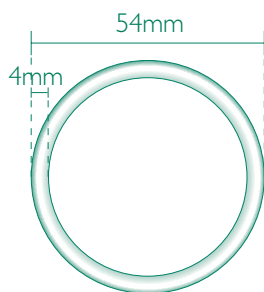


your guide to
the contraceptive
vaginal ring

Helping you choose the method
of contraception that is best for you



The contraceptive vaginal ring



The contraceptive vaginal ring is a flexible, transparent, plastic ring. It is placed in the vagina where it releases two hormones – estrogen and progesterone. These are similar to the natural hormones that

women produce in their ovaries and are like those used in the combined oral contraceptive pill.



How effective is the vaginal ring?

How effective any contraceptive is depends on how old you are, how often you have sex and whether you follow the instructions.

If 100 sexually active women don't use any contraception, 80–90 will become pregnant in a year.

If the vaginal ring is used correctly and according to instructions it is over 99 per cent effective. This means that less than one woman in 100 will get

Questions & Answers

How effective is the vaginal ring?	3	What if I forget to put a new vaginal ring in at the end of the ring-free interval?	13
How does the vaginal ring work?	4	Can the ring fall out of my vagina?	13
Where can I get the vaginal ring?	4	What should I do if the ring comes out of my vagina for a short time?	13
Can anyone use the vaginal ring?	4	What if the ring breaks inside my vagina?	15
What are the advantages of the vaginal ring?	5	If I take medicines will it affect the vaginal ring?	15
What are the disadvantages of the vaginal ring?	6	I am bleeding on the days when I am using the vaginal ring, what should I do?	16
Are there any risks?	6	I didn't bleed in my ring-free interval – am I pregnant?	16
Will I put on weight if I use the vaginal ring?	8	Can I miss out a withdrawal bleed?	16
When can I first start to use the vaginal ring?	8	What should I do if I want to change to another method of contraception?	17
I've just had a baby. Can I use the vaginal ring?	9	What should I do if I want to stop using the vaginal ring or try to get pregnant?	17
Can I use the vaginal ring after a miscarriage or abortion?	9	Should I give my body a break from the vaginal ring every few years or so?	17
How do I insert the vaginal ring?	9	How often do I need to see a doctor or nurse?	18
How will I know the vaginal ring is in place?	10	How do I find out about contraception services?	18
Will I, or my partner, be able to feel the vaginal ring during sex?	10	Emergency contraception	19
How do I remove the vaginal ring?	10	Sexually transmitted infections	19
How do I use the vaginal ring?	11	How fpa can help you	20
Am I protected from pregnancy during the seven day, ring-free interval?	12	A final word	20
What if I forget to take the vaginal ring out at the end of week three?	12		

pregnant in a year:

If the vaginal ring is **not** used according to instructions, more women will become pregnant.



How does the vaginal ring work?

The vaginal ring releases a constant dose of hormones into the bloodstream through the vaginal wall. The main way it works is to stop the ovaries from releasing an egg each month (ovulation). It also:

- Thickens the mucus from your cervix. This makes it difficult for a sperm to move through it and reach an egg.
- Makes the lining of the uterus (womb) thinner so it is less likely to accept a fertilised egg.



Where can I get the vaginal ring?

You can go to a contraception or sexual health clinic, or a general practice. If you prefer not to go to your own general practice, or if they don't provide contraceptive services, they can give you information about another practice or clinic. All treatment is free and confidential. You don't need to have a breast examination or cervical screening test when you are first prescribed the vaginal ring.



Can anyone use the vaginal ring?

Not everyone can use the vaginal ring so your doctor or nurse will need to ask you about your own and your family's medical history. Do mention any illnesses or operations you have had. Some of the conditions which **may** mean you should not use the vaginal ring are:

- you think you might be pregnant
- you smoke **and** are 35 years old or over
- you are 35 years old or older and stopped smoking less than a year ago

- you are very overweight
- you take certain medicines
- your vaginal muscles can't hold a vaginal ring.

You have now or had in the past:

- thrombosis (blood clots) in any vein or artery
- a heart abnormality or circulatory disease including high blood pressure (hypertension)
- current breast cancer or breast cancer within the last five years
- very severe migraines or migraines with aura
- active disease of the gall bladder or liver
- diabetes with complications or diabetes for more than 20 years
- unexplained bleeding from your vagina
- current cervical, ovarian, vaginal or uterine cancer.

