

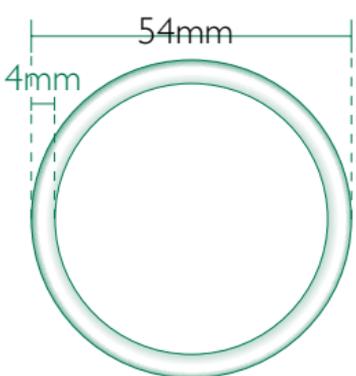
your guide to the contraceptive vaginal ring

Helping you choose the method
of contraception that's best for you



The contraceptive vaginal ring

The contraceptive vaginal ring is a flexible, transparent



plastic ring. It's placed in the vagina where it releases two hormones – estrogen and progestogen. These are similar to the natural hormones produced by the ovaries and are like those used in the combined pill.

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How effective is the vaginal ring?

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

If the vaginal ring is always used perfectly, according to instructions, it's over 99% effective.

This means that less than one person in 100 who uses the ring perfectly will get pregnant in one year.

If the vaginal ring is not always used according to instructions, about nine in 100 ring users will get pregnant in one year.

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How does the vaginal ring work? The vaginal ring releases a constant dose of hormones into the bloodstream through the vaginal wall. The ring stops the ovaries from releasing an egg each month (ovulation).

It also:

- thickens the mucus from your cervix. This makes it difficult for sperm to move through it and reach an egg
- makes the lining of the uterus (womb) thinner so it's 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 to get the ring for free. 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.

There are also private online providers where you can order the ring for a fee. All treatment is confidential. You don't need to have a vaginal or breast examination or cervical screening test when you're prescribed the vaginal ring.

Can anyone use the vaginal ring?

Not everyone can use the vaginal ring so your doctor, nurse or online provider will need to ask you about your own and your family's medical history. Do mention any illnesses or operations you've had or if you think you might already be pregnant. The ring **may** not be suitable if:

- you smoke **and** are 35 years old or over
- you're 35 years old or over and stopped smoking less than a year ago
- you're very overweight
- you take certain medicines

- you're breastfeeding a baby less than six weeks old (see page 15).

The ring may not be suitable for you if you have now or had in the past:

- thrombosis (blood clots) in any vein or artery or a member of your immediate family had thrombosis before they were 45 years old
- heart disease or a stroke
- systemic lupus erythematosus with positive antiphospholipid antibodies
- a heart abnormality or circulatory disease including hypertension (high blood pressure)
- migraine aura
- breast cancer or you have the gene that's associated with breast cancer
- active disease of the gall bladder or liver
- diabetes with complications
- you're immobile for a long period of time or use a wheelchair
- you're at high altitude (more than 4,500m) for more than a week.

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

What are the advantages?

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's easy to insert and remove
- unlike the pill, the hormones don't need to be absorbed by the stomach, so the ring isn't affected if you vomit or have diarrhoea

- it usually makes your bleeds more regular, lighter and less painful
- it gives you the choice not to have a monthly bleed
- it may help with premenstrual symptoms
- it reduces the risk of cancer of the ovary, uterus and colon
- it may reduce menopausal symptoms
- it may reduce the risk of recurrent endometriosis after surgery
- it helps with problems associated with polycystic ovarian syndrome (PCOS).

What are the disadvantages?

There are some serious possible side effects (see below Are there any risks?). In addition:

- you may not feel comfortable inserting and removing it
- you may get temporary side effects at first including increased vaginal discharge, headaches, nausea, breast tenderness and mood changes
- breakthrough bleeding and spotting (unexpected vaginal bleeding on days you're using the ring) may occur in the first few months of use
- the vaginal ring doesn't protect you against sexually transmitted infections, so you may need to use condoms as well.

Are there any risks?

The vaginal ring can have some serious side effects. These aren't common but can happen to anyone. For most people the benefits outweigh the possible risks. Your doctor, nurse, or online provider will ask you questions to check whether

you could be at higher risk.

