

# A what's-what (and why it's wrong) guide to 21st-century contraception

by Kathleen M. Basi

The past few decades have seen a proliferation in the types of contraceptives available on the market. But what do they all do? With the help of Marshall, Mo., physician and CCL teacher Thomas Papreck, *Family Foundations* breaks down what they are and why they're problematic on moral and health levels.

## Barrier methods

### TYPES

- Condoms (male and female)
- Internal: diaphragm, cervical cap, shield, sponge, foam, suppository, film (placed inside the vagina and used in conjunction with spermicides)

### WORKS BY

Preventing sperm from reaching the egg and, in some cases, by killing sperm

### RECOMMENDED BY CULTURE BECAUSE

- Offer some protection from sexually transmitted infection
- Condoms are available with little planning required

### MORALLY PROBLEMATIC BECAUSE

- Frustration of the potential for the life-creating potential of sexual intercourse
- Separation of the pleasurable/unitive function of sex from its procreative function

- Do not enable a complete self-gift and, instead, allows a couple to withhold part of themselves from their spouse  
*(These factors apply to every contraceptive and will not be mentioned again.)*

### WHAT ELSE YOU SHOULD KNOW:

- Diaphragms can cause bladder infections.
- Condoms can be prone to breakage.
- Aesthetics: use of barrier/spermicides is messy and unappealing.
- If left in too long, the internal methods slightly increase a woman's risk for toxic shock syndrome.
- The cervical cap, diaphragm and sponge must be left in for several hours after intimacy to be effective.
- Dr. Papreck says: "Used over time, the spermicide nonoxynol-9 can cause inflammation of the vaginal lining, which can increase your susceptibility to HIV and other sexually transmitted disease."

## Hormonal

### TYPES

- Oral (combined, containing both estrogen and progestin), and the progestin-only (also known as the mini-pill)
- Implants (Implanon), progestin-only, lasting three years
- Injectables, progestin-only (Depo Provera)
- Vaginal ring (uses estrogen and progestin; left in the vagina for three weeks and discarded when bleeding starts)
- Patch (worn for three weeks and removed to stimulate a bleed)

### WORKS BY

Combination forms work by:

1. preventing ovulation
2. thickening the cervical mucus, which inhibits sperm migration
3. thinning the uterine lining, making it more difficult for a fertilized egg to implant (an abortive, not a contraceptive, function)

Progestin-only forms work primarily by thickening the cervical mucus and thinning the uterine lining. Sometimes, but not usually, they prevent ovulation.

### RECOMMENDED BY CULTURE BECAUSE

Highly effective and easy to use. Hormones are used to mask symptoms of PMS, acne and endometriosis.

### MORALLY PROBLEMATIC BECAUSE

Dr. Papreck says: "Breakthrough ovulation with oral contraceptives can vary from as low as 1.1 percent with formulations using higher amounts of estrogen to 42.6 percent with traditional progestin-only pills." (Lower doses of hormones are commonly used because side effects are less extreme.)

Some medical professionals deny that breakthrough ovulation will

lead to failure to implant. If estrogen is sufficient to allow ovulation, they say, it is also sufficient to build up the uterine lining.

Dr. Papreck notes that ACOG and NIH redefined when pregnancy begins. “If there weren’t concerns about what was going on in the artificial hormonal environment, what was the impetus behind redefining pregnancy as occurring at implantation rather than conception?” he said.

**WHAT ELSE YOU SHOULD KNOW**

- Pills, particularly progestin-only forms, have to be taken at the same time every day (no more than three hours difference)
- Hormonal birth control is not immediately reversible. Implants last for three years; injections for two to three months. Even oral hormones often negatively impact fertility for weeks or months after they are discontinued.
- Side effects can include:
  - Headaches
  - Depression
  - Decreased libido
  - Weight gain
  - Heart disease, high blood pressure, blood clots
  - Increased risk of some breast cancers
- Increase in the development of cervical dysplasia (abnormal cells on the cervix), which, in combination with HPV, can lead to cervical cancer.
- Implants can cause irregular bleeds.
- Injectables can cause bone loss. Used over time, it can increase the risk of osteoporosis.
- Antibiotics reduce effectiveness in oral contraceptives.



**Intrauterine devices (IUD)**

**TYPES**

- Hormonal
- Copper-based

**WORKS BY**

This T-shaped device is inserted into the uterus. All IUDs prevent implantation. Hormonal IUDs also release progestins. Copper IUDs slowly release copper, which inhibits sperm migration.

**RECOMMENDED**

**BY CULTURE BECAUSE**

It’s very effective and low-maintenance.

**MORALLY PROBLEMATIC BECAUSE**

Dr. Papreck says: “The IUD is still the most objectionable method, because even the newest hormone-releasing IUDs are admitted to cause at least some of their effectiveness through ‘post-fertilization mechanisms’ (read abortifacient).”

**WHAT ELSE YOU SHOULD KNOW**

There is a push underway to encourage women to abandon other forms of birth control in favor of IUDs because there is no “user” effectiveness involved.

**Sterilization**

**TYPES**

- Vasectomy: tying off and cutting the tubes that carry sperm.
- Tubal ligation: cutting and tying the Fallopian tubes.
- Non-surgical (female): placing a coil in each Fallopian tube so that scarring forms, blocking the tubes.

**WORKS BY**

Blocking the tubes that transport sperm and egg

**RECOMMENDED BY CULTURE BECAUSE**

Easy and highly effective, without maintenance costs.

**MORALLY PROBLEMATIC BECAUSE**

Catholic teaching forbids damaging a healthy, functioning system of the body.

**WHAT ELSE YOU SHOULD KNOW**

Sterilization does have a failure rate, although it is low (.5 percent for women, .15 percent for men)

**Emergency contraception (morning after pill)**

**TYPES**

- Progestin-only (Plan B)
- Ulipristal acetate (Ella)
- Combined (some ordinary BCPs can be used in this way)
- Copper T IUD

**RECOMMENDED BY CULTURE**

As an “oops” method.

**MORALLY PROBLEMATIC BECAUSE**

Emergency contraception is meant to be used up to 5 days after intercourse. It is possible, depending on where a woman is in her cycle, that the high dose of hormones will prevent ovulation. If a couple has sex during the day or two around ovulation, however, conception can occur before the emergency contraception is taken, which means it works by preventing implantation.

**WHAT ELSE YOU SHOULD KNOW**

- Their effectiveness is lower than other birth control methods.
- Side effects can include nausea, headache, tiredness or dizziness, abdominal pain, breast tenderness, and bleeding.

*Editor’s note: Data collected from the Association of Reproductive Health Professionals, WebMD and Princeton’s “The Emergency Contraception Website.”*