

## **Postpartum Contraception and Returning to Intimacy**

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### **What are their family planning goals?**

- Number of children
- Spacing of pregnancies

### **What other issues might they want to be addressed?**

- Heavy and/or painful periods?
- Mood disorders associated with hormones?
- Acne?
- Irregular cycles and hair growth? (PCOS)

### **Are there any reasons they shouldn't choose one type of birth control?**

- Migraines with aura (estrogen)
- Smoker over age of 35 (estrogen)
- History of blood clots (estrogen)
- Breast cancer (estrogen)
- Liver disease (estrogen)
- Certain medications that may lead to drug interactions\*

### **What has worked for them in the past? What hasn't?**

#### **How devastating or celebrated would a pregnancy be to them?**

- Would it be celebrated, or would it be challenging?

<b>Natural</b>	<b>Hormonal</b>	<b>Non-Hormonal</b>
<p><u>Fertility awareness</u> (240/1000)</p> <ul style="list-style-type: none"> <li>- avoiding intercourse 5 days prior and 1 day after ovulation, cervical mucus, basal body temperature, and ovulation strips.</li> </ul> <p><u>Lactational amenorrhea</u> (20/1000)</p> <ul style="list-style-type: none"> <li>- exclusively breastfeeding day and night (up to 6 months) has not had a return of menses</li> </ul> <p><u>Coitus Interruptus/withdrawal</u> (220/1000)</p>	<p><u>Oral-contraceptive Pill</u> (90/1000)</p> <ul style="list-style-type: none"> <li>- combined estrogen &amp; progesterone</li> <li>- progesterone only</li> </ul> <p><u>Patch</u> (90/1000)</p> <ul style="list-style-type: none"> <li>- estrogen and progesterone 3 weeks on, 1 week off (or continuous)</li> </ul> <p><u>Ring</u> (90/1000)</p> <ul style="list-style-type: none"> <li>- estrogen and progesterone 3 weeks in, one week out (or continuous)</li> </ul> <p><u>Injectables</u> (60/1000)</p> <ul style="list-style-type: none"> <li>- progestin q 12-13 weeks IM injection</li> </ul> <p><u>LARC</u> (2/1000)</p> <ul style="list-style-type: none"> <li>- Intrauterine Contraception</li> <li>- Contraceptive Implant</li> </ul>	<p><u>Condoms</u> (180/1000)</p> <p><u>Copper IUD</u> (8/1000)</p> <p><u>Surgical</u> (Rare failure rate - caveat vasectomy)</p> <p><u>Barrier</u> diaphragm/cervical cap/sponge</p>

<b>Contraindications</b>	
<i>Estrogen</i>	<i>Progesterone</i>
<ul style="list-style-type: none"> <li>- Increased risk of blood clots</li> <li>- not in breast cancer, hypertension, liver disease</li> <li>- Not in individuals over the age of 35 who smoke</li> <li>- not in the first 6 weeks postpartum</li> </ul>	<ul style="list-style-type: none"> <li>- None**</li> </ul>

<b>Benefits</b>	
<i>Estrogen:</i>	<i>Progesterone:</i>
<ul style="list-style-type: none"> <li>- Acne</li> <li>- PCOS</li> <li>- decreases the risk of endometrial, ovarian and colon cancer</li> </ul>	<ul style="list-style-type: none"> <li>- Decreases risk of endometrial cancer</li> <li>- can be used in people with C/I to estrogen</li> </ul>

### **Post-Partum Intimacy**

- **ASK!!!!**
- Not 'all good' after 6 weeks; complex interplay between sleep, maternal mental health, physical changes, etc
- Vaginal dryness is common when breastfeeding due to low estrogen
  - Pelvic physio is helpful to anyone who has carried a pregnancy and/or given birth, regardless of the mode of delivery
  - Topical estrogen can be beneficial

### **Local Clinics to Refer to for IUD or Implant Insertion:**

Vancouver Island Women's Clinic  
 Island Sexual Health Society  
 Full Circle Clinic  
 Shoreline Sidney  
 Women MD

### **Resources for Patients:**

Sexandu.ca  
 Hello.vulva (instagram)  
 Shefoundmotherhood.ca (Podcast, Instagram, Webpage)

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