- A very small number of ring users may develop venous thrombosis (a blood clot in a vein), arterial thrombosis (a blood clot in an artery), heart attack or stroke. If you've ever had thrombosis, you should not use the vaginal ring.
- The risk of venous thrombosis is greatest if any of the following apply to you: you smoke, you're very overweight, you have a thrombophilia (a tendency to blood clotting), you're immobile for a long period of time or use a wheelchair; or a member of your immediate family had a venous thrombosis before they were 45 years old.
- There appears to be a slightly higher risk of venous thrombosis in vaginal ring users compared to those using some combined pills.
- The risk of arterial thrombosis is greatest if any of the following apply to you: you smoke, have high blood pressure, are very overweight, have migraine aura, or you're diabetic.
- Research suggests that users of the ring appear to have a small increased risk of being diagnosed with breast cancer compared to non-users of hormonal contraception. This reduces with time after stopping the ring and is undetectable 10 years later.
- Research suggests that there's a small increase in the risk of developing cervical cancer with longer use of estrogen and progestogen hormonal contraception. This reduces over time after stopping the ring.

See a doctor straight away if you have any of the following:

- pain in the chest, including any sharp pain which is worse when you breathe in, breathlessness, or coughing up blood

- painful swelling in your leg(s)
- unusual headaches or migraines that are worse than usual
- weakness, numbness or bad 'pins and needles' in an arm or leg
- sudden problems with your speech or eyesight.

If you develop any new conditions tell your doctor or nurse so they can check it's still safe for you to use the ring.

If you go into hospital for an operation or you have an accident which affects the movement of your legs, tell the doctor you're using the vaginal ring. You may need to stop using the ring or need other treatment to reduce the risk of developing thrombosis.

Will I put on weight if I use it? Research hasn't shown that the vaginal ring causes weight gain. You may find your weight changes throughout your cycle due to fluid retention and other reasons not related to the ring.

When do I start using it?

You can start using the vaginal ring any time in your menstrual cycle if you're sure you're not pregnant.

If you start the ring:

- **on the first day of your period**, you'll be protected from pregnancy immediately.
- **up to and including the fifth day of your period**, you'll be protected from pregnancy immediately. Talk to your doctor or nurse about whether you need additional contraception if you have a very short cycle or a cycle that changes.
- **at any other time in your menstrual cycle**, you'll need to avoid sex or use additional

contraception, such as condoms, for the first seven days of using the ring.

How do I use the vaginal ring? There are different ways of using the vaginal ring. The ring is designed to give you a withdrawal bleed once a month. A withdrawal bleed isn't the same as your period. It's caused by you not getting hormones on a ring-free break. Ring instructions tell you to take a seven day ring-free break but you can choose to shorten this break or to miss it and not have a withdrawal bleed (see Can I miss out my withdrawal bleed? on page 11)

Missing or shortening the ring-free break could help you if you get heavy or painful bleeding, headaches or mood swings on ring-free days.

The riskiest time to forget your ring is just before or just after the ring-free break. You're more at risk of pregnancy so taking a shorter break or missing a break makes this less risky.

You can use the ring in the following ways. ●

Leave the vaginal ring in for 21 days then remove it and wait for 4 or 7 days.

This has been the standard way to use the ring. You'll usually have a withdrawal bleed during the ring-free break. This is called a ring cycle. Start using the ring again on the fifth or eighth day, even if you're still bleeding.

- **Leave the vaginal ring in for 21 days then remove it and insert a new one immediately. Leave that in for another 21 days. Remove it and insert a new one immediately. Leave that in for another 21 days. Take a break for 4 or 7 days before inserting a new one.** This is called extended use or tricycling. You'll usually have a withdrawal bleed during the ring-free break. Start using the ring again on the fifth or eighth

day even if you're still bleeding.

- **Leave the vaginal ring in for 21 days. Remove it and insert a new one immediately. Continue to remove and insert a new ring after 21 days with no breaks.** This is called continuous use. You don't have a withdrawal bleed but you may still get some bleeding which may be occasional or more frequent. Any bleeding you get is likely to reduce over time if you keep using the ring continuously.
- **Leave the vaginal ring in for at least 21 days. Remove it and insert a new one immediately. Continue to remove and insert a new ring after 21 days. If you get bleeding that's unacceptable to you for 3-4 days then remove the ring for a four day ring-free break.** This is called flexible extended use. Insert a new ring again on the fifth day even if you're still bleeding. This can help manage the bleeding. Leave the ring in for at least 21 days before taking your next break.

You can use the ring continuously without a break for as long as you like, as long as your doctor or nurse doesn't advise you to stop.

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.

Am I protected from pregnancy during the ring-free break?

Yes. You're protected if:

- you used the vaginal ring according to instructions during the last 21 days **and**
 - you start the next ring cycle on time **and**
 - you're not taking other medicines that will affect the ring (see page 15).

