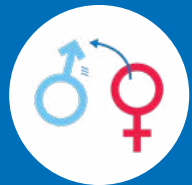


# Contraception

Choices for women  
with diabetes



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Version 1, May 2023, NDSSA5B032

**Disclaimer:** This information is intended as a guide only. It should not replace individual medical advice. If you have any concerns about your health, or further questions, you should contact your health professionals.

# Contraception matters

If you are a sexually active woman with diabetes, contraception matters.

Contraception allows you to choose whether or not you want to try for a baby and the timing of pregnancy best suited to you. It also gives you an opportunity to have all the health checks you need **before** trying for a baby.

**Women with diabetes can have a healthy baby but there are extra risks during pregnancy, so it is important that every pregnancy is carefully planned.**

Planning and preparing for pregnancy reduces the risk of health problems for both you and your baby, and gives you the best start to a healthy pregnancy.

Some methods of contraception work better than others. Some types of contraception can also offer you protection from sexually transmitted infections and have other benefits to your health.

Choosing the most effective form of contraception, suited to your individual needs, reduces your risk of an unplanned pregnancy or becoming pregnant before you are ready.

# Contraception choices

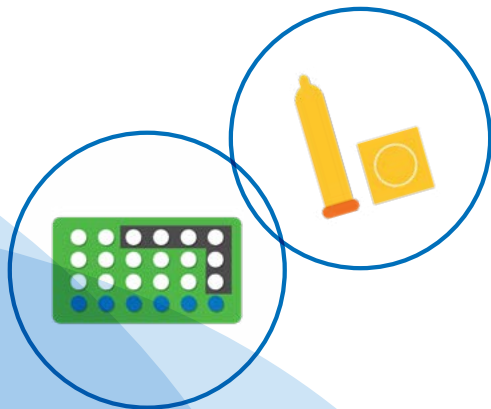
There are many different choices of contraception available. No single method suits everyone and you may have to try a few different types of contraception before you find one that is right for you.

Types of contraception currently available in Australia include:

- » **Long-acting reversible contraception** – intrauterine devices (hormonal or copper) and contraceptive implants.
- » **Short-acting reversible contraception** – oral contraceptive pills, the vaginal ring and contraceptive injections.
- » **Barrier and other methods** – condoms (male and female), the diaphragm, withdrawal method and fertility awareness methods.
- » **Permanent methods** – female sterilisation and male vasectomy.

In this booklet, you will find out more about each type of contraception, which ones work best at preventing pregnancy, the benefits and side effects of each, and how suitable they are when you have diabetes.

For more information, talk to your doctor about the safest and most reliable contraception that will be best for you.



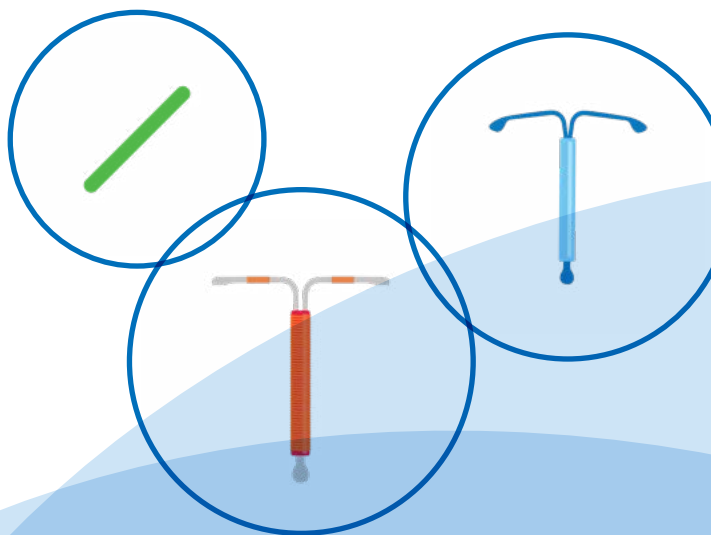
# Long-acting reversible contraception

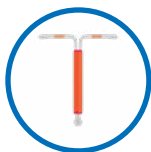
The long-acting reversible methods of contraception (LARC) include the intrauterine devices (copper or hormonal) and the contraceptive implant.

These are 'set-and-forget' methods - that is, once they are in place, you do not need to think about contraception – so there is no need for a daily routine or trips to the doctor for contraception prescriptions.

