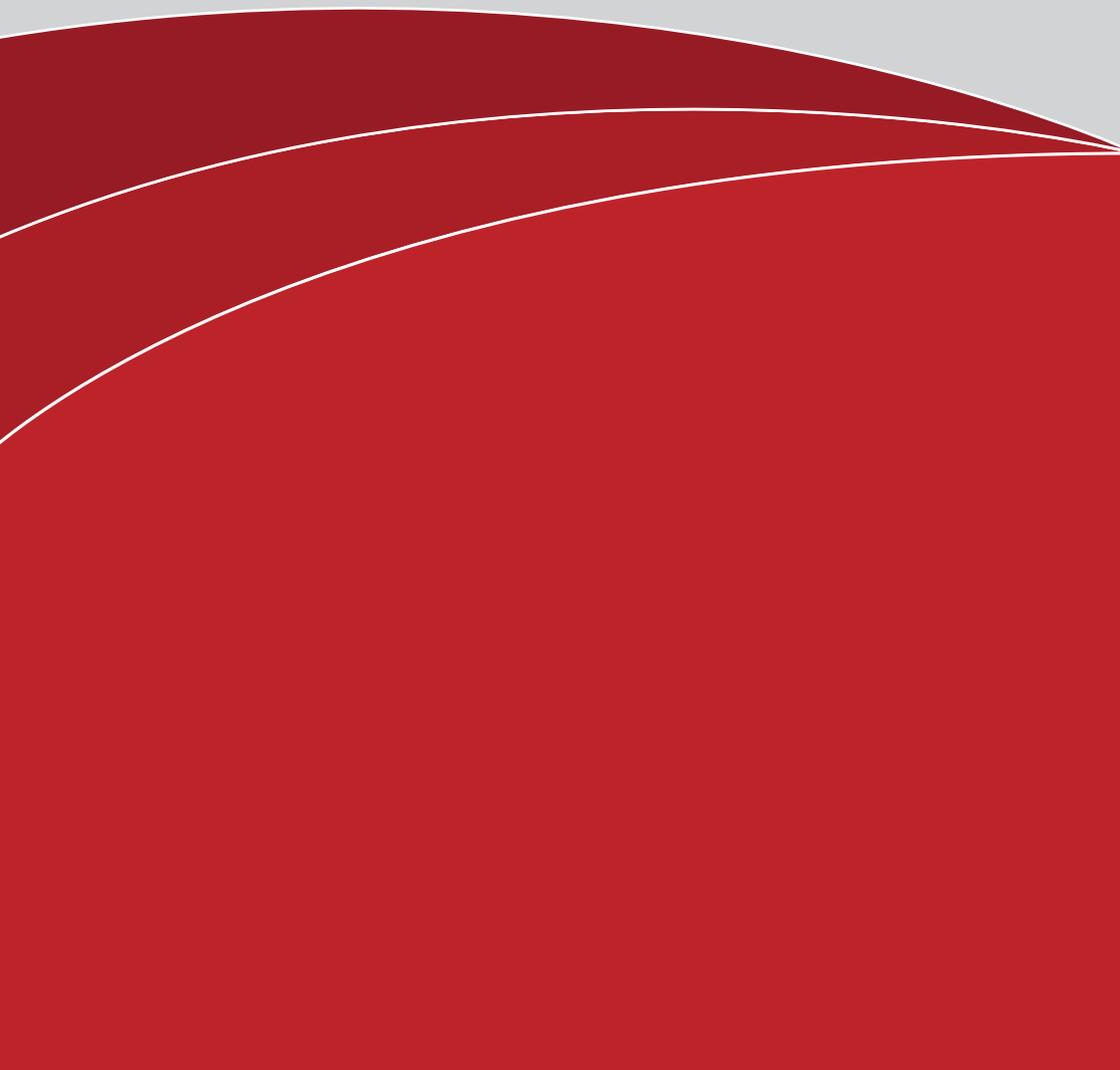




Social marketing for a better life

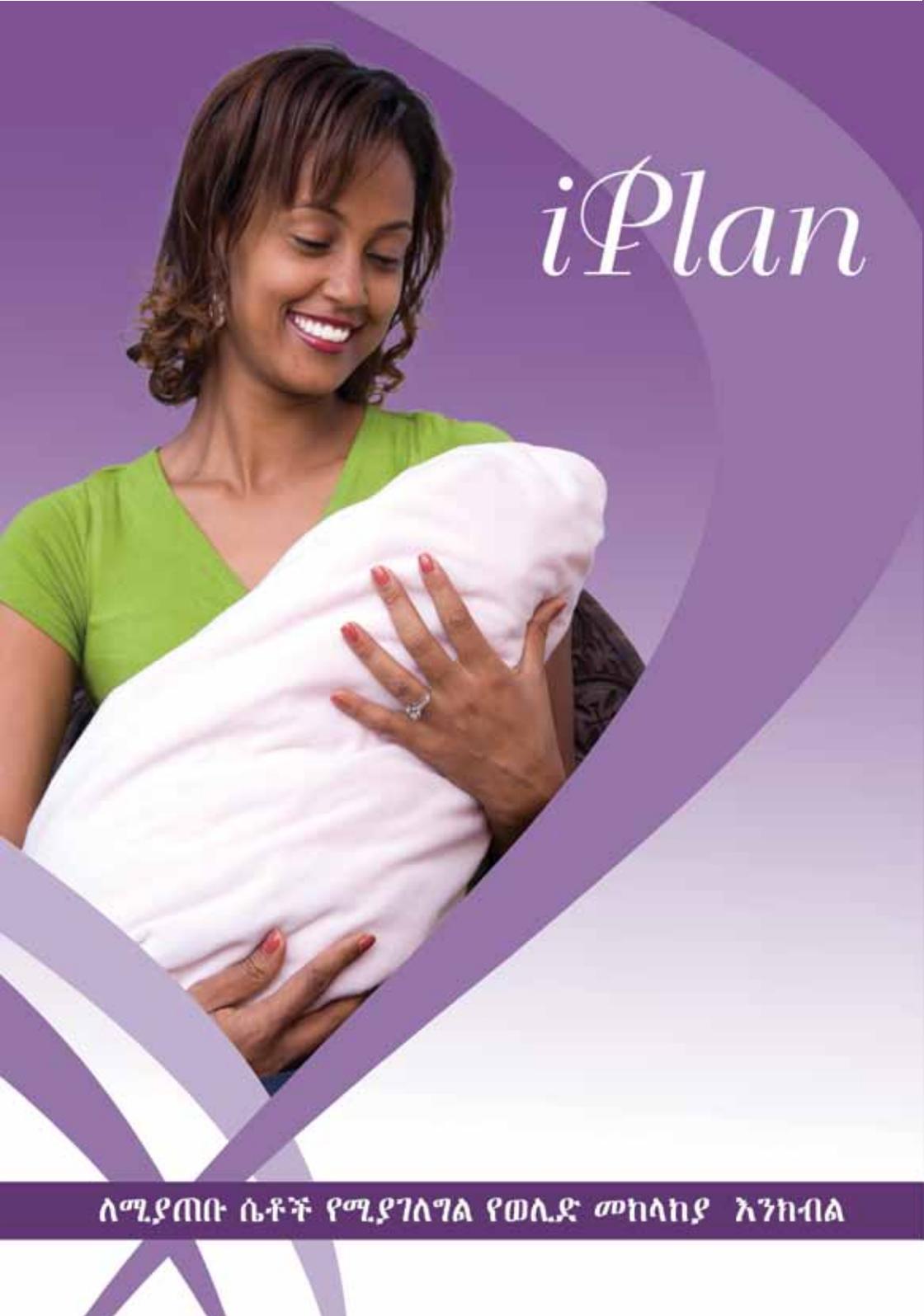


Oral contraceptives

Oral contraceptives, commonly known as birth control pills or just 'the pill'; contain hormones either a combination of a progestin and estrogen or progestin alone.

DKT Ethiopia introduced Oral contraceptive tables in different types of brand names. This are-

1. I plan a progestin only pill
2. Choice and Style combined contraceptive pills
3. Post pill the emergency contraceptive pills

A smiling woman with short brown hair, wearing a green t-shirt, is holding a baby wrapped in a white blanket. She is looking down at the baby with a joyful expression. The background is a solid purple color with a large, light purple circular graphic element on the right side. The text 'iPlan' is written in a white, elegant serif font in the upper right quadrant.

iPlan

ለሚያጠቡ ሴቶች የሚያገለግል የወሊድ መከላከያ እንክብል

iPlan iPlan iPlan



ለሚያጠቡ ሴቶች የሚያገለግል የወሊድ መከላከያ እንክብል

iPlan

How effective?
Side effects
Health benefits
May help prevent
Key points
Who can use I-plan?
I plan with women with HIV

I plan (Levonogestrel BP - 0.03mg)

I plan is oral contraceptive made from very low doses of synthetic progestin like the natural hormone progestin in the women's body.

How it works (mechanism of pregnancy prevention)

- Inhibition of ovulation
- Inhibition of sperm penetration by thickening of cervical mucus
- Delay in ovum transport by decreasing tubal motility

How effective?

Effectiveness depends on the user; for women who have monthly bleeding, the risk of pregnancy is greater if I plan is taken late or missed completely.

Side effects

The following side effects have been reported in women receiving I plan

- Changes in bleeding pattern including
 - For breast feeding women, longer delay in return of monthly

- bleeding after childbirth
 - Irregular bleeding
 - Infrequent bleeding
 - No monthly bleeding
- Headaches
- Dizziness

Health benefits

I plan helps protect against;

- Risk of pregnancy
- No estrogen side effects. Do not increase risk of estrogen - related complications such as heart attack or stroke

May help prevent?

- Endometrial and ovarian cancer
- Pelvic inflammatory disease

Key points

- A good choice for breastfeeding women who want an oral contraceptive
- Very effective during breastfeeding
- Very low dose
- Do not reduce a mother's milk supply

Who can use I-plan

- Safe and suitable for nearly all women
