

Natural methods of birth control

Natural methods of birth control do not rely on the use of hormones or devices. These methods include Fertility Awareness Based Methods (FABMs), Lactational Amenorrhoea Method (LAM) and withdrawal.

What are Fertility Awareness Based Methods (FABMs)?

Fertility Awareness Based Methods (FABMs) utilise awareness of the fertile phase in the menstrual cycle to indicate when sexual intercourse should be avoided to prevent a pregnancy.

Methods of predicting or calculating the fertile phase include:

- Calendar method
- Temperature method
- Billing's ovulation method
- Symptothermal method

How do FABMs work?

A woman is fertile from a few days before ovulation until after ovulation has occurred. As sperm can survive in the uterus or Fallopian tubes for up to 5-7 days, women are most likely to become pregnant if they have sex in the week before ovulation.

FABMs require a woman to calculate and record fertile days by:

- counting the cycle length over a period of time
- observing signs that indicate that ovulation (egg release) is about to or has occurred

During the fertile days a couple need to abstain from sexual intercourse or use a barrier method.

Depending on the individual, sex may need to be avoided for 7-14 days during each menstrual cycle.

How effective is the FABM?

The effectiveness of these methods relies on motivation to prevent a pregnancy, length of time in using the method, and the type of method used.

If used correctly every time, these methods are 75-99% effective.

This means that if 100 women used these methods, between 1 and 25 could become pregnant in a year.

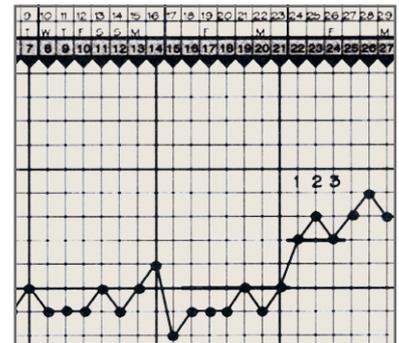
It is more successful for couples that have undertaken training with FABM educators.

What are the advantages of FABMs as a method of contraception?

- no hormone or device use and it does not interfere with the menstrual cycle
- cost effective – there is no ongoing expense
- women gain a high level of knowledge of their body, which can be used to know when they are most fertile. This can be used to prevent or achieve a pregnancy.

What are the disadvantages of FABMs as a method of contraception?

- it can be difficult to confidently predict ovulation
- requires daily awareness of changes and continued observations
- requires varying periods of abstinence if it is the only method used



Is the FABM suitable for all women?

This method is most suited to women who have a strong preference for natural methods because of health or religious reasons.

Partner cooperation is also an important factor in the success of this method.

Some situations can make FABMs more difficult to manage. For example:

- irregular periods
- breastfeeding
- after childbirth (and not breastfeeding)
- after stopping hormonal methods of contraception
- approaching menopause

How do I learn about FABM?

Those interested in developing a detailed understanding in the use of this method and requiring individual support are encouraged to contact local FABM educators.

Further information and local contacts can be found at:
www.acnfp.com.au.

What is Lactational Amenorrhoea Method (LAM)?

LAM is the use of breastfeeding as a contraceptive method by women who fulfil the following criteria:

- fully breastfeeding and not feeding the baby with any food or milk supplements
- less than 6 months since giving birth
- menstrual periods have not returned since the birth

How does LAM work?

Breastfeeding has an effect on the production of hormones that reduces the probability of ovulation (egg release) occurring, therefore reducing the chance of a pregnancy.

How effective is LAM?

If all three criteria (see above) are met this method is 98% effective.

What are the advantages of LAM as a method of contraception?

- no financial outlay
- it will not interfere with the establishment of breastfeeding
- delays introduction of alternative methods
- there are health benefits for both the woman and child from breastfeeding

What are the disadvantages of LAM as a method of contraception?

- it requires an ongoing commitment to breastfeeding
- the contraceptive effect is limited beyond 6 months after birth, therefore women should be aware of alternatives

Where can I get more information about LAM?

Natural methods of birth control information is available from True clinics as well as gynaecologists and some general practitioners.

Contact a True clinic or your general practitioner (GP) for more information or advice.

To make an appointment at a True clinic, visit www.true.org.au

What is withdrawal?

Withdrawal is a method of contraception where the man takes his penis out (withdraws) from the woman's vagina before he ejaculates (comes). It is also known as coitus interruptus.

How effective is withdrawal?

Very little research has been done into the effectiveness of this method. Many people find it difficult to use withdrawal effectively. As sperm can be present in pre-ejaculation fluid there is the risk of pregnancy even if a man withdraws before ejaculation.

Other methods of contraception offer greater effectiveness. However, some couples have used it successfully for many years and find the method acceptable.

What are the advantages of withdrawal as a method of contraception?

It is freely available to anyone who wishes to use the method does not require any medical involvement

What are the disadvantages of withdrawal as a method of contraception?

- the risk of failure may be unacceptable to some couples
- it requires the willingness and skill of the male partner to withdraw before ejaculation

Where can I get more information about withdrawal?

Contact a True clinic or your GP for more information or advice.

**Remember:
Natural methods of birth control do not protect against STIs.**

Use a condom for every sexual encounter.

Disclaimer

True Relationships & Reproductive Health (True) has taken every care to ensure that the information contained in this publication is accurate and up-to-date at the time of being published. As information and knowledge is constantly changing, readers are strongly advised to confirm that the information complies with present research, legislation and policy guidelines. True accepts no responsibility for difficulties that may arise as a result of an individual acting on this information and any recommendations it contains.

Funded with assistance by the Queensland Government