These types of contraception do not protect against sexually transmitted infections (STIs), so a condom should also be used when there is a risk of getting an STI.

A LARC can be fitted or implanted at some local general practices or a family planning or women's health clinic by a gynaecologist, a specially trained general practitioner (GP) or a nurse.





## Copper IUD

An intrauterine device (IUD) is a small T-shaped device placed inside your uterus (womb). IUDs work by preventing sperm from reaching and fertilising an egg. The copper IUD is a non-hormonal type of contraception. Copper IUDs can provide contraception for up to 10 years, but can be removed earlier, if needed.



**Fewer than 1 in 100 women will become pregnant each year while using a copper IUD.**

### Benefits

- » More than 99% effective at preventing pregnancy.
- » Provides long-term contraception.
- » Easily reversible and will not affect future fertility.
- » Less expensive than many other types of contraception (more expensive at first but cheaper in the long-term because it lasts for up to 10 years).
- » You can try for pregnancy as soon as your IUD is removed.
- » Safe with breastfeeding and can be inserted in the first few months after you have had a baby.
- » Suitable whether you have had children or not.

### Side effects

The copper IUD can increase the amount of vaginal bleeding, so may not be recommended for women with heavy or irregular periods. There is a very small risk of pelvic infection or of the IUD being pushed out of the uterus. Women are advised to regularly self-check that the IUD is still in place.

### For women with diabetes

The copper IUD is a good choice for women with type 1 diabetes or type 2 diabetes, and can be used safely even if you have diabetes-related complications affecting the kidneys, eyes or nerves. The copper IUD does not change blood glucose levels.



## Hormonal IUD

An intrauterine device (IUD) is a small T-shaped device placed inside your uterus (womb). IUDs work by preventing sperm from reaching and fertilising an egg. The hormonal IUDs available in Australia include Mirena® and Kyleena®. They can provide contraception for up to 5 years, but can be removed earlier, if needed.



**Fewer than 1 in 100 women will become pregnant each year while using a hormonal IUD.**

### Benefits

- » More than 99% effective at preventing pregnancy.
- » Provides long-term contraception.
- » May reduce menstrual bleeding and period pain (periods may stop altogether).
- » Easily reversible and will not affect future fertility.
- » Less expensive than many other types of contraception (more expensive at first but cheaper in the long-term because it lasts for up to 5 years).
- » You can try for pregnancy as soon as your hormonal IUD is removed.
- » Safe with breastfeeding and can be inserted in the first few months after you have had a baby.
- » Suitable whether you have had children or not.

### Side effects

Some women find that their periods become irregular after the hormonal IUD is first inserted. They generally then become lighter. There is a very small risk of pelvic infection or of the IUD being pushed out of the uterus. Women are advised to regularly self-check that the IUD is still in place.

### For women with diabetes

The hormonal IUD is a suitable choice for women with type 1 diabetes or type 2 diabetes, and can be used safely even if you have diabetes-related complications affecting the kidneys, eyes or nerves. The hormonal IUD is unlikely to change blood glucose levels.



## Contraceptive implant

A contraceptive implant contains the hormone progestogen and is implanted under the skin in your arm using a local anaesthetic. In Australia, it is available as Implanon®.

The hormones released by the implant prevent pregnancy by stopping the ovaries releasing an egg each month. A contraceptive implant lasts for three years but can easily be removed, if needed.



**Fewer than 1 in 100 women will become pregnant each year while using the contraceptive implant.**

### Benefits

- » More than 99% effective at preventing pregnancy.
- » Provides long-term contraception.
- » May reduce menstrual bleeding and period pain (periods may stop altogether).
- » Easily reversible and will not affect future fertility.
- » Less expensive than many other types of contraception (more expensive at first but cheaper in the long-term because it lasts for up to 3 years).
- » You can try for pregnancy as soon as your implant is removed.
- » Safe with breastfeeding and can be inserted straight after you have had a baby.
- » Suitable whether you have had children or not.

### Side effects

Some women find that their menstrual bleeding pattern may change and become unpredictable. Other side effects may include headaches, mild weight gain, breast tenderness, mood changes and acne. Rarely the device may cause an infection at the site where it has been inserted.

### For women with diabetes

The contraceptive implant is a suitable choice for women with type 1 diabetes or type 2 diabetes, and can be used even if you have diabetes-related complications affecting the kidneys, eyes or nerves. The contraceptive implant is unlikely to change blood glucose levels.