- Nearly all women can use I- plan safely and effectively including women who are;
 - Breastfeeding (starting as soon as 6 weeks after childbirth)
 - Have or have not had children
 - Not married
 - Any age, including adolescents and women over 40 years of age
 - Have just had an abortion, miscarriage or ectopic pregnancy
 - Smoke cigarettes, regardless of women's age or number of

- cigarettes smoked
- Have anemia now or had in the past

I plan with women with HIV

- Women who are infected with HIV, have AIDS or are on antiretroviral (ARV) therapy can safely use I plan
- Urge these women to use condoms along with I plan. Used consistently and correctly, condoms help prevent transmission of HIV and other STIs. Condoms also provide extra contraceptive protection for women on ARV therapy



Choice

በየቀኑ የሚዋጥ የወሊድ መከላከያ እንክብል

Choice Choice



በየቀኑ የሚዋጥ የወሊድ መከላከያ እንክብካቤ

Choice

How it works?

How effective?

Side effects

Why some women say they

like Choice?

Health benefits

Known health risks

Who can use Choice?

Women can begin using

Choice?

Who cannot use Choice?

Choice for women with HIV

Choice (COC)

Levonorgestrel BP – 0.15mg

Ethinylestradiol BP – 0.03mg

Choice- is a combined oral contraceptive made from very low doses of synthetic estrogen and progestin. Like the natural hormones progesterone and estrogen in a women's body

How it works?

Choice has a number of effects during a women's menstrual cycle. Choice prevents pregnancy mainly by suppressing ovulation through the combined action of estrogen and progestin

Choice increases the thickening of the natural mucus at the neck of cervix, making it more difficult for sperm to cross from vagina into the uterus

Choice also alters the lining of the endometrium of the uterus, preventing it from being prepared for a fertilized egg into the uterus

How effective?

Effectiveness depends on the user; risk of pregnancy is greatest when a woman starts a new pill pack 3 or more days late, or misses 3 or more near the beginning or end of a pill pack.

Protection against sexually transmitted infections (STI): none

Side effects

Some users report the following;

- Changes in bleeding patterns including
 - Lighter bleeding and fewer days of bleeding
 - Irregular bleeding
 - Infrequent bleeding
 - No monthly bleeding
- Headaches
- Dizziness
- Nausea
- Breast tenderness
- Weight change
- Mood changes
- Acne (can improve or worsen, but usually improves)

Why some women say they like Choice?

