

35-55

Your Body

From the age of 35 onwards a woman's body starts to change. Fertility falls and the menstrual cycle (periods) can change. Periods can become heavier, more irregular or stop, sometimes for weeks or months.

EVEN IF YOUR PERIODS STOP OR BECOME IRREGULAR YOU CAN STILL GET PREGNANT

Although it's harder to get pregnant as you get older, pregnancy is still possible at any time until the menopause. Most doctors don't consider that a woman has reached the menopause until she has not had a period for a year (or two years if her periods stop before she is 50)

DID YOU KNOW?

Fertility falls significantly in your late thirties, but 90% of women over 40 who have regular cycles still ovulate.

The perimenopause is the time before the menopause when your body starts to change. It usually starts in your forties and lasts up to six years, or more.

DID YOU KNOW?

90% of women have 4-8 years of menstrual cycle changes before their periods stop completely.

THIS LEAFLET WILL HELP YOU TO THINK ABOUT WHICH METHOD OF CONTRACEPTION IS RIGHT FOR YOU – LOOK AT THE TABLE INSIDE FOR MORE INFORMATION ON CHOOSING A METHOD OF CONTRACEPTION

35-55

Your Life

Crisis and unplanned pregnancies don't just happen to young people. Women in their 30s and 40s have unprotected sex – often because they know it's harder to get pregnant as you get older.

IF YOU DON'T WANT TO GET PREGNANT YOU NEED TO USE CONTRACEPTION EVERY TIME YOU HAVE SEX – WHATEVER YOUR AGE

There are lots of contraceptive choices available, and what suited you in the past may no longer be best for you. Your choice will depend on if you want to have (more) children, your health, your personal preference and whether you need protection from sexually transmitted illnesses (STIs).

It is always your choice to say 'no' to sex. Just because you have been sexually active in the past doesn't mean you have to have sex with a new partner.

DID YOU KNOW?

You need to use contraception until 1 year after your periods have stopped completely (the menopause), or 2 years if the menopause happens before you are 50.

FOR MORE INFORMATION ON THE BEST CONTRACEPTION CHOICE FOR YOU TALK TO YOUR GP – GPs ARE SPECIALLY TRAINED TO HELP YOU MAKE THE RIGHT CHOICE. IF THEY CAN'T PROVIDE THE METHOD YOU WANT THEY WILL REFER YOU TO SOMEONE WHO CAN.

WHERE TO FIND OUT MORE

IF YOU WANT TO DISCUSS YOUR CONTRACEPTIVE NEEDS OR GET CONTRACEPTIVE SERVICES

• Your local GP

• Dublin Well Woman Centres

www.wellwomancentre.ie

67 Pembroke Road, Ballsbridge, D4.

01 660 9860 / 668 1108.

35 Lower Liffey Street, D1 (at the Ha'Penny Bridge).

01 872 8051 / 872 8095.

Northside Shopping Centre, Coolock, D5.

01 848 4511.

• Independent Family Planning Centres

Cork 021 427 7906

Galway 091 562 992

Limerick 061 312 026

Newcastle West 069 629 33

Tralee 066 7125322

• The Irish Family Planning Association

www.ifpa.ie

5/7 Cathal Brugha Street, D1. 01 872 7088 / 874 2110

Level 3, The Square, Tallaght, D24. 01 459 7685/6

IF YOUR METHOD OF CONTRACEPTION FAILS

• Your local GP

• Dublin Well Woman Centres (see above)

• The IFPA (see above).

Both the IFPA and Dublin Well Woman offer Emergency Contraception clinics during the week and on Saturdays and Sundays.

IF YOU HAVE AN UNPLANNED PREGNANCY

Positive Options is a directory of agencies skilled in the area of crisis pregnancy.