If you are healthy, don't smoke and there are no medical reasons for you not to use the vaginal ring, you can use it until you are 50 years old. You will then need to change to another method of contraception.



What are the advantages of the vaginal ring?

Some of the advantages of the vaginal ring are:

- you don't have to think about it every day – you only use one ring a month
- it doesn't interrupt sex
- it is easy to insert and remove
- unlike the pill, the hormones do not need to be absorbed by the stomach, so the ring is not affected if you vomit or have diarrhoea
- bleeding will usually become more regular, lighter and less painful

- it may help with premenstrual symptoms
- it may reduce the risk of cancer of the ovary, uterus and colon
- it may reduce the risk of fibroids, ovarian cysts and non-cancerous breast disease.

Q

What are the disadvantages of the vaginal ring?

A

There are some serious side effects of the vaginal ring (see below Are there any risks?). In addition:

- Some women may not feel comfortable inserting and removing it.
- You may get **temporary** side effects at first including increased vaginal discharge and vaginal infections, headaches, nausea, breast tenderness and mood changes.
- Breakthrough bleeding and spotting (unexpected vaginal bleeding on days you are using the ring) may occur in the first few months of ring use (see page 16).
- The vaginal ring does not protect you against sexually transmitted infections, so you may need to use condoms as well.

Q

Are there any risks?

A

The vaginal ring can have some serious side effects, but these are not common. For most women the benefits of using the ring outweigh the possible risks. All risks and benefits should be discussed with your doctor or nurse.

- A very small number of women may develop a blood clot which can block a vein (venous thrombosis) or an artery (arterial thrombosis or heart attack or stroke). If you have ever had a thrombosis, you should not use the vaginal ring.
- The risk of venous thrombosis is greatest during

the first year that you use the vaginal ring and if you smoke, you are very overweight, are immobile for a long period of time or use a wheelchair, have severe varicose veins or a member of your immediate family had a venous thrombosis before they were 45 years old.

- The risk of arterial thrombosis is greatest if you smoke, are diabetic, have high blood pressure, are very overweight, have migraines with aura, or a member of your immediate family had a heart attack or stroke before they were 45 years old.
- Research into the risk of breast cancer and hormonal contraception is complex and contradictory. Research suggests that users of all hormonal contraception appear to have a small increased risk of being diagnosed with breast cancer compared to non-users of hormonal contraception. Further research is ongoing.
- Research suggests that there is a small increase in the risk of developing cervical cancer with longer use of estrogen and progestogen hormonal contraception.
- Some research suggests a link between using estrogen and progestogen hormonal contraception and developing a very rare liver cancer:

See a doctor straightaway if you have any of the following:

- pain in the chest, including any sharp pain which is worse when you breathe in
- breathlessness
- you cough up blood
- painful swelling in your leg(s)
- weakness, numbness or bad 'pins and needles' in an arm or leg

- severe stomach pains
- a bad fainting attack or you collapse
- unusual headaches or migraines that are worse than usual
- sudden problems with your speech or eyesight
- jaundice (yellowing skin or yellowing eyes).

If you need to go into hospital for an operation or you have an accident which affects the movement of your legs, you should tell the doctor that you are using the vaginal ring. The doctor will decide if you need to stop using the ring or need other treatment to reduce the risk of developing a blood clot.

Q Will I put on weight if I use the vaginal ring?

A No. Research has not shown that women put on weight when they use the vaginal ring. However, some women may find their weight changes throughout their cycle due to fluid retention.

Q When can I first start to use the vaginal ring?

A If you did not use a hormonal contraceptive during your previous menstrual cycle and you are sure you're not pregnant, insert the vaginal ring on the first day of your period. You will be protected against pregnancy immediately. You can also start the ring on days 2–5 of your period but you must use additional contraception, such as condoms, for the first seven days you use the ring.

If you start the ring at any other time in your menstrual cycle you will also need to use additional contraception, such as condoms, for the first seven days.

If you are switching from another contraceptive method your doctor or nurse will advise you on when to start using the vaginal ring.

Q I've just had a baby. Can I use the vaginal ring?

A If you feel comfortable you can start to use the vaginal ring three weeks (21 days) after you give birth if you are not breastfeeding. Starting on day 21 you will be protected from pregnancy immediately. If you start later than day 21 you will need to use additional contraception for the first seven days you use the ring.