- Effective, reversible method
- Are controlled by the women
- Can be stopped at any time without a provider's help
- Do not interfere with sex

Health benefits

Choice helps to protect against the following;

- Risks of pregnancy
- Cancer of the lining of the uterus (endometrial cancer)
- Cancer of the ovary
- Symptomatic pelvic inflammatory disease

May help protect against;

- Ovarian cysts
- Iron- deficiency anemia

Reduce-

- Menstrual cramps
- Menstrual bleeding problems
- Ovulation pain

Known health risks

Very rare;

- Blood clot in deep veins of legs or lungs (deep vein thrombosis or pulmonary embolism)

Extremely rare;

- Stroke
- Heart attack

Who can use Choice?

- Choice safe and suitable for nearly all women
- Nearly all women can use Choice safely and effectively, including by women of any age, whether or not they have had children who;
 - Have anemia now or had in the past
 - Have varicose veins
 - Are infected with HIV, whether or not on antiretroviral therapy

Women can begin using Choice

- Without a pelvic examination
- Without cervical examination
- Without any laboratory examination

Who cannot use Choice?

Choice should not be used in women with any of the following conditions-

- Known or suspected pregnancy
- Pulmonary embolism

- Ischemic heart disease
- History of cerebrovascular accidents
- Valvular heart disease with complications
- Severe hypertension
- Diabetes with vascular involvement
- Headaches
- Carcinoma of the breast
- Active liver disease
- Heavy smoking (> 15 cigarettes per day) and the age of 35
- Hypersensitive to any component of this product
- Breastfeeding women Can reduce milk supply

Choice for women with HIV

Women who are infected with HIV, have AIDS or are on antiretroviral (ARV) therapy can safely use Choice, Urge these women to use condoms along with Choice. Used consistently and correctly, condoms help prevent transmission of HIV and other STIs. Condoms also provide extra contraceptive protection for women on ARV therapy. It is not certain whether ARV medications reduce the effectiveness of Choice.



Style

በየቀኑ የሚዋጥ የወሊድ መከላከያ እንክብል

Style Style Style



በየቀኑ የሚዋጥ የወሊድ መከላከያ እንክብል

Style

- How it works?
- How effective?
- Side effects
- Health benefits
- Why some women say they like style?
- Who can use style?

Style (Triphasic COC)

Style is combined oral contraceptive made from different composition of synthetic estrogen and progestin in the various pills of the package to mimic the normal menstrual cycle pattern of these hormones. Style is also a coated a tri-phasic contraceptive useful for contraceptive as well as regularizing the menstrual cycle. Each Style package contains 21 active pills without Ferrous Fumarate.

How it work

Style has a number of effects during a women's menstrual cycle

- Style prevents release of eggs from ovaries(ovulation)
- Style increases the thickness of the natural mucus at the neck of the cervix, making it more difficult for sperm to cross from vagina into the uterus
- Style also alters the lining of the endometrium of the uterus, preventing it from being prepared for a fertilized egg into the uterus

How effective

Effectiveness depends on the user: risk of pregnancy is greatest when a women starts a new pill pack 3 more days later, or misses 3 or more pills near the beginning or end of pill pack.

Side effect

Some user report the following

- Changes in bleeding patterns including
- Lighter bleeding and fewer days of bleeding
- Irregular bleeding
- Infrequently bleeding
- No monthly bleeding
- Headaches
- Nausea
- Weight change
- Mood change

Health benefits

Style helps to protect against the followings:

- Risks of pregnancy
- Cancer of the ovary
- Symptomatic pelvic inflammatory disease
- May help protect against:
 - Ovarian cysts
 - Iron deficiency anemia

Reduce

- Menstrual dysmenorrheal
- Menstrual bleeding problems
- Ovulation pain
- Symptoms of endometriosis (pelvic pain, irregular bleeding)

Why some women say they like style?

- Effective, reversible method
- Are controlled by the women
- Can be stopped at any time without a provider's help
- Do not interfere with sex
- Less risk of abnormal menstrual bleeding compared to monophasic or biphasic preparations

Who can use style?

- Style safe and suitable for nearly all women

Postpill

ያልተጠበቀው
ሲከሰት...

ለድንገተኛ እርግዝና የሚያገለግል የወሊድ መከላከያ እንክብል

Postpill



ለድንገተኛ አርገዝና የሚያገለግል የወሊድ መከላከያ እንክብል

Postpill

- How it works?
- Side effects
- Health benefits
- When to take them
- When to use?
- Contraceptive mistake

Post Pill ***Emergency contraception Levonorgestrel BP*** ***0.75mg***

Post pill is contraceptive method that can be used as emergency measure to prevent pregnancy after unprotected sexual intercourse. Post pill contains a progestin hormone like the natural hormone progesterone and in a women's body.

How it works?

- Post pill prevents release of eggs from ovaries
- Post pill increases the thickness of the natural mucus at the neck of the cervix, making it more difficult for sperm to cross from vagina into the uterus
- Post pill also alters the lining of the uterus, preventing it from being prepared for a fertilized egg into the uterus

Side effects

Some users report the following

- Change in bleeding pattern including;
- Slightly irregular bleeding for 1-2 days after taking post pills

- Monthly bleeding that starts earlier or later than expected
- Nausea (reduce the risk of nausea by taking ECPs with food)
- Abdominal pain
- Fatigue
- Headaches
- Breast tenderness
- Dizziness
- Vomiting