Can I miss out a withdrawal bleed?

Yes. This isn't harmful. There are no known benefits to withdrawal bleeds and no known risks to missing them, there's no need to have a withdrawal bleed at all unless you want one – see [How do I use the vaginal ring?](#) on page 9.

Sometimes you do still get some bleeding. This is nothing to worry about. If you have used your ring correctly, you'll still be protected from pregnancy.

How do I insert the vaginal ring?

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 doesn't need to cover your cervix (entrance to the uterus) to work.

How will I know the it's in place?

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

There's no danger that the vaginal ring can get lost inside the vagina – it's stopped by the cervix.

However, if you're sure it's inside you but you can't feel it with your fingers, see a doctor or nurse.

What if I've used the ring incorrectly?

If the ring is removed outside of a ring-free break, follow these instructions.

Less than 48 hours since ring came out

Insert the ring as soon as possible.

Keep the ring in until the next scheduled ring-free break.

If you're in the first week after a ring-free break, you don't need to use any additional contraception as long you've used the ring correctly every other day this week and in the seven days before the ring-free break.

If you're in any other week, you don't need to use any additional contraception as long you've used the ring correctly for the previous seven days.

48 hours or more since ring came out

Insert the ring as soon as possible.

Keep the ring in until the next scheduled ring-free break.

You may need emergency contraception now and a pregnancy test in three weeks if you're in the first week after a ring-free break and had unprotected sex this week or during the ring-free break. Use condoms or avoid sex until the ring has been in place for seven days in a row.

You don't need emergency contraception if you're in any other week and the ring has been used correctly in the previous seven days. Use condoms or avoid sex until the ring has been in place for seven days in a row and if you're within seven days of a ring-free break, omit it.

If you've left the same ring in for longer than three weeks, follow the instructions below.

3-4 weeks (21-28 days)

If you have a ring-free break scheduled, take it now and insert a new ring afterwards.

If you don't take ring-free breaks, insert a new ring now.

You don't need additional contraception, as long as the ring was in place from day 21 to day 28 of use.

4-5 weeks

Don't take the ring-free break.

Insert a new ring as soon as possible.

Use condoms or avoid sex until the ring has been in place for seven days in a row.

You don't need emergency contraception, as long as the ring was in place from day 21 to day 28 of use.

More than 5 weeks

Don't take the ring-free break.

Insert a new ring as soon as possible.

Use condoms or avoid sex until the ring has been in place for seven days in a row.

You may need emergency contraception now and a pregnancy test in three weeks, if you had unprotected sex during week 5 or later.

What if I insert the ring more than 24 hours late after a seven day ring-free break or more than 96 hours late after a four day ring-free break?

Insert a new ring as soon as you remember and keep it in until it's scheduled to be removed. Use condoms or avoid sex until the ring has been in place for seven days in a row. You may need emergency contraception if you had unprotected sex during the ring-free break.

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

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

How do I remove the vaginal ring?

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 can't remove it, tell your doctor or nurse immediately.

Can the ring fall out of my vagina?

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, or while removing a tampon. If this happens often, you may want to consider another method of contraception.

Can I use a tampon or menstrual cup?

Yes. It is safe to use menstrual products while the ring is in place.

What if the ring breaks inside my vagina?

This is very rare and it's unlikely to affect how the ring works. It won't 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 other medicines will it affect the vaginal ring?

If you're given medicines by a doctor, nurse or hospital always say you're using the vaginal ring.

Commonly used antibiotics **don't** affect the vaginal ring. Medicines such as some of those used to treat epilepsy, HIV and TB and the complementary medicine St John's Wort may make it less effective. These types of drugs are called enzyme-inducers. If you take these medicines, talk to your doctor or nurse about how to use the vaginal ring - you may need to use a different method of contraception.

Treatments for thrush don't affect the effectiveness of the vaginal ring.

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

If you feel comfortable, you can usually start to use the vaginal ring 21 days after you give birth, if you're not breastfeeding. Starting on day 21 you'll be protected from pregnancy straight away. If you start later than day 21 use additional contraception or avoid sex for the first seven days of using the ring.

If you're breastfeeding a baby less than six weeks old, the ring may affect your milk production. It's usually recommended that you use a different method of contraception or avoid sex until six weeks after the birth.