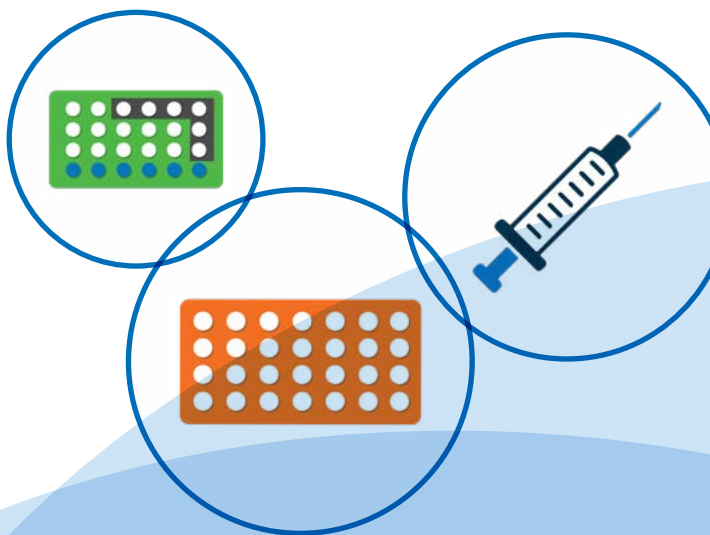


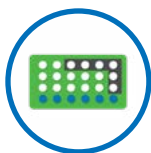
# Short-acting reversible contraception

The short-acting reversible contraception includes oral contraceptive pills, the vaginal ring and contraceptive injection.

These types of contraception are effective when taken (or used) correctly. However, being short-acting reversible contraceptives, they must be remembered on a regular basis and at the right time.

These types of contraception do not protect against sexually transmitted infections (STIs), so a condom should also be used if you are at risk of getting an STI.





## Combined oral contraceptive pill

The combined oral contraceptive pill is taken in tablet form. It contains a combination of two hormones. The combined oral contraceptive pill works by stopping the ovaries from releasing an egg each month. It can also thicken the fluid around the entrance to the uterus (womb), helping to prevent sperm from entering.

To prevent pregnancy, the combined oral contraceptive pill must be taken as directed every day. If you miss a pill, have vomiting or severe diarrhoea, another form of contraception (like a condom) may need to be used. Some other medications (for example, some antibiotics) can also make the pill less reliable. Ask your doctor or pharmacist for more information. It is important that you do not smoke if you are using the combined oral contraceptive pill.



**9 in 100 women will still become pregnant each year while using the combined oral contraceptive pill.**

### Benefits

- » Provides good control of menstrual bleeding pattern.
- » May reduce menstrual bleeding and period pain.
- » Often improves acne and excessive hair growth on the body.
- » You can safely skip your period, if needed.
- » Reduces the risk of ovarian and endometrial cancer.

### Side effects

Some women using the combined oral contraceptive pill may experience headaches, nausea, weight changes, breast tenderness or high blood pressure. There is a small increase in the risk of developing blood clots (usually in the legs or lungs) with this type of contraception. Women at risk of blood clots will be advised not to use the combined oral contraceptive pill.

## For women with diabetes

The combined oral contraceptive pill is suitable for some women with type 1 diabetes or type 2 diabetes. However, it should **not** be used if you have diabetes-related complications affecting the kidneys, eyes or nerves, high blood pressure, high cholesterol levels, heart disease, if your weight is in the obese range or you smoke. Although it is unlikely that the combined oral contraceptive pill will change blood glucose levels, extra monitoring is recommended when first starting on this type of contraception.



## Progesterone only mini-pill

The progesterone only mini-pill is taken in tablet form. It contains a low dose of the hormone progesterone. The mini-pill works by thickening the fluid around the entrance to the uterus (womb), helping to prevent sperm from entering.

Some types of mini-pill must be taken at exactly the same time every day. If you miss a pill or are late taking it, have vomiting or severe diarrhoea, another form of contraception (like a condom) will need to be used. Some other medications can also make the pill less reliable. Ask your doctor or pharmacist for more information.



**9 in 100 women will still become pregnant each year while using the mini pill.**

### Benefits

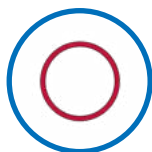
- » Low dose hormone suitable for women who cannot tolerate the combined oral contraceptive pill.
- » May reduce menstrual bleeding and period pain.
- » Suitable for women who are breastfeeding.

