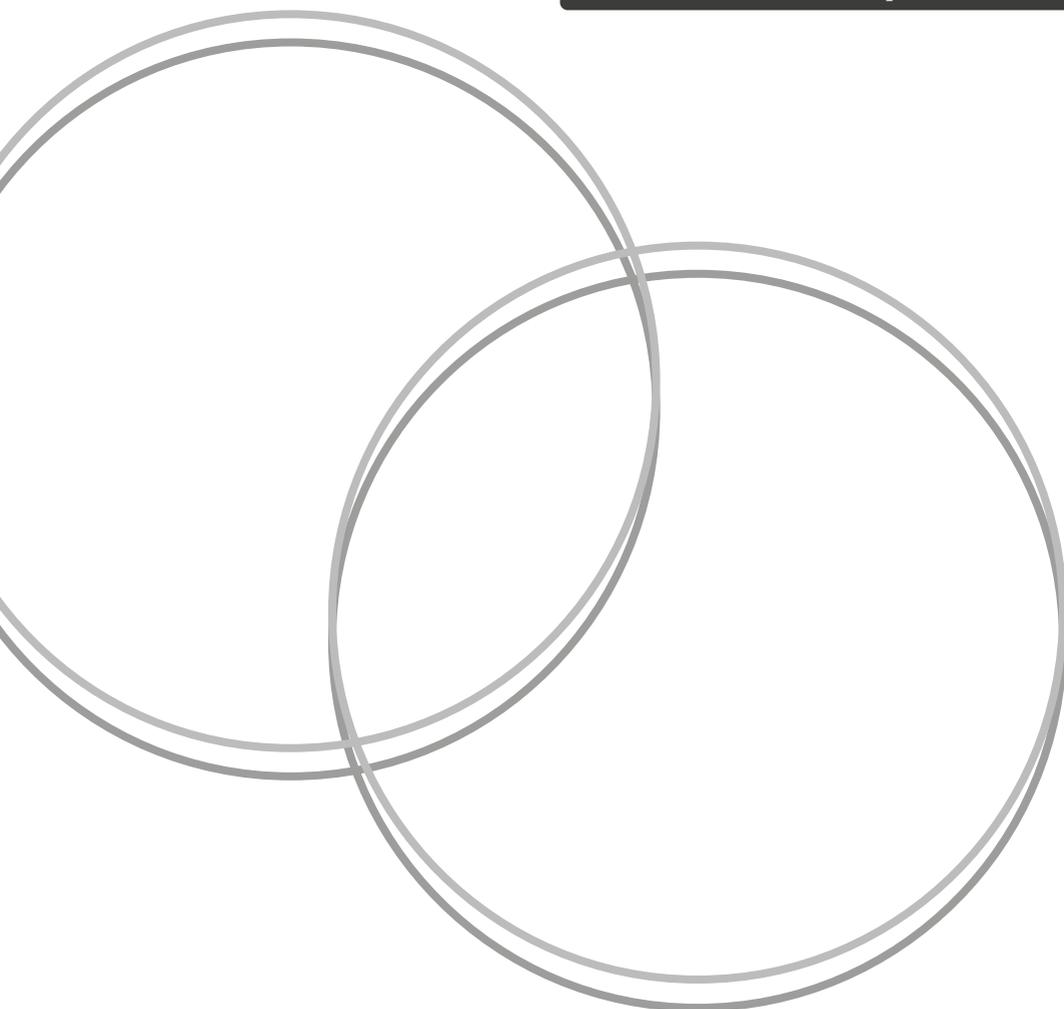


# Contraceptive Choices Following an Early Pregnancy Loss

Information for patients



This leaflet is to provide you with the options available regarding contraception. However not all options are available to be administered by the Gynaecology Ward, but we can sign post you to which department may.

After a miscarriage or ectopic pregnancy, you may need time to recover both emotionally and physically. Some women or couples decide that they may need more time in between pregnancies or may not wish to become pregnant, so it is important to start contraception as soon as possible.

The type of contraception you choose, should best meet your current needs, also considering your medical history and lifestyle.

This leaflet provides a summary of all the contraception options available to you after an early pregnancy loss.

# The Desogestrel Pill

## What is it?

This pill contains a type of hormone called progesterone which is taken every day. It is sometimes called the 'mini-pill'.

## How does it work?

It mainly works by creating a mucous plug at your cervix (blocking sperm from entering), and by making the lining of the womb thin so a fertilised egg cannot implant and grow.

## When can I start this pill?

You can start this pill straight away after a pregnancy loss or you can wait some time and start at any time in your menstrual cycle.

## How long does it take to work as contraception?

If started immediately from pregnancy or first day of your period and up to the 5th day of your cycle it will cover, you in terms of contraception immediately.

If you start this pill any other time in your cycle, you will need to use other contraceptive methods such as a condom for the first 2 days of pill taking to protect you from pregnancy.

## When is it effective as contraception?

If taken during the first 5 days of your period, you will be protected from pregnancy immediately. You can start this pill up to and including the 5th day of your period and you will be protected from pregnancy immediately.