Health benefits

Post pill helps to protect against risk of pregnancy

When to take them

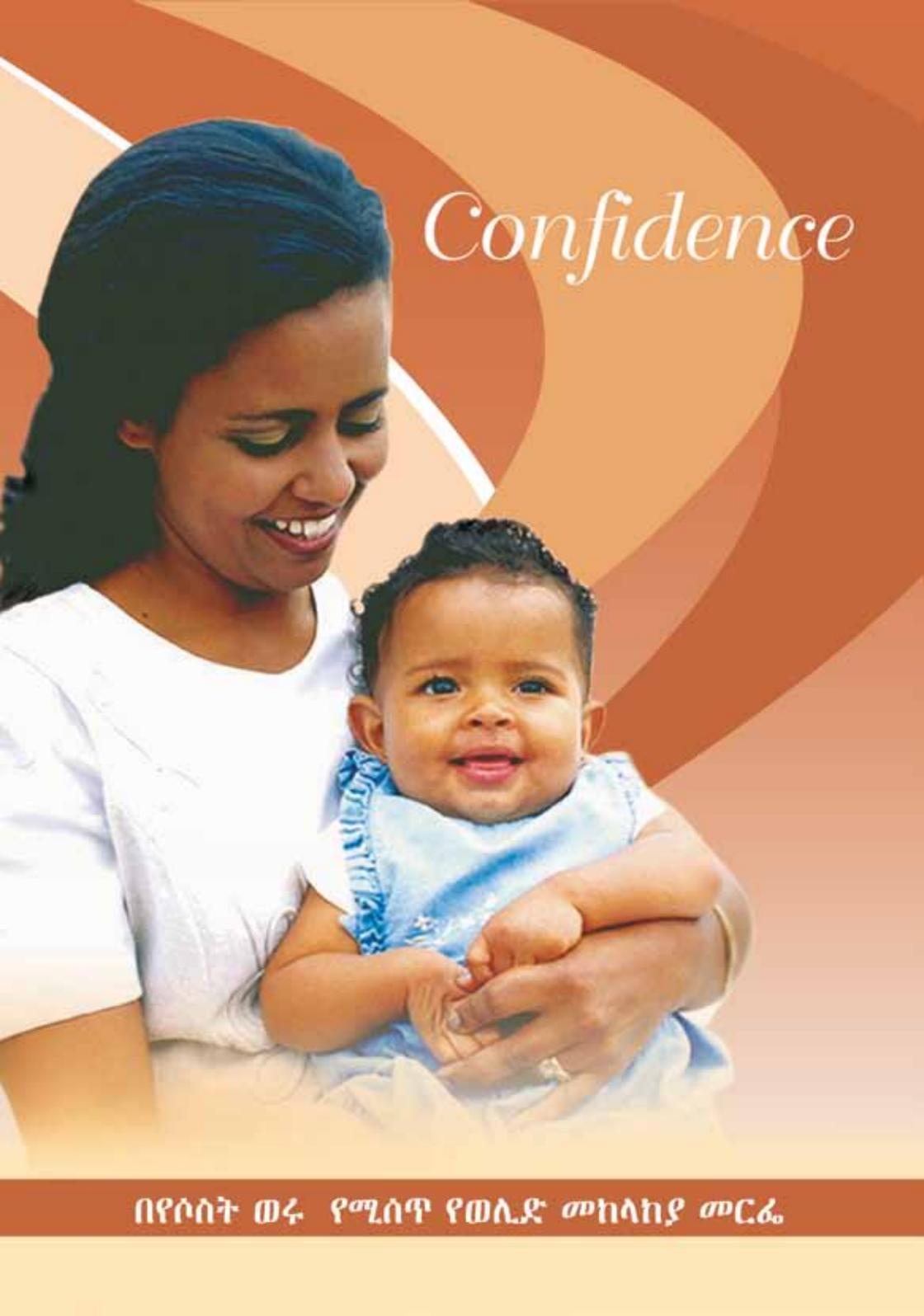
- The tablets of post pill should be taken orally within 72 hours after unprotected intercourse
- Post pill should be taken as early as possible otherwise efficacy declines with time
- The first tablets should be taken as early as possible and the second tablet should be taken within 12 hours of the first dose
- Post pill can be taken at anytime during the menstrual cycle unless menstrual bleeding is over due

When to use?

- Any time within 3 days after unprotected sex, the sooner after the unprotected sex that the post pill are taken the more effective they are, sex was forced (rape) or coerced
- Any unprotected sex

Contraceptive mistake, such as

- Condom was used incorrectly, slipped or broken
- Couple incorrectly used a fertility awareness methods (for example, failed to abstain or to use another method during the fertile days)
- Man failed to withdraw, as intended, before he ejaculated
- Women has missed 3 or more combined or oral contraceptive pills or has started a new pack 3 or more days late
- IUD has come out of place
- Women is more than 2 weeks late for her repeat progestin- only injection

A photograph of a woman with dark hair, wearing a white t-shirt, smiling warmly as she holds a baby. The baby is wearing a light blue dress and looking towards the camera. The background consists of large, overlapping, curved shapes in shades of orange and brown. The word "Confidence" is written in a white, cursive font in the upper right area.

Confidence

በየሰዓት ወሩ የሚሰጥ የወሊድ መከላከያ መርፌ

Confidence Confidence



በየሰዓት ወሩ የሚሰጥ የወላድ መከላከያ መርፌ

Confidence

Mechanism of Action

Side effects

Health benefits

Who can use Confidence?

Injectable contraceptive Confidence (medroxyprogesterone acetate...150mg/ml)

Confidence is injectable contraceptive contains synthetic progestin similar to the natural hormone that a women's body makes. After it is given intramuscularly (I.M.), the hormone is released slowly into the blood stream. Confidence is a long acting hormonal contraceptive and is given every three months. It can be used through out breastfeeding.

