FROM THE OFFICE OF **DR.**

New contraceptives for women

A number of new contraceptive options have become available to women within recent years. You'll need to discuss with your doctor to see if any are right for you.

Yasmin pill

Yasmin is an oral contraceptive (birth control pill) that contains both estrogen and progestin. These hormones inhibit ovulation (the release of an egg from the ovaries) and thicken cervical mucous, which makes it difficult for sperm to enter the uterus. When taken once a day, the pill is 99% effective in preventing pregnancy.

Yasmin is the only birth control pill that can help reduce water retention (bloating) and weight gain before and during menstruation. Like some other birth control pills, Yasmin may also help control acne and oily skin. Because this pill forces your body to retain potassium, your doctor will need to check the potassium level in your blood during the first month of use.

Ortho Evra patch

The Ortho Evra patch also contains both estrogen and progestin and prevents pregnancy by inhibiting ovulation and thickening the cervical mucous. Unlike oral contraceptives, however, which must be taken daily for 3 or 4 weeks, the patch is applied to the skin by the user only once a week for 3 weeks. No patch is needed during week 4, which is when menstrual bleeding occurs.

The patch should be applied to the buttocks, outer upper arm, lower abdomen, or torso. Creams, oils, or cosmetics should not be applied near the patch. If it falls off, it should be replaced immediately. The patch may not be as effective in women who weigh more than 198 pounds.

Lunelle injection

Lunelle is the first injectable contraceptive that contains both estrogen and progestin. The injections are given once a month by a nurse or pharmacist. Lunelle may cause less irregular bleeding than the other injectable contraceptive—Depo-Provera—which contains progestin only. It is effective during the first cycle of use, so patients don't have to use backup birth control.

NuvaRing

The NuvaRing is a 2-inch-wide ring that you insert into the vagina and leave in place for 3 weeks, while it slowly releases estrogen and progestin. The ring is removed in week 4, which allows for menstrual bleeding. If the ring falls out, it can be rinsed with warm water and reinserted. If it is out of the vagina for more than 3 hours during the first 3 weeks of use, it can be reinserted, but you should plan to use backup contraception until the next new ring can be inserted. If you forget to remove the ring after 3 weeks, it will continue to inhibit ovulation for up to 5 weeks.

Mirena IUD

Mirena is an intrauterine device (IUD) that is inserted into the uterus by a physician. Mirena contains only progestin (not estrogen) and is 99% effective for up to 5 years. It works by thinning the lining of the uterus and may also thicken cervical mucous. The Mirena IUD causes less irregular bleeding than the copper IUD. However, some women may still experience some bleeding during the first 3 to 6 months of use. After that, bleeding usually lessens, and approximately 20% of women have no bleeding by the end of the first year. At the end of 5 years, the IUD is removed.

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