### Side effects

Some women using the mini-pill may experience irregular menstrual bleeding, headaches, mood changes or weight gain.

### For women with diabetes

The mini-pill is a suitable choice for women with type 1 diabetes or type 2 diabetes, and can be used even if you have diabetes-related complications affecting the kidneys, eyes or nerves. The mini-pill is unlikely to change blood glucose levels.



## Vaginal ring

The vaginal ring is a small plastic ring that you put into your vagina. In Australia, it is available as the NuvaRing®.

The vaginal ring stays in place for three weeks. You then remove it for one week, during which time you will have your period. At the end of the ring-free week, you insert a new ring.

The vaginal ring contains a combination of two hormones that are absorbed through the walls of the vagina. The vaginal ring works by stopping the ovaries from releasing an egg each month. It can also thicken the fluid around the entrance to the uterus (womb), helping to prevent sperm from entering.

The vaginal ring is not subsidised by the Pharmaceutical Benefits Scheme (PBS), so you have to pay full price for it. This makes it an expensive option. To prevent pregnancy, the ring must be re-inserted at the right time. Some medications can also make the vaginal ring less reliable. Ask your doctor or pharmacist for more information. It is important that you do not smoke if you are using the vaginal ring.



**9 in 100 women will still become pregnant each year while using the vaginal ring.**

### Benefits

- » Stays in place for 3 weeks, so you do not need to think about daily contraception.
- » May reduce menstrual bleeding and period pain.
- » Does not need to be inserted by a health professional.
- » Reversible once removed.
- » Reduces the risk of ovarian and endometrial cancer.

## **Side effects**

Side effects may include increased vaginal discharge, headaches, nausea, weight changes, breast tenderness or high blood pressure. There is a small increase in the risk of developing blood clots (usually in the legs or lungs) with this type of contraception. Women at risk of blood clots will be advised not to use the vaginal ring.

## **For women with diabetes**

The vaginal ring is suitable for some women with type 1 diabetes or type 2 diabetes. However, it should not be used if you have diabetes-related complications affecting the kidneys, eyes or nerves, high blood pressure, high cholesterol levels, heart disease, if your weight is in the obese range or you smoke. Although it is unlikely that the vaginal ring will change blood glucose levels, extra monitoring is recommended when you first start using this type of contraception.



## Contraceptive injection

The contraceptive injection (also known as the depo injection) contains the hormone progesterone. In Australia, it is available as Depo-Provera®. It is given by injection every 12 weeks. The contraceptive injection works by stopping the ovaries from producing an egg each month. It also thickens the fluid around the entrance to the uterus (womb), helping to prevent sperm from entering.

To prevent pregnancy, you need to see your doctor for an injection every three months. Once the injection has been given, it cannot be reversed, you have to wait for it to wear off before you can become pregnant.



**6 in 100 women will still become pregnant each year while using contraceptive injections.**

### Benefits

- » The contraceptive effect lasts for 12 weeks, so you do not need to think about daily contraception.
- » May reduce menstrual bleeding and period pain (periods may stop altogether).
- » Suitable for women who cannot tolerate the combined hormones in some other types of contraception.
- » Effective if experiencing vomiting, diarrhoea or if using other medications.

### Side effects

Some women find that their periods may become unpredictable when using contraceptive injections. Other side effects may include weight gain, headaches, mood changes and reduced sex drive. A reduced bone density has been found in women using contraceptive injections; however, bone loss reverses once you stop using it.

### **For women with diabetes**

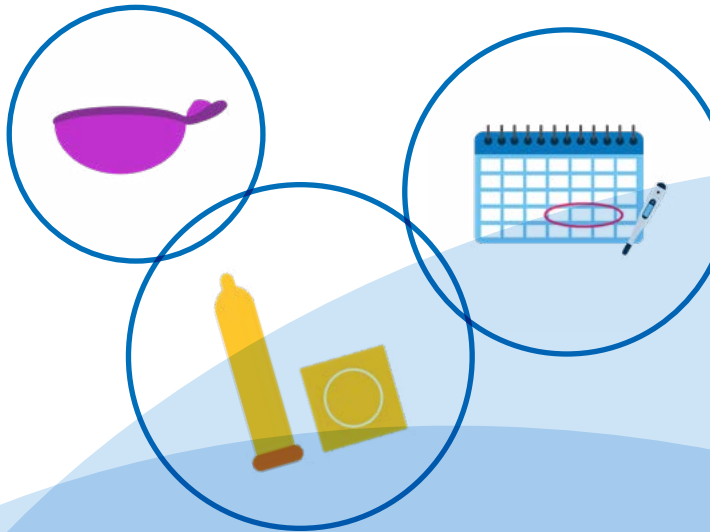
The contraceptive injection is suitable for some women with type 1 diabetes or type 2 diabetes. However, it may not be safe if you have high blood pressure, high cholesterol levels, heart disease, if your weight is in the obese range or you smoke. Although it is unlikely that contraceptive injections will change blood glucose levels, some women may gain weight while using this type of contraception. Extra blood glucose monitoring may be recommended.