- Private.
- Return of fertility delayed about 4 months longer on average
- No estrogen side effects

Mechanism of Action

- Inhibition of ovulation (release of egg from the ovary)
- Thickens the cervical mucus, the thicker renders sperm penetration difficult
- Prevents the implantation of a fertilized egg

Side effects

Some users report the following;

Changes in bleeding patterns including with confidence first three month

- Irregular bleeding
- Prolonged bleeding
- Weight gain
- Headaches
- Dizziness
- Abdominal bloating and discomfort
- Mood changes

Health benefits

Confidence helps protect against

- Risk of pregnancy
- Cancer of the lining of the uterus(endometrial cancer)
- Uterine fibroids
- Ovarian cancer
- Iron-deficiency anemia

Confidence may help protect against

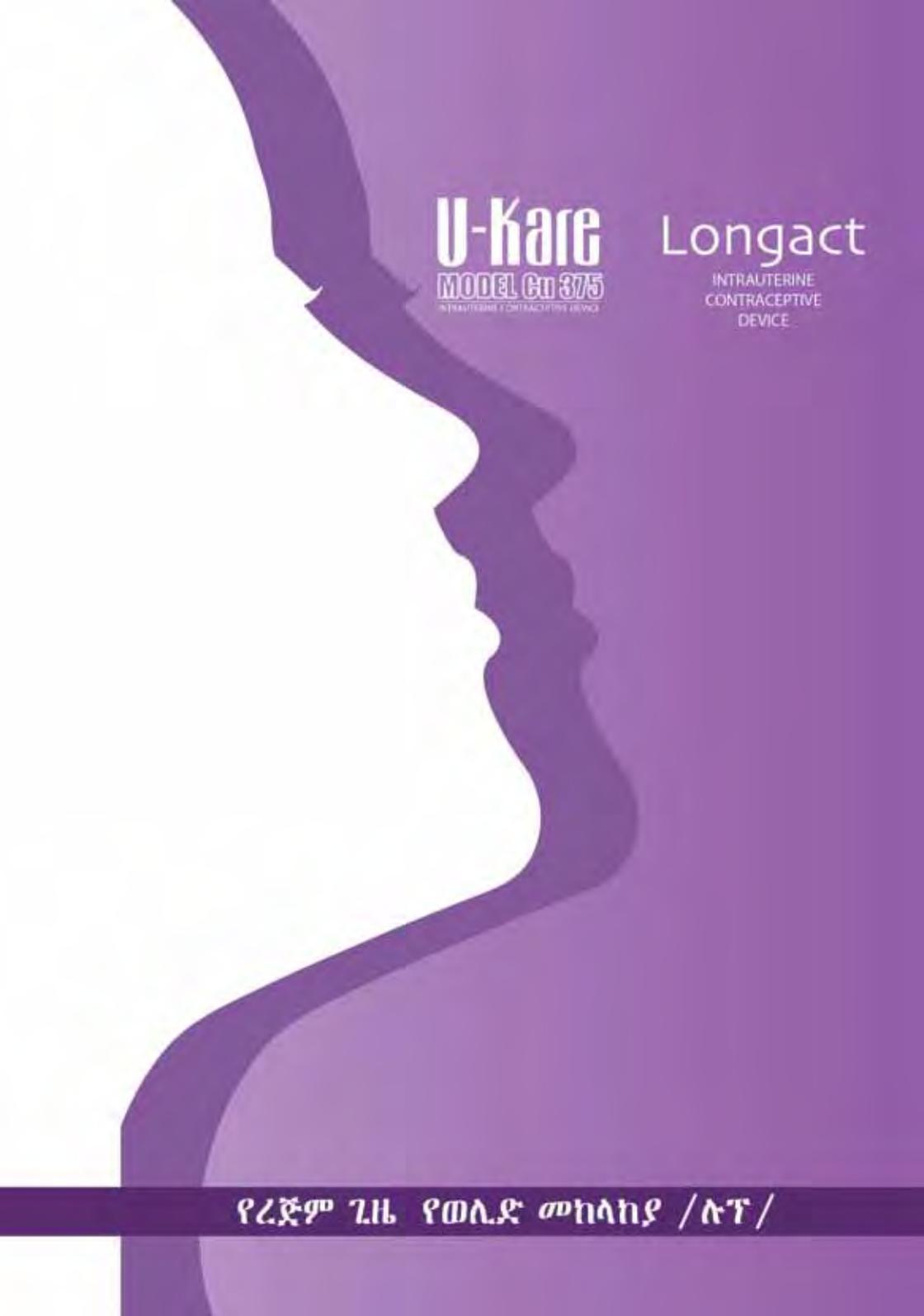
- Symptomatic pelvic inflammatory disease
- Iron-deficiency anemia

Reduces;

- Sickle cell crises among women with sickle cell anemia
- Symptoms of endometriosis (pelvic pain, irregular bleeding)

Who can use Confidence?

- Nearly all women can use Confidence safely and effectively, including women who have or have not had children
- Are breastfeeding (starting as soon as 6 weeks after childbirth)



U-Kare
MODEL Cu 375
INTRAUTERINE CONTRACEPTIVE DEVICE

Longact

INTRAUTERINE
CONTRACEPTIVE
DEVICE

የረጅም ጊዜ የወሊድ መከላከያ /ሉፕ/

U-Kare Longact



የረጅም ጊዜ የወሊድ መከላከያ / ሉፕ /

IUCD

Log of U-kare
Log of Long act
Advantage and Indications
Disadvantages of IUCD
Timing for Insertion and Removal
Insertion
Removal

IUCD

- U-kare (model Cu 375) intrauterine contraceptive device (IUD) offers almost complete protection against pregnancy, and it remains effective for a period of 5 years.

Log of U-kare

- Long act (Copper T-380A) intrauterine contraceptive device (IUD) provides protection against pregnancy for a period of 12 years.

Log of Long act

Characteristics

- Highly effective (>99 %)
- Safe for most women
- Interval, post partum lactating/ non lactating
- Emergency contraceptive
- Reversible (Immediate) and economical
- Long term (no daily decision/ imposition of drugs)
- One visit for insertion and one follow up
- Confidentiality

- Privacy
- Not Sexual dependent – client control over her fertility

Advantage and Indications

- Contraceptive effect starts immediately
- Highly effective
- Protective against ectopic pregnancy
- Long-lasting
- Convenient
- Well-liked by users
- Cost effective
- Good choice for older women with hormonal contra indication.
- Facility and provider dependent.
- Immediately postpartum

Disadvantages of IUCD

- Associated with Longer/ mild/heavy bleeding spotting Cramp in the 1st 3 months
- Menstrual disturbances
- Cramping and pain
- Spontaneous expulsion
- Perforation

Timing for Insertion and Removal

Insertion

- Any time during menstrual Cycle (If reasonably sure that clients is not pregnant)
- Post partum
- Post Abortion

Removal

- Any time during menstrual Cycle
- If Client desires (After adequate Counseling) / If Client want to get pregnant
- If Client experienced persistent S/E or other health problems
- Evidence of perforation
- At the end of the effective life of the IUD

ለሕይወትህ ዋጋ ስጥ

HIWOT
TRUST

ሕይወት



ለመከላከል ብቃት!

