

Birth Control and Breastfeeding

A Resource for Professionals

This resource outlines contraceptive options and how they may impact breastfeeding. The following chart is a list of birth control methods and a rating of first, second or third choice for breastfeeding, followed by a description of each method. Client's needing additional information should be directed to speak with their health care provider about their specific situation.

Method	Effect on Breastfeeding
Lactational Amenorrhea Method	Positive Effect
Barrier Methods: Condoms	None
Non-hormonal Method: Copper IUD	None
Hormonal Methods Containing Progestin:	No proven effect on infant from hormone. No adverse effects on breastmilk supply if breastmilk supply is well established.
- IUS (Mirena™, Jaydess™)	
- Progestin-only pill (Micronor™)	
- Progestin injectable (Depo Provera™)	
Hormonal Methods Containing Estrogen & Progestin:	No proven effect on infant from hormones. Studies have shown that estrogen reduces breastmilk supply.
- Oral Contraceptive Pill	
- The Patch (Evra™)	
- The Vaginal Ring (NuvaRing™)	
Natural Family Planning	None
- Wait until period returns	

Lactational Amenorrhea Method (LAM)

- Short-term (first six months after delivery)
- 98% reliable if used perfectly
- Breastfeeding often, both day and night, delays the return of menstruation and suppresses fertility
- The three key questions for LAM to be a safe birth control method are:
 1. Has your period returned? (a period is two days of bleeding in a row, that occurs 8 weeks after the date of delivery).
 2. Are you giving your baby other drinks or feeding solids, so that there are long periods without breastfeeding? (longer than four hours in the day and six hours at night).
 3. Is your baby more than six months old?

If the client answers “no” to all three questions, they have less than a 2% chance of becoming pregnant.

If the client answers “yes” to any one question, they should use another birth control method, or combine LAM with another method, to protect themselves from pregnancy.

Barrier Methods

- Male and Female Condoms available
- Act as a barrier so that sperm do not enter the uterus and fertilize an egg.
- Made of latex, or polyurethane
- Provide protection from sexually transmitted infections

Copper Intrauterine Device (IUD)

- Small plastic T-shaped device that contains copper
- Inserted into uterus by health care provider as early as six weeks after delivery
- Causes changes in the uterus so that sperm cannot fertilize an egg
- Can stay in place up to 5-10 years

Hormonal Methods Containing Progestin

Hormonal methods are not the first choice for breastfeeding mothers. Taking hormones can cause a decrease in milk supply. Also, newborns may have difficulty removing the hormones from their system. These methods are only available with a prescription from a health care provider.

How they work:

- Prevent ovary from releasing an egg
- Thicken cervical mucus which slows movement of sperm through cervix
- Change lining of uterus, making implantation difficult
- Can be started six weeks after delivery; if used earlier, may affect establishment of milk supply

Intrauterine System (IUS)

- Small plastic T-shaped device that slowly releases progestin into uterus
- Inserted into uterus by health care provider as early as six weeks after delivery
- Works by thickening cervical mucus making it difficult for sperm to reach egg; causes changes in the lining of the uterus that helps prevent implantation; may prevent ovary from releasing an egg in some women
- Can stay in place three to five years depending on brand
- Has been shown to possibly reduce milk supply in some mothers due to presence of progestin

Possible Issues with Copper IUD and IUS

Irregular bleeding or spotting in the first few months after insertion

Increased bleeding or cramping (IUD)

Reduced bleeding and in some cases, no periods (IUS)

Expulsion (IUD/IUS falls out)

Perforation (rare) (making a small hole in the uterus)

Progestin-Only Minipill (Micronor™)

- Needs to be taken at the same time every day
- Less effective if taken late or missed a pill

Progestin-Only Injectable (Depo-Provera™)

- Injected every three months
- May decrease bone-mineral density

Hormonal Methods Containing Estrogen

Estrogen-containing birth control methods are not recommended until six months after delivery due to the estrogen reducing a mom's ability to produce enough breast milk. At six months, the baby is starting on solids and this can help him deal with the drop in milk supply. Estrogen pills are not recommended for mothers with blood-clotting problems, certain cancers, or severe migraines. These methods cannot be used by women who are over 35 years and who smoke, due to increased risk of blood clots.

How they work:

- Prevent ovary from releasing an egg
- Thicken cervical mucus which slows the movement of sperm
- Changes the lining of the uterus making implantation difficult

Oral Contraceptive Pill

Combination estrogen and progestin pill

- Dosage varies depending on brand
- Taken daily for 21 days, off for 7 days (which is when period occurs)
- Needs to be taken at same time every day

The Patch (Evra™)

- A patch that releases hormone through the skin
- A new patch is applied once a week for three weeks, then one week without a patch (which is when period occurs)

The Vaginal Ring (NuvaRing™)

- Flexible ring, inserted by the mother into the vagina for three weeks, then removed for one week (which is when period occurs)
- Releases a continuous dose of hormones for three weeks while it is in the vagina

Natural Methods

Natural Methods such as the Calendar Method and the Sympto-Thermal method require clients to track fertility signs and avoid sex during fertile times. These signs can be hard to read during breastfeeding and may be easier to use and more reliable after menstruation returns and is regular.

References

Mohrbacher, Nancy (2010). *Breastfeeding Answers Made Simple: A Guide for Helping Mothers*. Amarillo, Texas: Hale Publishing.

The Society of Obstetricians and Gynaecologists of Canada (2004). *SOGC Clinical Practice Guidelines: Canadian Contraception Consensus*. Retrieved from http://sexualityandu.ca/uploads/files/CanadianContraceptionConsensus_2004.pdf

For additional information, see: www.healthunit.com/breastfeeding-birth-control