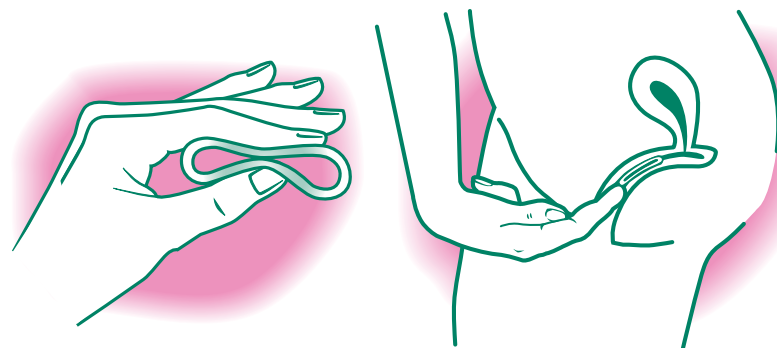
If you are breastfeeding a baby, the vaginal ring may reduce your flow of milk. It is usually recommended that you use a different method of contraception.

Q Can I use the vaginal ring after a miscarriage or abortion?

A Yes. You can start using the vaginal ring immediately after a miscarriage or abortion if you were pregnant for less than 24 weeks. You will be protected against pregnancy immediately.

Q How do I insert the vaginal ring?

A Your doctor or nurse should advise you on how to insert and remove the vaginal ring. With clean hands squeeze the ring between your thumb and finger and use one hand to insert it into your vagina. If necessary, spread your labia (vaginal lips)



with your other hand. Push the ring into your vagina until it feels comfortable. It does not need to cover your cervix (entrance to the uterus) to work.

Q How will I know the vaginal ring is in place?

A The ring does not need to be in an exact position. Most women can't feel the ring. If you can feel it and it is also uncomfortable, push the ring a little further into your vagina. You can check it's still there with your fingers.

There is no danger that the vaginal ring can get lost inside the vagina – it is stopped by the cervix. However, if you are sure it's inside you but you can't feel it with your fingers, see a doctor or nurse.

Q Will I, or my partner, be able to feel the vaginal ring during sex?

A Occasionally, you or your partner might be able to feel the ring during sex. This is not uncomfortable or unpleasant for most people. The ring is not likely to affect or harm your partner.

Q How do I remove the vaginal ring?

A Remove the vaginal ring by hooking a finger under it, or by grasping it between your thumb and finger, and gently pulling it out.

If you experience pain or bleeding when trying to remove the ring, or cannot remove it, tell your doctor or nurse immediately.



Q How do I use the vaginal ring?

A **Weeks 1–3:** The vaginal ring should be left in the vagina for three weeks (21 days). After three weeks remove the ring on the same day of the week that it was inserted.

Ring-free interval: Stop using the ring for one week (seven days). This is known as the **ring-free interval**. During this week you may get a bleed. You don't have periods when you use the vaginal ring – you have a withdrawal bleed (which doesn't always happen). It is caused by you not taking hormones in the ring-free week.

New ring cycle: After the ring-free interval, insert a new ring on the same day of the week that you took the previous one out. You should do this even



if you are still bleeding. Continue using the vaginal ring as you did in the last cycle.

Disposing of the vaginal ring: Put the used vaginal ring in the disposal sachet provided and place it in a waste bin. It must not be flushed down the toilet.

Q Am I protected from pregnancy during the seven day, ring-free interval?

A Yes. You are protected if:

- you used the vaginal ring according to instructions during the last three weeks *and*
- you start the next ring cycle on time *and*
- you are not taking medicines that will affect the ring (see page 15).

Q What if I forget to take the vaginal ring out at the end of week three?

A **Seven days or less**
If the ring has been left in for up to seven days after the end of week three (up to four weeks in total):

- As soon as you remember, remove the ring. Do not put another ring in. Start your seven day, ring-free interval. After the seven days insert a new ring on the same day of the week you removed it.
- You don't need to use additional contraception and you are protected against pregnancy.

More than seven days

If the ring has been left in for more than seven days after the end of week three (more than four weeks in total):

- As soon as you remember, remove the ring and insert a new ring immediately.
- You must use additional contraception until the new ring has been in place for seven continuous days.

Q What if I forget to put a new vaginal ring in at the end of the ring-free interval?