# Barrier and other methods

Other types of contraception include condoms, the diaphragm, fertility awareness methods and the withdrawal method.

These types of contraception are less effective and are not recommended as the only method of contraception, because of the high risk of unplanned pregnancy.





## Condoms

There are two types of condoms available for use - male condoms, which are worn on the outside of the penis and female condoms, which are worn inside the vagina. They work as a barrier work to stop the egg and sperm from meeting.

Condoms can also help prevent the transmission of sexually transmitted infections (STIs), so they are often recommended for use with other types of contraception.



**18 in 100 women will still become pregnant each year if their partner uses a male condom.**

**24 in 100 women will still become pregnant using female condoms.**

### Benefits

- » Condoms offer protection against STIs.
- » They are widely available and inexpensive.

### Side effects

Some people may be allergic to latex or the lubricant in condoms, in which case latex free condoms can be used. There is a high risk of unplanned pregnancy with this type of contraception.

### For women with diabetes

Condoms are **not recommended** as the only method of contraception for women with type 1 diabetes or type 2 diabetes because of the high risk of unplanned pregnancy. The condom however, is often used in combination together with other types of contraception as an important way of preventing protecting yourself from sexually transmitted infections.



## Diaphragm

A diaphragm is a shallow, silicone cup that is placed inside the vagina to cover the cervix (the opening to your uterus or womb). It is used in combination with a special gel. It can be inserted up to two hours before having sex and needs to remain in place for at least six hours afterwards. The diaphragm and gel work as a barrier to stop the egg and sperm from meeting. In Australia, Caya® is the only diaphragm available.

A diaphragm does not provide any protection against sexually transmitted infections (STIs), so a condom should also be used if you are at risk of getting an STI.



**12 in 100 women will still become pregnant each year while using a diaphragm.**

### Benefits

- » You can buy it over the counter (without a prescription) from a pharmacy, from a family planning clinic or online.

### Side effects

Side effects can include irritation of the vagina or penis and increased risk of bladder infection. There is a high risk of unplanned pregnancy with this type of contraception.

### For women with diabetes

Diaphragms are **not recommended** as the only type of contraception for women with type 1 diabetes or type 2 diabetes because of the high risk of unplanned pregnancy.



## Fertility awareness methods

Fertility awareness methods of contraception are based on identifying which days of the month you are fertile in order to avoid a pregnancy. These include calendar methods, temperature monitoring or checking cervical mucus changes throughout the menstrual cycle.

Fertility awareness methods require motivation, support from your partner, as well as close monitoring and recording of your fertility using one or more of the methods described above. Fertility awareness methods may also mean that you have to avoid having sex on the days of the month that you are fertile, or use another form of contraception, such as condoms.

Fertility awareness methods do not provide any protection against sexually transmitted infections (STIs), so a condom should also be used if you are at risk of getting an STI.



**24 in 100 women will still become pregnant each year while using fertility awareness methods.**

### Benefits

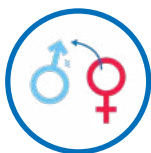
» Can be used in combination with barrier methods during fertile days.

### Side effects

There is a high risk of unplanned pregnancy with this method.

### For women with diabetes:

Fertility awareness methods are **not recommended** as the only type of contraception for women with type 1 diabetes or type 2 diabetes because of the high risk of unplanned pregnancy.



## Withdrawal method

Withdrawal method of contraception is when a man withdraws (pulls out) his penis from the vagina before he ejaculates. The withdrawal method works by lowering the chance of sperm entering the vagina. But if the penis is not pulled out at the right time or there is pre-ejaculate, it is possible for some sperm to get into the vagina, with a high risk of pregnancy.