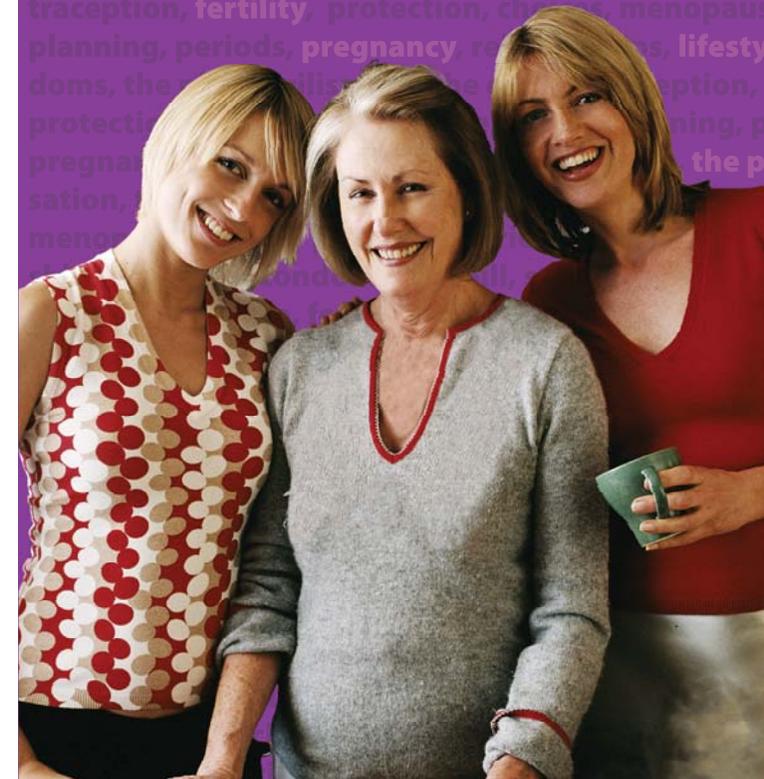
For details visit www.positiveoptions.ie or

Freetext LIST to 50444

crisispregnancyagency 

CONTRACEPTION

35-55



Contraception, fertility and sexual health information for women aged 35 to 55

35-55 CONTRACEPTIVE CHOICES

THINK ABOUT

YOUR LIFE

The best method of contraception for you will change as your life changes.

Are you in a monogamous relationship, single, or 'back on the scene' after the end of a relationship?

Are you trying to become pregnant, breastfeeding, having a break between children, or is your family complete?

Do you ever have unprotected / unplanned sex? Do you have sex regularly? Can you remember to take a pill every day / carry condoms at all times or do you need a longer-lasting method? Do you need protection from Sexually Transmitted Infections (STIs)?

Remember - only condoms offer protection from most STIs

YOUR HEALTH

Do you have symptoms such as irregular / heavy periods or vaginal dryness? Some contraceptive methods can help these symptoms, others may make them more severe.

Do you have any health issues such as being overweight, smoking, having high blood pressure / diabetes that may make some methods unsuitable? Are you taking hormone replacement therapy (HRT)?

Oestrogen-based contraceptives can relieve hot flushes, vaginal dryness and irregular periods; progestogen-based methods can help reduce heavy periods.

If your method of contraception fails - or if you have unprotected sex - emergency contraception (EC, or the 'morning-after pill') will usually stop you from getting pregnant. EC can be taken up to 72 hours after unprotected sex, but the sooner it's taken the more effective it is. Ask your GP or well-woman/family planning clinic doctor for advice.