If started after the 5th day you may not be protected from pregnancy and will need to use additional contraction (such as condoms) or abstain from sex.

## How effective is this pill?

99% effective if used correctly. Less than 1 in 100 women would fall pregnancy each year.

However, in more typical use it is about 91% effective. This will be due to reasons such as forgotten pills, vomiting and diarrhoea.

## **How do I take this pill?**

You must take it at the same time each day with no breaks.

## **What do I do if I miss a desogestrel pill?**

You are not protected against pregnancy if you are more than 12 hours late for your pill. If this happens, take your pill immediately. For the next pill take at the usual time. You must use condoms or abstain from sex for the next 48 hours after remembering to take your pill. If you had sex after missing your pill you may need emergency contraception. Contact your local sexual health service who can discuss this with you.

## **What are the advantages?**

- It is very safe.
- In many women it improves heavy or painful periods. For some women they will get no period, this is normal, and your period will resume once you stop the pill.
- You can use it if you are breastfeeding.

## **What are the disadvantages?**

- You must remember to take it at the same time every day.
- Some women get irregular bleeding.
- Some women get hormonal side effects (such as headaches, breast tenderness, mood and skin changes).
- It does not protect against sexually transmitted infections.

# Mirena Coil

## What is it?

The Mirena coil is a small T-shaped plastic device which is inserted into your womb by a doctor or nurse. It releases progestogen hormone into the womb and acts as contraception for 3 to 6 years depending on the type inserted.

## How does it work?

This coil continuously releases a low dose of levonorgestrel, which works to thicken the mucus at the entrance of the womb stopping sperm from reaching an egg. This device also thins the lining of the womb (endometrium) to prevent the egg from implanting and because of this periods often become lighter and infrequent.

## When can the Mirena Coil be started?

This coil can be fitted at any time during your menstrual cycle.

It can also be fitted immediately after a pregnancy loss under 24 weeks.

If you are having surgical management of your pregnancy loss, the coil can be fitted during the procedure so please let your doctor know if this were something you would like to do.

## How effective is the Mirena Coil?

This coil is 99% effective. Less than 1 user in 100 will get pregnant in one year.

## When is it effective as contraception?

If this device is fitted in the first 7 days of your menstrual cycle it is effective immediately.

If it is fitted at any other time, you will need to use additional contraception (such as condoms) or avoid having sex for 7 days after having the coil fitted.

## **What are the advantages?**

- Very effective, safe, and long-term form of contraception.
- Periods usually become much lighter, shorter, and sometimes less painful. Periods may stop completely - and return when the coil is removed.
- You can use it if you are breastfeeding.
- Your fertility returns to normal as soon as it is removed.
- It is not affected by other medicines.

## **What are the disadvantages?**

- You can experience irregular bleeding for up to 6 months following fitting of the device.
- Some women get hormonal side effects (such as headaches, hair loss, breast tenderness, changes to sex drive, mood and skin changes).
- You will need an internal examination when the device is fitted.
- It does not protect against sexually transmitted infections.
- Although incidence of ovarian cysts may be elevated during coil use, this does not appear to be clinically significant.
- A history of ovarian cysts or polycystic ovary syndrome is not a contraindication to coil use.

# **Copper Coil**

## **What is it?**

The copper coil is a small T-shaped copper (metal) and plastic device which is inserted into your womb by a doctor or nurse. This coil does not contain any hormones and acts as contraception for 5 to 10 years depending on the type inserted.

## **How does it work?**

The copper in the device stops sperm from surviving in the cervix or womb. The device thickens the mucus in the cervix preventing the sperm from reaching an egg. It also can stop a fertilised egg from implanting in the womb.

## **When can the Copper Coil be started?**

This coil can be fitted at any time during your menstrual cycle.

It can also be fitted immediately after a pregnancy loss.

If you are having surgical management of your pregnancy loss, the coil can be fitted during the procedure so please let your doctor know if this were something you would like to do.

## **How effective is the Copper Coil?**

99% effective at preventing pregnancy. 1 in 100 women will get pregnancy in the first year of use.

## **When is it effective as contraception?**

Immediately after it has been fitted.

## **What are the advantages?**

- Very effective, safe, and long-term form of contraception.
- Avoid hormone side effects.
- You can use it if you are breastfeeding.
- It is not affected by other medicines.
- Your fertility returns to normal as soon as it is removed.

## **What are the disadvantages?**

- Periods may become heavier, longer, or more painful.
- A small procedure including an internal examination is needed to fit the device. Good pain relief is used but it can still be a little uncomfortable – like mild period pain – for some people. If you are having surgical management of your pregnancy lost it can be fitted when you are under anaesthetic.
- It does not protect against sexually transmitted infections.

# Depo Injection

## What is it?

An injection of a type of hormone called progesterone which you get every 12 weeks either in your buttock, thigh or abdomen depending on the injection type.

