

FAMILY PLANNING METHODS

Happy Family



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FAMILY

It refers two or more individuals who depend on one other for emotional, physical, and financial support.

Family Planning

Family planning to regulate the number and spacing of children in a family through the practice of contraception or other methods of birth control.

FAMILY PLANNING METHODS

- **DEFINITION :-** 'A way of thinking and living that is adopted voluntarily upon the basis of knowledge, attitudes and responsible decisions by Individuals and couples, in order to promote the health and welfare of the family group and thus contribute effectively to the social development of a country.'

Comparing Effectiveness

More effective

Less than 1 pregnancy per 100 women in one year



Implants



IUD



Female Sterilization



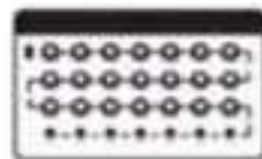
Vasectomy



Injectables



LAM



Pills



Male or Female Condoms



Diaphragm



Fertility Awareness Methods

Less effective

About 30 pregnancies per 100 women in one year



Withdrawal



Spermicides

PURPOSES

- Raising a child requires significant amounts of resources: time, social , financial and environmental. Planning can help assure that resources are available.
- To improve the health of the mother and child.
- Helping to prevent HIV/AIDS.

CRITERIA FOR IDEAL CONTRACEPTIVE

- It should be safe for use means free from any kind of side effects.
- It should be reliable.
- It should be easy to administer and convenient.
- It should be cost effective.
- It should be culturally feasible and acceptable.

METHODS OF CONTRACEPTION

1. Spacing methods:

i. Natural methods

ii. Barrier methods:-

a) Physical barrier methods

b) Chemical barrier methods

c) Intra- uterine devices

d) Hormonal methods

e) Post conceptional methods

2. Terminal methods:-

A) Vasectomy

B) Tubectomy

1. Spacing Methods

- Help in prevention of pregnancy as long as they are used.
- These methods can help in timing and spacing of pregnancies, preventing unwanted children. These methods are temporary methods.

i. Natural Methods

- Natural methods do not involve the use of any of the man made devices.
- These methods are useful for timing and spacing of pregnancies.

Coitus Interruptus / Withdrawal Method

- In this method the penis is withdrawn from the vagina before ejaculation. In this way semen is prevented from entering the uterine cavity and pregnancy does not take place. Since the penis is withdrawn and ejaculation takes place outside the vagina, this method is called coitus interruptus or withdrawal methods.

MERITS :-

- Involves no cost
- It does not require any other device.
- With self control and discipline it can be fairly effective.

DEMERITS:-

- Require a great deal of self control.
- Thus failure rate is very high.
- Slightest delay in withdrawal can lead to pregnancy.

Safe period

Based upon the process of ovulation and menstrual cycle which helps in determination of the safe period when coitus can be done and unsafe period when coitus can be avoided to prevent pregnancy.

MERITS :-

- Does not require any man made device.

DEMERITS:-


- Require self control by the partners during the highly unsafe period.
- Not suitable for the women who does not have regular periods.
- Failure rate is high.
- Require great deal of will power and motivation

Safe Times Using the Calendar Method

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Safe Day [1	Safe Day 2	Safe Day 3	Safe Day 4 <i>Start of Period</i>	Safe Day 5	Safe Day 6	Safe Day 7
Safe Day 8	Safe Day 9	Safe Day 10]	11	12	13	14
15	16	17	18	19	20	21
22	Safe Day [23	Safe Day 24	Safe Day 25	Safe Day 26	Safe Day 27	Safe Day 28
Safe Day 29	Safe Day 30	Safe Day 1	Safe Day 2 <i>Start of Period</i>	Safe Day 3	Safe Day 4	Safe Day 5

Start of Period: 

Safe Days: []

Unsafe Days: 

Abstinence

This involves complete avoidance of sexual cohabit.

ii. Barrier Methods

Barrier methods are those methods which prevent meeting of sperms with the ovum. There are many major types of barrier methods.

a. Physical Barrier Methods

1) Nirodh (condom) :- it is a thin rubber sheath which is use by men. It is rolled over the erect penis before having sex. This rubber sheath prevents the entry of semen into the vagina. The condom must be held carefully when taking out the penis from the vagina to prevent spilling of semen into the vagina. It is available free of cost from urban or rural family welfare centers.

TYES :- 1) dry nirodh 2) deluxe nirodh 3) super deluxe nirodh



MERITS:-

- ✓ It is most simple and effective methods
- ✓ Easy to use
- ✓ Disposable
- ✓ No medical supervision is required
- ✓ Protects from sexually transmitted disease

DEMRRITS :-

- ✓ If not used correctly it may slip or get tear of and the semen gets spilled into vagina.
- ✓ In some rare cases the person may have allergic to rubber.
- ✓ Some people may not enjoy sex because of interference with the sensation.