Superior Protection Superior Pleasure

sensation



ለአስደሳች ሕይወት
Make Your Life Sensational

Condoms

How effective

Side effects, health benefits and health risks

Known health benefits

Known health risks

What condoms users should not do ?

Condoms

Male Condoms are thin protective sheaths that cover the penis or vagina. Condoms made of latex are the only contraceptives that provide protection against all common sexually transmitted diseases, including those due to bacteria (such as gonorrhea and syphilis) and those due to viruses (such as HIV)

How do you choose between the different condom types? An important thing to consider is whether or not you plan to use the condom as a contraceptive or if you just want to use it for sex play. If you need a condom for protection, make sure to read the condom label to see if it is approved for use against unplanned pregnancy and STDs. Also, make sure to check the expiration date to make sure that the condom is safe to use.

There are different condom brands with great flavors. The flavor may be contained in the lubricate or directly on the condom. Some flavored condoms are even colored to match the flavor (such as red for strawberry flavor, yellow for banana). Flavors can include mint, grape, orange, banana, strawberry, and even coffee. These different condom brands are also approved for strength and protection. These condoms are shaped and textured to increase pleasure for the female, male or both partners.

How effective

Effectiveness depends on the user; risk of pregnancy or sexually transmitted infection (STI) is greatest when condoms are not used with every act of sex. Very few pregnancies or infections occur due to incorrect use, slips, or breaks.

Protection against pregnancy;

Return of fertility after use of condoms is stopped; no delay

Protection against HIV and other STIs;

- Male condoms significantly reduce the risk of becoming infected with HIV when used correctly with every act of sex
- Condoms reduce the risk of becoming infected with many STIs when used consistently and correctly
- Protect best against STIs spread by discharge, such as HIV, gonorrhea, and chlamydia
- Also protect against STIs spread by skin-to-skin contact

Side effects, health benefits and health risks

Side effects; None

Known health benefits

Help protect against;

- Risks of pregnancy
- STIs, including HIV

Known health risks

- Extremely rare
- Severe allergic reaction

What condoms users should not do?

Some practices can increase the risk that the condom will break and

should be avoided

- Do not unroll the condom first and then try to put it on the penis
- Do not use lubricants with an oil base because they damage latex
- Do not use condom if the color is uneven or changed
- Do not use a condom that feels brittle, dried out, or very sticky
- Do not reuse condoms
- Do not have dry sex

Also, do not use the same condom when switching between different penetrative sex acts, such as from anal to vaginal sex. This can transfer bacteria that can cause infection.

Frequently Asked Question

Condom Questions

Why should you use a condom when you have sexual intercourse?

Condoms, when used consistently and correctly, are the only form of protection that can help stop the transmission of sexually transmitted diseases (STDs) and prevent pregnancy.

Are condoms effective against HIV and other STDs?

Condoms are very effective at preventing HIV transmission, and will also help to prevent the transmission of any other infection that's spread through semen or vaginal fluids. However, they are only effective if they're used properly every time you have sex.

How are condoms tested?

There are a range of tests performed by both regulatory agencies and the condom manufacturers to ensure they're safe and strong enough to use during sex. These include electronic testing, the water leak test, the air burst test and the strength test.

How can I check a condom is safe to use?

You need to make sure the condom has not expired, and that it has been properly stored.

Is it true that condoms have tiny holes in them?

Some people claim that condoms have tiny pores or holes in them through which sexually transmitted diseases such as HIV can pass. This is not true. Many studies show that condoms do not have pores big enough for HIV to travel through. Most latex condoms have walls that are approximately .05 mm thick – a virus such as HIV would therefore have to pass through a barrier around 500 times thicker than itself to reach the outside.

What are condoms made of?

Condoms are usually made of latex or polyurethane. Latex condoms are more widely available and cheaper, although some people are allergic to them, in which case a polyurethane condom may be more appropriate.

What is the history of the condom?

Condom use can be traced back several thousand years and were once simply strips of linen. Animal intestines have also provided an alternative to today's more practical latex and polyurethane varieties.

How much protection do condoms give against pregnancy? If a condom breaks what are the risks of pregnancy?

When used properly (i.e. the condom doesn't split or burst) condoms can be very effective in preventing both pregnancy and STDs. If a condom breaks and no other form of contraception such as the birth control pill is being used then there is a risk that a woman may become pregnant.

Is it possible to get different sizes of condoms?

Condoms are made in different lengths and widths, and different manufacturers produce varying sizes. There is no standard length for condoms, although those made from natural rubber will always stretch if necessary to fit the length of the man's erect penis.

The width of a condom can also vary. Some condoms have a slightly smaller width to give a 'closer' fit, whereas others will be slightly larger.

Condom makers have realized that different lengths and widths are needed and have broadened their range of sizes.

The brand names will be different in each country, so you will need to do your own investigation of different names.

Is using two condoms better than one to avoid pregnancy?

Using two condoms at the same time - either two male condoms or a male and female condom - is not a good idea as the friction of them rubbing together may result in one or both of the condoms tearing. If you want to take extra precautions against pregnancy when having sex, and are concerned about the possibility of a condom breaking, it is better to use another form of contraception. For example, using the birth control pill as well as a condom will provide extra protection against pregnancy and STDs.

If I use a condom I seem to lose my erection...

It is a good idea to get some condoms before having sex and practice using them. That way you can get used to the feel of condoms and putting them on, which should help you feel more relaxed about using them when having sex and less likely to lose your erection.

What is the best way to get condoms?

It will depend on which country you are in, but in Ethiopia you can buy condoms from Hotels, bars, shops, pensions, pharmacy, clinics, and supermarkets.

Maternal health products

Manual vaccum aspiration

- Treatment of incomplete abortion for uterine sizes up to 12 weeks since the woman's last menstrual period (LMP)
- Endometrial biopsy
- Safe and Effective
- Safe alternative to D & C

- Reusable and steam autoclavable
- Easy disassembly and reassembly

How it works?

Evacuate uterine contents by vacuum aspiration during first trimester of pregnancy.