The withdrawal method does not protect against sexually transmitted infections (STIs), so a condom should also be used if you are at risk of getting an STI.



**24 in 100 women will still become pregnant each year while using the withdrawal method.**

### Benefits

» There are no benefits to using this method.

### Side effects

There is a high risk of unplanned pregnancy with this method.

### For women with diabetes

The withdrawal method is **not recommended** as the only type of contraception for women with type 1 diabetes or type 2 diabetes because of the high risk of unplanned pregnancy.

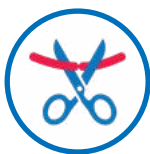
# Permanent methods

If you are absolutely sure you do not want to become pregnant in the future, there are permanent methods of contraception available.

These methods are available to both women and men, and involve a surgical procedure.

Permanent methods of contraception do not protect against sexually transmitted infections (STIs), so a condom should also be used if you are at risk of getting an STI.





## Female sterilisation

Female sterilisation involves surgery to block or remove a woman's fallopian tubes that carry the egg to the uterus (womb). This stops the egg and sperm meeting, to prevent a pregnancy. However, there are no changes to menstrual bleeding patterns. It is a permanent form of contraception and should be considered irreversible.



**Fewer than 1 in 100 women will become pregnant each year after female sterilisation.**

### Benefits

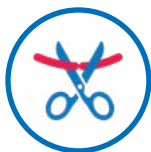
- » Highly effective.
- » Works immediately.

### Side effects

The procedure requires a general anaesthetic, which may cause nausea and tiredness. There may be some pain after the procedure and it takes about seven days to recover. There are also risks, as with any type of surgery, such as infection and bleeding. Damage to the bowel, bladder or blood vessels may occur with this type of surgery, but this is rare.

### For women with diabetes

A review of your diabetes management is recommended before the surgery. You will need to fast before the procedure, regularly monitor your blood glucose levels and make the necessary adjustments to your diabetes medication or insulin. Develop a plan with your diabetes health professionals and doctor about how your diabetes will be managed before, during and after the procedure.



## Vasectomy

Vasectomy involves surgery to block the man's tubes that carry the sperm. It is a permanent form of contraception and although it can sometimes be reversed, it is costly to do so and should be considered irreversible. It takes about three months for a vasectomy to begin working. Your partner will need to have a sperm test to check this. It is very uncommon for a vasectomy to stop working.



**Fewer than 1 in 100 women will become pregnant each year when her partner has had a vasectomy.**

### Benefits

- » Highly effective.
- » No surgery required for the woman.
- » Allows the woman to stop taking other types of contraception to prevent pregnancy.

### Side effects

The procedure usually requires the man to have a local anaesthetic. There may be some pain after the procedure and it takes several days to recover and several weeks before normal activities can resume. After the procedure there may be bruising, lumps, scarring and the risk of infection.

### For women with diabetes

This is a safe form of contraception for women with diabetes.



# Emergency contraception

Emergency contraception, is used to prevent pregnancy if you have had sex without using contraception or your contraception has failed. Emergency contraception is suitable for use by women with diabetes.

Available options include:

- » Emergency contraceptive pills (sometimes referred to as the ‘morning after pill’).
- » The copper IUD.

There are two different types of emergency contraceptive pills available over the counter (without a prescription) from a pharmacy. They must be taken within 5 days of unprotected sexual intercourse, but are most effective if taken within 3 days.

A copper IUD is a small T-shaped device that can be inserted by your doctor or at a family planning or women’s health clinic (see page 4). It is the most effective method of emergency contraception and can be left in place to provide ongoing contraception for up to 10 years, if needed.

**If you need emergency contraception, discuss options with your pharmacist or contact your GP or sexual health/family planning clinic for advice.**

# Sexually transmitted infections

Unprotected sexual contact puts you at risk of sexually transmitted infections (STIs).

## Signs and symptoms

Common symptoms of an STI may be:

- » unusual vaginal discharge
- » ulcers, blisters or itching in the genital area
- » unexplained vaginal bleeding
- » pain or difficulty passing urine
- » pain or irritation during sex

Not all STIs have obvious symptoms. You may have no symptoms or just general signs of being unwell such as headache, muscle ache and fever.

## Treatment

STIs need to be treated immediately to reduce the risk of complications, which can include infertility. Most STIs can be easily treated.

## Prevention

Using a condom is the best protection against an STI. Condoms are best used in combination with another form of contraception to reduce your risk of an unplanned pregnancy.