2.) Diaphragm

- The diaphragm is used by women in her vagina to form a barrier in front of the cervix. The diaphragm is dome shaped and is like a shallow cap.
- It is made of soft synthetic rubber or plastic with a stiff but flexible rim around the edge. It is also known as DUTCH CAP.
- Diaphragm is available in different ranging from 5-10cm.
- It is held in position partly because of the tension created by the spring and partly because of the muscle tone of vagina. It is very important to observe the vaginal muscle tone otherwise the diaphragm may not remain in position.



MERITS:-

- ✓ A diaphragm along with spermicidal is very effective.
- ✓ Failure rate is low.
- ✓ There is no risk or any kind of contraindication.

DEMERITS:-

- ✓ It requires the assistance of doctor and any other health personnel.
- ✓ It requires privacy and time to place it in the vagina.
- ✓ It requires periodical check up
- ✓ It requires facilities for its proper care and storage.

3. Vaginal Sponge

- It is small polyurethane foam sponge, diffused with spermicide. The sponge is shaped in a way that it can be fitted on to the cervix and has a loop on its outer surface which can be used to pull out the sponge after use.
- Should be inserted before the coitus.
- Provides protection for 24 hours.
- It should remain in place for at least 6 hours after coitus.
- Sperms are trapped in the sponge and are destroyed.
- It is better than not to use any method.



b.) Chemical Barrier Methods

- These method usually kills the sperms and this way chemical contraceptives help in preventing the pregnancy. The chemical contraceptives which are in use are:-
 - ✓ FORM OF TABLETS AROSOLS
 - ✓ CREAM JELLY
 - ✓ SUPPOSITORIES

MERITS:-

- They are easy to administer
- Available free in health centers
- Not very expensive

DEMERITS:-

- Must be inserted deep down and in all such points where sperms are likely to reach.
- Must be applied each time before sex.
- May cause irritation and burning.

c) Intra Uterine Devices

These are the devices which are placed in the uterine cavity. Earlier these devices were made up of silk worm gut, silk and gold. Three different types of IUD'S generations are:

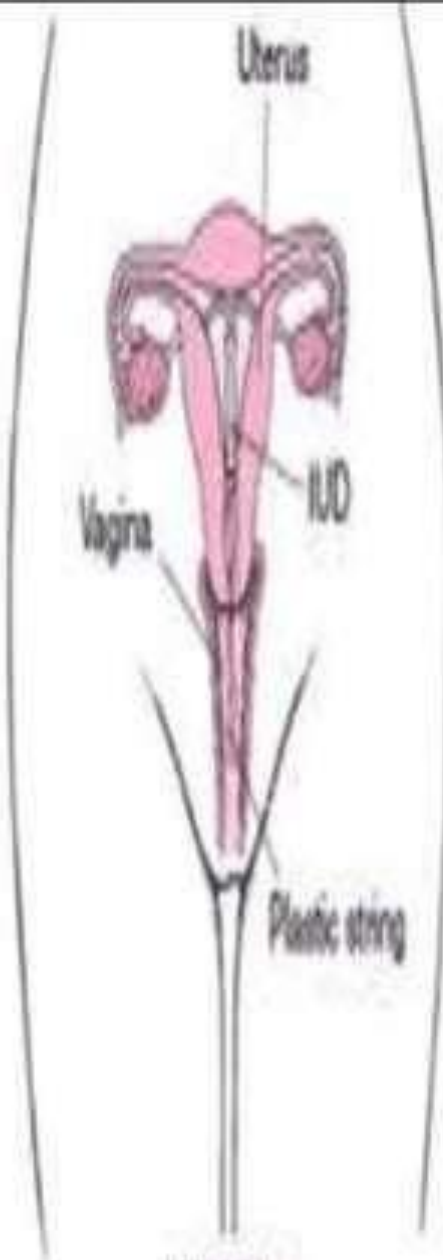
- First Generation IUD'S
- Second Generation IUD'S
- Third Generation IUD'S



Progestin-Releasing IUD



Copper-Releasing IUD



IUD in Place



First Generation IUD'S

- ✓ These devices were made of polyethylene and are non-medicated. These are available in different sizes and shapes such as coils, spirals, loops. The lippes loop is the most popular and commonly used devices.
- ✓ It is made of **polyethylene** and contains **barium sulphate** which makes it possible to be located when required by x-ray. The loop is double 'S' shaped and has an attached made of **Fine Nylon Threads**.

Second Generation IUD'S

These are also made of polyethylene but copper is added into these. The copper enhances the contraceptive effect. Variety of copper devices are :-

- ✓ Copper-7 and copper t-200
- ✓ Variants of T devices: TCU: 220C and TCU: 380A
- ✓ Multi load devices: ML-CU: 250, ML:375
- ✓ Nova T : TCU- 380
- All cu devices are more effective and less chances of side effects I.e. pain and bleeding.