A Insert a new ring as soon as you remember and use additional contraception until a new ring has been in place for seven continuous days. Ask your doctor or nurse for advice if you have had sex in the previous few days and were not using a condom as you may need emergency contraception.

Q Can the ring fall out of my vagina?

A The muscles of your vagina hold the ring in place. Occasionally, however, the ring may come out of your vagina (expulsion), for example if it wasn't inserted properly, during sex or a bowel movement (having a poo), or while removing a tampon. If this happens often, you may want to consider another method of contraception.

Research shows that the ring is not more likely to come out if you have had children.

Q What should I do if the ring comes out of my vagina for a short time?

A The longer the ring has been out of the vagina, the higher the risk of pregnancy. You may also experience breakthrough bleeding. If the ring comes out of the vagina for:

Less than three hours:

- Rinse the ring with cool or lukewarm water (not hot) and re-insert the **same** ring as soon as possible within three hours.

- You don't need to use additional contraception and you are protected against pregnancy.

More than three hours in the first or second week of use:

- Rinse the ring with cool or lukewarm water (not hot) and re-insert the same ring as soon as possible.
- You must use additional contraception until the ring has been in place for seven continuous days.
- Ask your doctor or nurse for advice if you have had sex in the previous few days and were not using a condom as you may need emergency contraception.

More than three hours in the third week of use:

Throw the ring away and choose one of the following two options:

1. insert a new ring immediately and start a new ring cycle. You may not experience a withdrawal bleed but breakthrough bleeding or spotting may occur, or
2. do not insert a new ring. Start your seven day, ring-free interval. You will have a withdrawal bleed. Insert a new ring seven days from the time the previous ring came out of the vagina. This option can only be chosen if the ring was used continuously for the previous seven days.

In both cases, you must use additional contraception until the ring has been in place for seven continuous days **and** ask your doctor or nurse for advice if you have had sex in the previous few days and were not using a condom as you may need emergency contraception.

If you lose the vaginal ring insert a new one and continue with the cycle that you were on.



What if the ring breaks inside my vagina?

This is very rare and it is unlikely to affect how the ring works. It will not harm you. Remove the broken ring and insert a new one as soon as possible. Continue with the cycle that you were on.



If I take medicines will it affect the vaginal ring?

There are a few medicines that make the vaginal ring less effective. Ask your doctor, nurse or pharmacist. Follow the instructions below.

Common antibiotics – continue using your ring as usual and use an extra method of contraception, such as condoms, while taking the antibiotics and for seven days after you've finished them. If you come to the start of your seven day, ring-free interval while still taking antibiotics or using additional contraception, then insert a new ring immediately. Do not have your usual seven day, ring-free interval. You may or may not have a withdrawal bleed – this is normal.

If you are given antibiotics in your first ring week and you have had sex recently, ask your doctor or nurse for advice as you may also need to use emergency contraception.

If you are taking a common antibiotic for more than two weeks, you will need to follow different instructions. Your doctor or nurse can advise you.

Some other medicines – these include some medicines used to treat epilepsy, HIV and TB, and the complementary medicine, St John's Wort. These types of drugs are called enzyme inducers. If you take these medicines, talk to your doctor or nurse. It is often advised that you use a different method of contraception instead of the vaginal ring.

Treatments for thrush – do not affect the effectiveness of the ring.

Q I am bleeding on the days when I am using the vaginal ring, what should I do?

A Breakthrough bleeding or spotting is common when you first start to use the vaginal ring and is not usually anything to worry about. It may take up to three months to settle down. It is important to continue using the ring correctly even if the bleeding is as heavy as your withdrawal bleed.

You can use a tampon while the ring is in place; this is not harmful. However, try to make sure that the ring does not come out accidentally when removing the tampon.

Bleeding may also be caused by not using the vaginal ring correctly or by a sexually transmitted infection. If it carries on or starts after you have used the ring for some time, seek advice.

Q I didn't bleed in my ring-free interval – am I pregnant?

A If you used the ring according to instructions and have not taken any medicines that might have affected the ring (see page 15), then it is very unlikely that you are pregnant. Start your next ring cycle at the right time. If you are worried ask your doctor or nurse for advice or do a pregnancy test. Always take a test or speak to a health professional if the ring has not been used properly, or if you miss more than one withdrawal bleed.

Q Can I miss out a withdrawal bleed?

A Yes. This is not harmful. Remove the ring after three weeks and immediately insert another without having the seven day, ring-free interval. You may experience breakthrough bleeding but this is nothing to worry about. If you are using the ring correctly you will still be protected against pregnancy.

