Post-partum contraception

Motherhood is a unique experience for every woman. It is the joy one experiences before giving birth to a child. You can give joy to you and your family including new born by keeping optimum spacing between your children.

For full recuperation of your health from the last pregnancy and for maintaining the health of your newborn baby, it is best if you wait at least two/later than four months after a live birth before attempting the next pregnancy.

You and your husband should discuss and plan to use one of the reliable contraceptive methods of your choice.

If you do not wish to have a child in the next few years or do not wish to have more children, there are several ways of delaying births.

There are a range of contraceptive methods available at government hospitals and health centres. Some methods are also available at pharmacies, private clinics or with ASHAs.

Following are key points for reversible contraceptive methods

**Reversible methods**

1. Lactational Amenorrhea Method
2. Progesterone – Only –Pills (POP)
3. Injectable contraceptives
4. Chhaya (Centchroman)
5. PPIUCD (Post-partum Intrauterine contraceptive device)
6. Condoms

** Permanent methods**

1. Male sterilization
2. Female sterilization

**1. Lactational Amenorrhea Method**

In the first 6 months after delivery, if you are exclusively breastfeeding your baby (feeding the baby day and night, not giving her/him water or other food), and your periods have not returned, you can rely on LAM (breastfeeding) method. Your risk of becoming pregnant is only 2%.
**Lactational Amenorrhea (LAM)**

- A breastfeeding woman can use LAM if she meets all three criteria at the same time.

  1. No monthly bleeding since baby was born.
  2. You only breastfeed your baby, day and night. No other food or liquids are given.
  3. Baby is less than 6 months old.

- LAM (breastfeeding method) is 98% effective with consistent and correct use.

**Remember that you must start using another method even before 6 months if:**

- Your periods return before 6 months, or
- If you start giving any external food or liquids or water to the child.

At 6 months after delivery, even if your periods have not returned you must start using another contraceptive method.

**2. Condoms**

- Condoms can be started any time after delivery. They have no effect on breastfeeding.
- 87% Effective if used correctly every time.
- Offer the dual protection of preventing unwanted pregnancies as well as transmission of Reproductive Transmitted Infection/Sexually Transmitted Infection (RTI/STI) including HIV.

**3. Progesterone–Only–Pills (POP)**

- Can be started any time after delivery, if needed by breastfeeding women.
- When started before 6 months, and her monthly periods have not returned, these pills can be started any time.
- Very effective during breastfeeding - 99%.
- After stopping these pills, women’s fertility is resumed without any delay.
- Woman has to take one pill daily on same time (within a window of 3 hours).
- If not breastfeeding, spotting and unexpected light bleeding are common, which is not harmful and normal.
4. Injectable contraceptives/DMPA (Antara)

- A breastfeeding woman can start using DMPA after 6 weeks of delivery.
- Very effective (failure rate is only 0.3%).
- No other person comes to know that you are using this method.
- One injection every 3 months.
- There is a window period of 2 weeks before and 4 weeks after.
- Many women have menstrual changes or amenorrhea with use of DMPA, but it is not harmful.
- After stopping DMPA injection, it takes 4-6 months extra before a woman can become pregnant.

5. Chhaya (Centchroman)

- A breastfeeding mother can use Chhaya pills after childbirth.
- Very Effective method – failure rate is only 1-2%.
- Only available in India.
- Easy to use, one pill twice a week for first three months, followed by once a week thereafter.
- Some women can have delayed menstrual periods.

6. IUCD

- A breastfeeding mother can use IUCD immediately after delivery of placenta, or within 48 hours of delivery, or after 6 weeks of delivery.
- It is a reversible method and IUCD can be removed by health care provider when women wants to conceive.
- Two varieties of IUCD are available which are effective for 5 & 10 years.
- In the first 3-4 months, the menstrual bleeding is heavier, and can be irregular. There can be cramps or pain in lower abdomen during menstrual bleeding in some women.
- In most women, these problems subside after 3-4 months.
Following are key points for permanent contraceptive methods

<table>
<thead>
<tr>
<th>Male Sterilization</th>
<th>Female sterilization</th>
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<tbody>
<tr>
<td>It is an operation for men, where his tubes carrying sperms are cut or tied.</td>
<td>It is an operation for women, where her tubes carrying ovum are cut or tied.</td>
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<tr>
<td>Simple, convenient surgery, done by trained provider in few minutes</td>
<td>Simple surgery done by trained provider in few minutes</td>
</tr>
<tr>
<td>Can be done at any time</td>
<td>Can be done right after child birth, within 48 hours after delivery or after 6 weeks. It can be done along with caesarean section as well.</td>
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<tr>
<td>Very effective</td>
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<tr>
<td>No effect on sexual ability or feeling</td>
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</tr>
<tr>
<td>The couple will need to use contraception for at least 3 months after the operation.</td>
<td>It’s very difficult to reverse, so be sure it’s right for you.</td>
</tr>
<tr>
<td>As with any surgery, there’s a small risk of complications such as infection, swelling, or pain in scrotum.</td>
<td>No effect on menstrual periods</td>
</tr>
<tr>
<td>It’s very difficult to reverse, so be sure it’s right for you.</td>
<td>As with any surgery, there’s a small risk of complications, such as internal bleeding, infection or damage to other organs</td>
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</tbody>
</table>

We hope that above information will help you to decide and plan timely for any contraceptive method. For more information, please contact ANM/ASHA.