## For women with diabetes

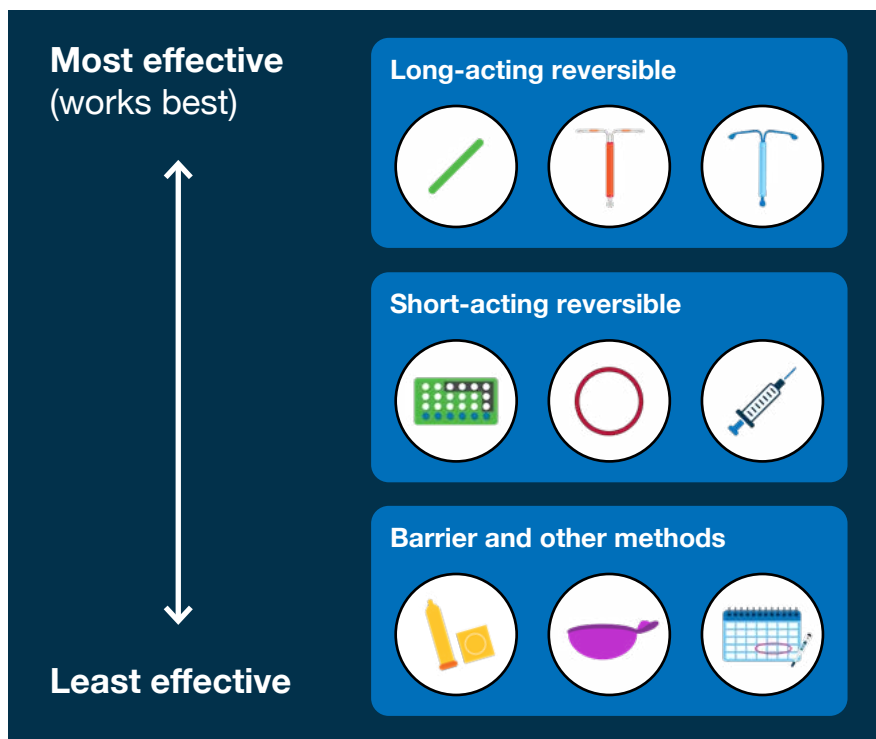
Like any infection, an STI may increase blood glucose levels in women with diabetes. If you have unexplained high blood glucose levels and think that you might have an STI, see your doctor as soon as possible.

# Contraception - your choice

So how do you choose the contraception best suited to you?

Look for contraception that is best suited to your individual health and relationship needs that provides the lowest risk of unplanned pregnancy or becoming pregnant before you are ready.

The diagram below shows the different methods of contraception, from those that work best to those that are the least effective. Ask your doctor about the one best suited to you.



# Planning for pregnancy

The best preparation for a healthy pregnancy starts with getting the right information and advice before you become pregnant.

**It is never too early to talk to your doctor about any pregnancy plans you may have - either now or in the future.**

Make an appointment with your endocrinologist and diabetes health professionals as soon as you start thinking about having a baby. They can support you to plan and prepare for pregnancy.

When you are planning for a pregnancy, use safe and effective contraception until your glucose levels are in the target range for pregnancy and you have had all of the health checks you need. With most types of contraception, it is possible to become pregnant as soon as you stop using them. So, remember, only stop using contraception when you are ready to try to become pregnant.

If your pregnancy is unexpected or you find that you are pregnant sooner than you intended, make an urgent appointment with your doctor and diabetes team. It is important at this time to get as much information and support as you can.

For more information, talk to your doctor or go to [ndss.com.au](https://www.ndss.com.au) to access information and resources about contraception and pregnancy planning.

## Acknowledgements

Diabetes Australia would like to acknowledge the NDSS Diabetes in Pregnancy Expert Reference Group (2022) - Associate Professor Glynis Ross (chair), Associate Professor Alison Nankervis, Associate Professor Ralph Audehm, Dr Christel Hendrieckx, Alison Barry and Dr Cindy Porter; as well as Professor Kirsten Black, Associate Professor Emily Hibbert and Dr Ravind Pandher for providing expertise and input into the development of this publication. Thank you to Angela Blair, Credentialed Diabetes Educator for reviewing the content and language.

Thank you to the women living with diabetes who kindly provided feedback on the draft booklet and suggestions for improvement.

**NDSS Helpline 1800 637 700**  
**[ndss.com.au](http://ndss.com.au)**