## How does it work?

It works by stopping you from ovulating (releasing an egg) each month. This is temporary and ovulation resumes when the injection is stopped.

The injection also thickens the mucus at your cervix making it difficult for sperm to get into the womb and reach an egg.

It also makes the lining of your womb thin so a fertilised egg cannot implant and grow. Because it is so good at keeping the womb lining thin your bleeding pattern may change to lighter, less frequent periods or no bleeding at all.

## When can the depo injection be started?

It can be given at any time during your menstrual cycle or after a pregnancy loss.

## How effective is the depo injection?

The injection is 99% effective. 1 in 100 women would fall pregnancy with the injection in a year.

## When is it effective as contraception?

If the injection is started during the first 5 days of your period, you will be protected from pregnancy immediately.

If started on any other day you will not be protected from pregnancy and will need to use additional contraction (condoms) or abstain from sex.

## What are the advantages?

- It lasts for 12 weeks.
- It is a more effective contraception than condoms or pills.

- In many women it improves heavy or painful periods.
- You can use it if you are breastfeeding.
- It is not affected by other medicines.

### **What are the disadvantages?**

- Irregular bleeding may be a side effect. It is normal to have some irregular bleeding in the first few months of having an implant in, this usually settles but if you continue to have irregular bleeding, please do see your GP or sexual health clinic to see how this can be managed.
- Some women get hormonal side effects (such as weight gain, headaches, breast tenderness, mood, and skin changes).
- You must remember to get the injection every 12 weeks for it to work.
- It can take a while for your fertility to return after your last injection – up to a year.
- It does not protect against sexually transmitted infections.

## **Implant**

### **What is it?**

The implant is a small, flexible rod, the size of a matchstick, that is placed under the skin of your upper arm. It releases a progestogen hormone and works for 3 years.

### **How does it work?**

The implant stops your ovaries releasing an egg each month (ovulation). This is temporary and when you take the implant out, normal ovulation function returns.

It also thickens the mucus from your cervix which makes it difficult for sperm to move through it and reach an egg.

The implant also makes the lining of your womb thinner to stop a fertilised egg implanting.

This also means your bleeding pattern may change and periods may be lighter, more infrequent.

## **When can the Implant be started?**

The implant can be fitted at any time during your menstrual cycle or after a pregnancy loss.

## **How effective is the Implant?**

99% effective. Fewer than 1 in 1000 implant users will get pregnancy in the first year of use. It is the most effective form of contraception.

## **When is it effective as contraception?**

If the implant is put in during the first 5 days of your period or immediately after pregnancy loss, you will be protected by this contraceptive instantly.

If the implant is put in later in your cycle, you will need to use additional contraception (condoms) or abstain from sex for 7 days until it has time to start working as contraception.

## **What are the advantages?**

- It works as contraception for 3 years.
- Your fertility will return to normal as soon as the implant is removed.
- It may reduce heavy, painful periods.
- It may improve acne for some people.
- You can use it if you are breastfeeding.

## **What are the disadvantages?**

- Some women get hormonal side effects (such as headaches, breast tenderness, mood, and skin changes).
- Irregular bleeding may be a side effect. It is normal to have some irregular bleeding in the first few months of having an implant in, this usually settles but if you continue to have irregular bleeding, please do see your GP or sexual health clinic to see how this can be managed.

- It will not work if you use enzyme inducing drugs (such as medicines used to treat HIV, epilepsy, TB and St John's Wort). Always remember to tell a healthcare professional you have an implant before they prescribe you any medicine.
- It does not protect from sexually transmitted infections.

## Further Information

You can contact **your GP** or **Oxford Sexual Health Service** to discuss the different contraception choices or book a consultation visit:

[www.sexualhealthoxfordshire.nhs.uk/contraception/](http://www.sexualhealthoxfordshire.nhs.uk/contraception/)

### Contraception Choices

For more information on the different contraception methods visit:

[www.contraceptionchoices.org](http://www.contraceptionchoices.org)

### The Low Down

For more information on the different contraception methods

[thelowdown.com/](http://thelowdown.com/)

## Further information

If you would like an interpreter, please speak to the department where you are being seen.

Please also tell them if you would like this information in another format, such as:

- Easy Read
- large print
- braille
- audio
- electronic
- another language.

We have tried to make the information in this leaflet meet your needs. If it does not meet your individual needs or situation, please speak to your healthcare team. They are happy to help.

Author: Gynaecology Ward Sister, Gynaecology Patient Information  
Co-ordinator, Gynaecology Practice Development Nurse.  
December 2023  
Review: December 2026  
Oxford University Hospitals NHS Foundation Trust  
[www.ouh.nhs.uk/information](http://www.ouh.nhs.uk/information)



*Making a difference across our hospitals*

[charity@ouh.nhs.uk](mailto:charity@ouh.nhs.uk) | 01865 743 444 | [hospitalcharity.co.uk](http://hospitalcharity.co.uk)

OXFORD HOSPITALS CHARITY (REGISTERED CHARITY NUMBER 1175809)