CHOICES	HOW OFTEN?	FAMILY PLANNING	YOUR HEALTH	IS IT FOR YOU?
 MALE AND FEMALE CONDOMS Barrier methods that can help prevent pregnancy and STIs, including HIV	Every time you have sex	No effect on fertility	No side-effects (unless allergic to latex in the male condom) > Spermicides / lubrication will increase effectiveness and help if vaginal dryness is a problem	Good for single people, or people who don't know if their partner is free from STIs > Putting the male condom on interrupts sex; female condom can be put in any time before sex > No prescription required > Can be used with hormonal contraceptives for added protection > Female condom may slip during sex
 COMBINED ORAL CONTRACEPTION PILL Tablet contains two female hormones oestrogen and progestogen	Take a pill every day three weeks per month	Fertility quickly returns when pill is stopped	Not suitable for heavy smokers, smokers over 35, women who are breastfeeding or those who have medical conditions, such as high blood pressure	Useful for women who can reliably take pills on a daily basis > Does not interrupt sex > Vomiting, diarrhoea, antibiotics and some other prescribed drugs can interfere with its effectiveness
 THE PATCH A patch (similar to a small bandage), which contains the female hormones oestrogen and progestogen	Each patch is worn for seven days, for three consecutive weeks, followed by a patch-free week	Fertility quickly returns when the patch is removed	Health comments are the same as for the combined oral contraception pill	Useful for women who forget to take their pill daily > Does not interrupt sex > May be seen on the skin
 VAGINAL RING The ring contains the female hormones oestrogen and progestogen	Flexible ring inserted by the woman into her vagina for three weeks of every month	Fertility quickly returns when ring is removed	Health comments are the same as for the combined oral contraception pill	Useful for women who forget to take their pill daily > Does not interrupt sex
 INTRAUTERINE SYSTEM (IUS) A small plastic device, which releases the hormone progestogen, is put into the womb	Lasts approximately five years	Fertility returns when the IUS is removed	Reduces or stops heavy bleeding for most women > May cause irregular bleeding > May increase severity of STIs	It is effective immediately > Very reliable long-term, reversible method > Insertion and removal must be done by a trained doctor - no anaesthetic is required
 INTRAUTERINE CONTRACEPTIVE DEVICE (IUCD) - 'THE COIL' A small plastic and copper device is put into the womb to stop the normal actions of the egg and the sperm	Lasts 5-10 years > If inserted after the age of 40 may stay in until the menopause	Fertility returns when the IUCD is removed	May cause heavy or irregular bleeding > May increase severity of STIs > Risk of pelvic infection increased if there is more than one sexual partner	It is effective immediately > Very reliable long-term, reversible method > Insertion and removal must be done by a trained doctor - no anaesthetic is required
 PROGESTOGEN ONLY PILLS (Mini Pill) Tablet containing only the female hormone progestogen	Take a pill every day	Fertility quickly returns when pill is stopped	May cause irregular bleeding	Can be used by women who cannot take oestrogen in the combined oral contraception pill, such as women over 35 who smoke or breastfeeding mothers > Must be taken at the same time every day > Additional contraception may be required if pills are taken late > Vomiting, diarrhoea, and certain medication can interfere with its effectiveness > Does not interrupt sex
 IMPLANT Rod containing the female hormone progestogen, which is placed just under the skin on the inside of your upper arm	Rod inserted approximately every three years by a specially trained doctor	Fertility quickly returns when the rod is removed	May reduce painful periods and heavy bleeding > May cause irregular bleeding or stop bleeding altogether > May cause acne or weight gain	Can be used by women who cannot take oestrogen in the combined oral contraception pill, such as women over 35 who smoke > Useful for women who forget to take their pill daily > Does not interrupt sex
 INJECTABLE CONTRACEPTIVE An injection containing the female hormone progestogen	An injection is given approximately every 12 weeks	Can take 1-2 years for fertility to return to normal	May cause irregular bleeding, although bleeding stops completely after 1 year for 50% of users > Cannot be immediately reversed in the event of side effects > May increase bone density loss > May protect against cancer of the womb > Side-effects include weight gain, headaches and depression	Can be used by women who cannot take oestrogen in the combined oral contraception pill, such as women over 35 who smoke or breastfeeding mothers > Injection does not interrupt sex > Must be given by a health care professional
 DIAPHRAGMS / CAPS A flexible rubber or silicone device, used with spermicide, that the woman fits inside her vagina	Every time you have sex > Must stay in place for at least six hours after sex but not more than 30 hours > Fittings should be checked by a doctor every year	No effect on fertility	Few side-effects as no hormones are needed > Urinary tract infections (cystitis) can be a problem for some users > May protect against cancer of the cervix	An initial consultation with the doctor is needed to select the correct size and type > Insertion takes practice > Can be put in any time before sex (if more than three hours before extra spermicide may be needed) > It can be re-used
 NATURAL METHODS Involves recording the fertile and infertile times of your cycle to plan when to avoid sex or take extra measures to avoid pregnancy	Record body temperature, changes in cervical mucus and other signs of ovulation. every day	No effect on fertility > Knowing cycle can be helpful when trying for a baby	No side-effects as no hormones or devices are needed	Requires keeping a daily record > Needs the cooperation of both partners > Some methods require a few days' abstinence from intercourse each month > Lack of knowledge and events which disturb the woman's cycle e.g. stress, illness, childbirth may make the method less reliable > Disagreement as to whether natural methods can be safely used during the perimenopause
 FEMALE STERILISATION (TUBAL LIGATION) A surgical procedure that involves cutting or blocking a woman's fallopian tubes	One procedure, usually under general anaesthetic and requiring a short hospital stay	Permanent end to fertility - reversal is difficult and often unsuccessful	No side-effects	Useful for women who have completed their families and who don't need STI protection > It is effective immediately
 MALE STERILISATION (VASECTOMY) A procedure that involves cutting the tubes carrying sperm, so that sperm are not present in the semen that is ejaculated	One procedure, lasting approximately 15-20 minutes > Can be done in a doctor's surgery or clinic	Permanent end to fertility - reversal is difficult and often unsuccessful	The man can have discomfort and swelling for a short time after the procedure	It is effective after a few months > Useful for men who have completed their families and who don't need STI protection > Available free to medical-card holders in some areas