How it is effective?

When used for uterine evacuation, vacuum aspiration is 99% effective in removing all uterine contents. Retained products of conception require a second aspiration procedure.

Medication Abortion

What is medication abortion?

Medication abortion refers to a family of safe and effective methods for terminating an unwanted pregnancy. Through the use of a drug or combination of drugs that are administered orally, and vaginally.

Medication abortion causes the pregnancy to terminate and the uterus to expel the products of conception. Medication abortion is also sometimes referred to as medical abortion, the abortion pill, non-surgical abortion, or non-aspiration abortion.



Log of Safe-T kit

How does medication abortion work?

Regimen or procedure	Mechanism of action	Advantages	Disadvantages
Mifepristone and misoprostol	<p>Mifepristone is taken orally and blocks the action of progesterone. This results in:</p> <ol style="list-style-type: none"> 1. Uterine lining thinning 2. Pregnancy detachment 3. Cervical softening and dilation 4. Uterine contractions <p>Subsequent administration of oral, vaginal, or buccal misoprostol, a prostaglandin E1analogue, results in uterine contractions and expulsion of the products of conception.</p>	<ul style="list-style-type: none"> • High success rate (95%-98%) • Effective during early pregnancy (through nine weeks) • For many women, the process resembles a heavy period • For many women, considered more "private" • Usually avoids surgical intervention • Anesthesia not required 	<ul style="list-style-type: none"> • May take days and occasionally weeks for the abortion to complete • Efficacy decreases at later gestational ages • Light bleeding may continue for several weeks after the abortion is complete • Women may see blood clots and the products of conception • Sometimes requires at least two clinic visits • Mifepristone can be expensive • Mifepristone is not available in most countries

<p>Misoprostol alone</p>	<p>Misoprostol is a prostaglandin E 1 analogue that causes uterine contractions and cervical softening. Administration of vaginal or buccal misoprostol alone results in uterine contractions and expulsion of the products of conception.</p>	<ul style="list-style-type: none"> • Used during early pregnancy (through nine weeks) • For many women, the process resembles a heavy period • Often considered to be more “private” • Usually avoids aspiration intervention • Anesthesia not required • Registered in many more countries than either mifepristone or methotrexate • Often much cheaper than other medication abortion methods 	<ul style="list-style-type: none"> • Success rate is low (75%-85%) compared to other medication abortion regimens • Research to determine optimal regimen is still underway • Takes days to weeks to complete • Cramping and bleeding more significant than other medication abortion regimens • Post-procedure bleeding may last for weeks • Women may see blood clots and the products of conception
<p>Vacuum aspiration procedures</p>	<p>A straw-like tube (a cannula), which is attached to a suction apparatus is inserted into the uterus through the open (dilated) cervix. The uterine contents are then emptied by suction.</p>	<ul style="list-style-type: none"> • Very high success rate (99%) • Often requires only one clinic visit • Procedure completed within minutes • Sedation is available 	<ul style="list-style-type: none"> • Involves instrumentation and a procedure • Often considered to be less “private”

Frequently Asked Questions (FAQs) about medication abortion

Who should not use medication abortion?

Most women who have an unwanted pregnancy of nine weeks or less are eligible for medication abortion methods. Medication abortion methods may be contraindicated if a woman suffers from specific conditions or diseases, listed below. Women who have any of these conditions should discuss their eligibility for medication abortion and their abortion care options with their health care provider

- Confirmed or suspected ectopic pregnancy
- Allergy to mifepristone
- Allergy to misoprostol
- Chronic systemic use of corticosteroids
- Coagulopathy
- Current anticoagulant therapy
- Chronic adrenal failure
- Inherited porphyries
- IUD in situ (must be removed prior to induction)

How long after having a medication abortion will a woman resume normal menstruation?

Most women will ovulate within the first two or three weeks after the abortion. Consequently, most women will have a normal menstrual period four to five weeks after the abortion. A woman can become pregnant once ovulation resumes and immediate use of an effective family planning method is highly recommended.

How long after having a medication abortion can a woman resume sexual intercourse?

In general, women are advised not to insert anything into the vagina for approximately one week after a medication abortion. Thus it is recommended that women not engage in vaginal intercourse during this time period. Women can engage in other types of sexual activity during this period.

Women typically ovulate two or three weeks after a medication abortion.

Thus women who are sexually active can become pregnant within weeks of the abortion. Immediate use of an effective family method is highly recommended.

Can a woman use a medication abortion regimen if she is breastfeeding?

To date, there have been no studies investigating the relationship between breastfeeding and any of the medication abortion regimens.

Is there a difference between medication abortion and emergency contraception (also known as the morning after pill)?

Yes, medication abortion and emergency contraception are different. The use of emergency contraception does not cause an abortion. In fact, emergency contraception prevents pregnancy and thereby reduces a woman's need for an abortion.

Medical science defines the beginning of pregnancy as the implantation of a fertilized egg in the lining of a woman's uterus. Implantation begins five to seven days after fertilization (and is completed several days later). Emergency contraceptives work before implantation and not after a woman is already pregnant. If a woman takes emergency contraception when she is already pregnant, emergency contraception will not interfere with the established pregnancy and it is not teratogenic

TRUST (Levonorgestrel subdermal contraceptive Implant)

What is trust implant?

- Trust-Implant is matchstick –sized rods that contain progestin. Implanted beneath the skin of a woman's upper arm, the progestin is slowly released for 4 years.
- Two rod system with 75mg of Levonorgestrel in each rod
- Can be used by cigarette smokers, women who have risk factors for cardiovascular disease (including high blood pressure), and women who are breastfeeding (after 6 weeks postpartum)
- Has the same mechanism of action as Jadelle

- Safe, Effective, Long –acting, Reversible, and 4years of pregnancy protection

Each Trust – Implant has a disposable trocar for insertion

How it works?

- Implants interrupt fertility by thickening cervical mucus (mechanically preventing the sperm from accessing the ovum)
- Through hormonal effects that prevent ovulation.



TRUST (Contraceptive Implant)

How effective?

Less than 1 pregnancy per 100 women over the first year (5 per 10,000 women). This means that 9,995 of every 10,000 women will not become pregnant.