Q What should I do if I want to change to another method of contraception?

A It is easy to change from the vaginal ring to another method of contraception. Get advice from your doctor or nurse. You may need to miss out the ring-free interval or use additional contraception

Q What should I do if I want to stop using the vaginal ring or try to get pregnant?

A Ideally, it is easier if you stop using the vaginal ring at the end of the ring cycle and do not insert a new ring after your withdrawal bleed. If you don't want to wait until this time, ask your doctor or nurse for advice because you can risk becoming pregnant if you have had sex recently. If you do not want to become pregnant you should use another method of contraception as soon as you stop using the ring. Your normal periods may not come back immediately – for some women it can take a few months.

If you want to try for a baby it helps to wait for one natural period after stopping the ring before trying to get pregnant. This means the pregnancy can be dated more accurately and you can start pre-pregnancy care such as taking folic acid and stopping smoking. You can ask your doctor or nurse for advice.

Q Should I give my body a break from the vaginal ring every few years or so?

A No. You do not need to take a break because the hormones do not build up. There are no known benefits to your health or fertility from taking a break.



How often do I need to see a doctor or nurse?

When you first start using the vaginal ring you will be given a supply to see how it suits you. After that you should go back to the doctor or nurse to get new supplies and to have your blood pressure checked. If there are no problems, you can be given a further supply of vaginal rings.



How do I find out about contraception services?

Contraception is free for women and men of **all** ages through the National Health Service.

- You can find out about all sexual health services from **sexual health direct**, run by **fpa**, on 0845 122 8690 or at www.fpa.org.uk.
- You can find details of general practices and pharmacies in England at www.nhsdirect.nhs.uk and in Wales at www.wales.nhs.uk. In Scotland you can find details of general practices at www.show.scot.nhs.uk. In England and Wales you can also call NHS Direct on 0845 46 47 and in Scotland NHS 24 on 0845 4 24 24 24. In Northern Ireland call **fpa's** helpline on 0845 122 8687 or for details of general practices see www.n-i.nhs.uk.
- You can also get details of your nearest contraception, genitourinary medicine (GUM) or sexual health clinic from a telephone directory, health centre, local pharmacy, hospital, midwife, health visitor or advice centre.
- You can get details of GUM or sexual health clinics from the Sexual Health Line on 0800 567 123 or at www.condomessentialwear.co.uk.
- You can find details of young people's services from Brook on 0800 0185 023 or from Sexwise on 0800 28 29 30, or at www.ruthinking.co.uk.

Emergency contraception

If you have had sex without using contraception or think your method might have failed there are two emergency methods you can use.

- The emergency hormonal pill – must be taken up to three days (72 hours) after sex. It is more effective the earlier it is taken after sex.
- An IUD – must be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation).

Ask your doctor or nurse about getting emergency pills in advance, just in case you need them.

Sexually transmitted infections

Most methods of contraception do not protect you from sexually transmitted infections.

Male and female condoms, when used correctly and consistently, can help protect against sexually transmitted infections. Diaphragms and caps may also help protect against some sexually transmitted infections. If you can, avoid using condoms containing Nonoxinol 9 (spermicidally lubricated) as this does not protect against HIV and may even increase the risk of infection.

How fpa can help you

sexual health direct is a nationwide service run by **fpa**. It provides:

- confidential information and advice and a wide range of booklets on individual methods of contraception, common sexually transmitted infections, pregnancy choices, abortion and planning a pregnancy
- details of contraception, sexual health and genitourinary medicine (GUM) clinics and sexual assault referral centres.

fpa helplines

England

helpline 0845 122 8690

9am to 6pm Monday to Friday

Northern Ireland

helpline 0845 122 8687

9am to 5pm Monday to Thursday, 9am to 4.30pm Friday

or visit **fpa's website** www.fpa.org.uk

A final word

This booklet can only give you basic information about the contraceptive vaginal ring. The information in this booklet is based on evidence-guided research from the World Health Organization and the Faculty of Sexual and Reproductive Healthcare of the Royal College of Obstetricians and Gynaecologists. Different people may give you different information and advice on certain points. All methods of contraception come with a Patient Information Leaflet which provides detailed information about the method. Remember – contact your doctor, practice nurse or a contraception clinic if you are worried or unsure about anything.



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