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

You can start using the vaginal ring straight after a miscarriage or abortion. You'll be protected from pregnancy straightaway.

What if I want to change to another method of contraception?

It's 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 break or use additional contraception.

I'm bleeding on the days when I'm using the vaginal ring, what should I do?

Bleeding is very common when you first start taking using the ring and isn't usually anything to worry about. It may take up to three months to settle down. It's very important to keep using the ring according to instructions, even if the bleeding is as heavy as a withdrawal bleed. If you're using the ring continuously it's normal to get some bleeding (see *How do I use the vaginal ring?* on page 9).

Bleeding may also be caused by not using the ring correctly or by a sexually transmitted infection.

If it doesn't settle down or starts after you've used the ring for some time, seek advice.

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

If you used the ring according to instructions and haven't taken any medicines that might've affected the ring (see page 15), then it's very unlikely you're pregnant. Start your next ring cycle at the right time. If you're worried, ask your doctor or nurse

for advice or do a pregnancy test. Using the ring doesn't affect a pregnancy test. Always take a test or speak to a health professional if you miss more than one expected bleed.

If you do get pregnant, the available evidence suggests that using the ring won't cause any harm to the baby.

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

Ideally, it's easier if you stop using the vaginal ring at the end of a ring cycle and don't insert a new ring after your withdrawal bleed. If you don't want to wait until this time, seek advice because you can risk getting pregnant if you've had sex recently. If you don't want to become pregnant you should use another method of contraception as soon as you stop using the ring. When you stop using the ring your fertility will return to whatever's normal for you. Don't worry if your periods don't start immediately. For some people it can take a few months.

If you want to try for a baby, you can start pre-pregnancy care such as taking folic acid and stopping smoking before you stop using the ring. For help with planning a pregnancy and pre-pregnancy care visit sexwise.org.uk or ask a doctor or nurse.

You can start trying to get pregnant as soon as you stop using the ring if you want to. You can also choose to wait until you've had one natural period. This will make it easier to work out when you got pregnant.

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

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

How often do I need a check up?

When you start using the vaginal ring your doctor or nurse will advise you when to get your next check up. Your medical history, blood pressure and weight needs to be checked at least once a year while you're using the ring. It's important to get advice sooner than this if you have any problems with the ring, develop new health problems or want to change to a new method of contraception.

How do I find out about contraception services?

The National Sexual Health Helpline provides confidential advice and information on all aspects of sexual health. The number is 0300 123 7123. It's open Monday to Friday from 9am-8pm.

For more information on sexual health visit www.fpa.org.uk or www.sexwise.org.uk. Information for young people can be found at www.brook.org.uk

Clinics

To find your closest clinic you can:

- use Find a Clinic at www.fpa.org.uk/clinics
- download FPA's Find a Clinic app for iPhone or Android.

Details of general practices and pharmacies in England are at www.nhs.uk and in Wales at www.nhsdirect.wales.nhs.uk. In Scotland, details of

general practices are at www.nhsinform.scot and in Northern Ireland at www.hscni.net

Emergency contraception

If you've had sex without contraception, or think your method might've failed, there are different types of emergency contraception you can use.

- A copper IUD is the most effective option. It can be fitted up to five days after sex, or up to five days after the earliest time you could have released an egg (ovulation).
- An emergency contraceptive pill with the active ingredient ulipristal acetate can be taken up to five days (120 hours) after sex. It's available with a prescription or to buy from a pharmacy. ellaOne is the only brand in the UK.
- An emergency contraceptive pill with the hormone levonorgestrel can be taken up to three days (72 hours) after sex. It's available with a prescription or to buy from a pharmacy. There are different brands.

Try and get emergency contraception as soon as possible after unprotected sex.

Emergency pills are available for free from some pharmacies. Age restrictions may apply.

Sexually transmitted infections Most methods of contraception don't protect you from sexually transmitted infections. External (male) and internal (female) condoms, when used correctly and consistently, can help protect against sexually transmitted infections.

If you can, avoid using spermicidally lubricated condoms. The spermicide commonly contains a chemical called Nonoxinol 9, which may increase the risk of HIV infection.

A final word

This booklet can only give you general information. The information 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.

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 sexual health clinic if you're worried or unsure about anything.



the sexual health charity



sexwise.org.uk

www.fpa.org.uk

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If you'd like information on the evidence used to produce this booklet or would like to give feedback email feedback@fpa.org.uk