Side effects

Side effects reported by women using Trust Implant are:

- Changes in bleeding patterns including:
- Headaches
- Abdominal pain
- Acne (can improve or worsen)
 - Weight change gain or loss
 - Breast tenderness
 - Inflammation of the cervix; Ovarian cyst
 - Urinary tract infection
 - Back pain or generalized pain

- Dizziness
- Mood changes
- Nausea
- Painful period
- Pain at insertion site

Health benefits?

Help protect against:

- Risks of pregnancy
- Symptomatic pelvic inflammatory disease

May help protect against:

- Iron-deficiency anemia

Who can not use trust implant?

A woman with any of the conditions listed below should not use implants.

- less than 6 weeks since giving birth
- Current blood clot in deep veins of legs or lungs
- Unexplained vaginal bleeding before evaluation for possible serious underlying condition
- Had breast cancer more than 5 years ago, and it has not returned
- Severe liver disease, infection, or tumor
- Taking barbiturates, carbamazepine, oxcarbazepine, phenytoin, primidone, topiramate, or rifampicin. A backup method should also be used because these drugs reduce the effectiveness of Implanon.

Trust IMPLANTS FOR WOMEN WITH HIV

Women who are infected with HIV, have AIDS, or are on antiretroviral (ARV) therapy can safely use Trust Implant. Antiretroviral (ARV) therapy can safely use implants. Urge these women to use condoms along with implants.

Used consistently and correctly, condoms help prevent transmission of HIV and other STIs. Condoms also provide extra contraceptive protection for women on ARV therapy

Giving advice on side effects

Important: Thorough counseling about bleeding changes and other side effects must come before inserting Trust Implant. Counseling about bleeding changes may be the most important help a woman needs to keep using the method.

Describe the most common side effects

- Changes in her bleeding pattern:
 - Irregular bleeding that lasts more than 8 days at a time over the first year.
 - Regular, infrequent, or no bleeding at all later.
- Headaches, abdominal pain, breast tenderness, and possibly other side effects.

Explain about these side effects

- Side effects are not signs of illness.
- Most side effects usually become less or stop within the first year.
- Common, but some women do not have them.
- Client can come back for help if side effects bother her.

MISOPROSTOL

Instructions for use
Pharmacodynamics
Dosage and route of administration
Indications
Contraindications
Side effects
Drug interactions
Precautions

MISOPROSTOL (Miso-Fem®) FOR PREVENTION & TREATMENT OF POSTPARTUM HEMORRHAGE

Instructions for use

Miso-Fem is a prostaglandin E1 analogue commonly used for prevention and treatment of postpartum hemorrhage (PPH) with or without Active Management of Third Stage of Labor (AMTSL). Miso-Fem can be given orally, sublingually (under the tongue), buccally (in the cheeks), vaginally, and rectally. It can be stored at room temperature for a long time. Thus in the absence of conventional injectable uterotonics, Miso-Fem can be used effectively and safely for the prevention and treatment of PPH, which is the leading cause of maternal mortality in the developing world. In low-resource settings, where the majority of deliveries take place at home without skilled birth attendants, women risk serious complications or even death from PPH due to limited access to emergency obstetric services.

Pharmacodynamics

- Form: Tablets in blister packaging, 200mcg of misoprostol each.

- Chemical formula: 15-deoxy-16-hydroxy-16-methyl
- Molecular formula: C₂₂H₃₈O₅

Oral Administration: Orally or sublingually administered Miso-Fem is rapidly and almost completely absorbed from the GI tract or oral mucosa, appearing in the circulation within 90 seconds. The misoprostol in Miso-Fem undergoes rapid de-esterification to misoprostolic acid (MPA). In women receiving oral Miso-Fem, plasma concentration peaks between 7.5 and 30 minutes (mean 14 minutes), falling steeply by 60 minutes. Miso-Fem is primarily metabolized in the liver and less than 1 percent of its active metabolite is excreted in urine.

Rectal Absorption: Plasma concentration of misoprostol free acid rises gradually and attains a peak serum level in 45–120 min. By 240 minutes the average concentration will be less than 50% of the maximum. This route carries several potential advantages over the oral route: Gastrointestinal side effects are reduced when Miso-Fem is administered rectally; Useful for patients unable to tolerate the drug orally secondary to nausea or vomiting; Useful for treatment of PPH

Dosage and route of administration

The recommended dose for prevention of PPH is to give 600 mcg of Miso-Fem orally or sublingually immediately on the birth of the baby, or after the placenta is delivered if a second twin cannot be confirmed.

For treatment of PPH 1000 mcg is given rectally; however, a minimum of 2 hours should lapse after the oral dose, i.e., before the dose for treatment of PPH is given rectally.

Indications

Though misoprostol has several indications, here Miso-Fem is mainly indicated for prevention and treatment of PPH after normal vaginal delivery. Miso-Fem offers several important advantages over standard regimens including its easy and fast administration, easy storage and stability at ambient temperatures, long shelf life, off-label use, widespread availability, and low cost.

Contraindications

Though the incidence is very rare, Miso-Fem is contraindicated in conditions of allergy to misoprostol or other prostaglandins. Miso-Fem administration to women who are pregnant can cause abortion, premature birth or birth defects.

Side effects

Prolonged or serious side effects are rare, and usually depend on the dose and route of administration.

Shivering is the most common side effect, usually occurring within the first hour of taking Miso-Fem. This side effect is transient and will subside 2-6 hours after delivery.

Fever is less common and is often preceded by shivering, peaks 1-2 hours after taking Miso-Fem, and gradually subsides within 2-8 hours. If serious, an antipyretic can be used for relief. If however, fever or shivering persists longer than expected the woman should be referred to get investigation for infection.

Other rare side effects could be diarrhea, nausea or vomiting which can resolve by themselves. If vomiting is serious, anti-emetics can be used.

Drug interactions

Miso-Fem has no known drug interactions and does not induce the hepatic cytochrome P-450 enzyme system.

Precautions

Delivery attendants should make sure that there is no second baby (twin) before giving Miso-Fem. If not sure, or especially if the birth attendant is not skilled, Miso-Fem is best given after delivery of the placenta.