Third Generation IUD'S

- These contains hormones which is released slowly in the uterus. The hormone affects the lining of the uterus and cervical mucus. It may affects the sperm.

There are two types of hormone IUD'S:-

1. Progestaserl
2. Levonogestrel device

MERITS:

- Can be used for longer period
- Can be easily removed when couple wants to have child
- Do not interfere with coitus
- Inexpensive
- Very effective and failure rate is less
- Do not require hospitalization

DEMERITS

- Bleeding, pain, perforation of uterus, expulsion.

1. Oral Pills

There are variety of oral contraceptive pills.

i. Combined pills:- The pills is composed of two :-

➤ Hormones i.e. synthetic oestrogen and progesteogen in very small doses.

➤ Its action is to inhibit ovulation of ovum by blocking the secretion of gonadotropin from pituitary gland.

progestogen also thickens the mucosa of the cervix which prevents the entry of sperm into the genital canal. There are two types of pills available with the name of MALA-D , MALA-N.

MALA -D: D-Norgestrol – 1.0mg
Ethinyl estradiol – 0.03mg

MALA-N: Norethisterion – 0.50mg
Ethinyl Estadiol- 0.04mg

MERITS:-

- It is 100% effective if taken regularly.
- Easy to use and does not interfere with coitus.
- Reduce the risk of anemia because menstrual bleeding is less.
- Reduce the risk of pelvic inflammatory disease, cyst and uterine cancer.



DEMERITS:-

- Failure rate increase if take irregularly.
- Minor side effects like dizziness, nausea, vomiting, headache, weight gain etc.
- Increases the risk of heart problems if women is already at risk.
- May increases the risk of gall bladder disease and cervical cancer.

ii. **PROGESTRON ONLY PILL:-** The pill also known as mini pill. It contain only progestogen and it thickens the cervical mucus cavity.

mini pills are taken throughout the menstrual cycle and these are not used widely because of its high failure rate.

iii. **Once –A MONTH PILL:-** it is modified combined pill. It contains long acting oestrogen and short acting progestogen. These pills are not in use because experimental results revealed high pregnancy rate and irregularity in the menstrual cycle.

2. Depot Formulations

These are long acting hormonal contraceptive contains only synthetic progestogen. These are available in three forms:

1. Injectable
2. Subdermal implants
3. Vaginal ring

1. Injectable Contraceptives

- it is again of two :-
 - a. Progestagen Only Injectable:- There are two preparations which are available:
 - I. DMPA (Depot medroxy progesterone acetate)
 - II. NET-EN (Norethisterone anante)

Both of these contain synthetic progestogen.
Progestogen prevents ovulation.



MERITS:-

It is easy to administer, highly effective and irreversible, do not interfere with lactation and does not cause any effect on infant.

CONTRAINDICATION :- Abnormal uterine bleeding any malignancy of the genital tract, suspected malignant growth and cancer breast.

Combined Injectable Contraceptives:-

- These contains progestogen and oestrogen contraceptive action is similar to that of progestogen only injectable.
- The injection is given once in a month three days early or three days late.
- It is contraindicated in pregnancy, women, having any other problem like diabetes with complications, vascular disorder, suspected malignancy.

2. Subdermal Implants

- There are two varieties. The earlier one is known as Norplant and latest one is Norplant R-2
- The Norplant has six small silicon rubber tubes. each of these tubes contains 30mg of progestogen .
- The norplant-R-2 has two small rods.
- Both of these devices are placed under the skin of the arm. The tubes or the rods allow steady diffusion of steroids into the blood stream for a period of five years to give effective contraceptive effects.

3. Vaginal Rings

This method is not much in use. It consists of a ring which contains a small amount of progestogen. The ring is fitted into the vagina for three weeks of the menstruation cycle, after which it is removed for a week and then re-worn after the menstruation cycle. The steroid is directly absorbed by the mucus lining of the vagina.



e.) Post Conceptional Methods

These are the methods which are used after the missed period and pregnancy may or may not have occurred. This method is used in regulating and inducing the menstruation and terminating the pregnancy or aborting the fetus. These methods are:-

Menstrual Regulation

- it is done within 14 days of missed period when pregnancy is doubted but it is not confirmed. In this the uterine contents are evacuated. The procedure is very safe. There is no legal restriction.

COMPLICATION WHICH CAN OCCUR ARE:- local injury, perforation of uterus, infection.

COMPLICATION WHICH MAY OCCUR LATER ARE:- Infertility, menstruation disorders, ectopic pregnancy, .

Menstrual induction

This is done with in few days of missed period. It is done by application of prostaglandin F₂ under sedation. This induces continuous contraction of uterus lasting for 7 min. it is followed by cyclic contraction which continues for next 3-4 hours. This initiates bleeding which lasts for a week or so.

Abortion

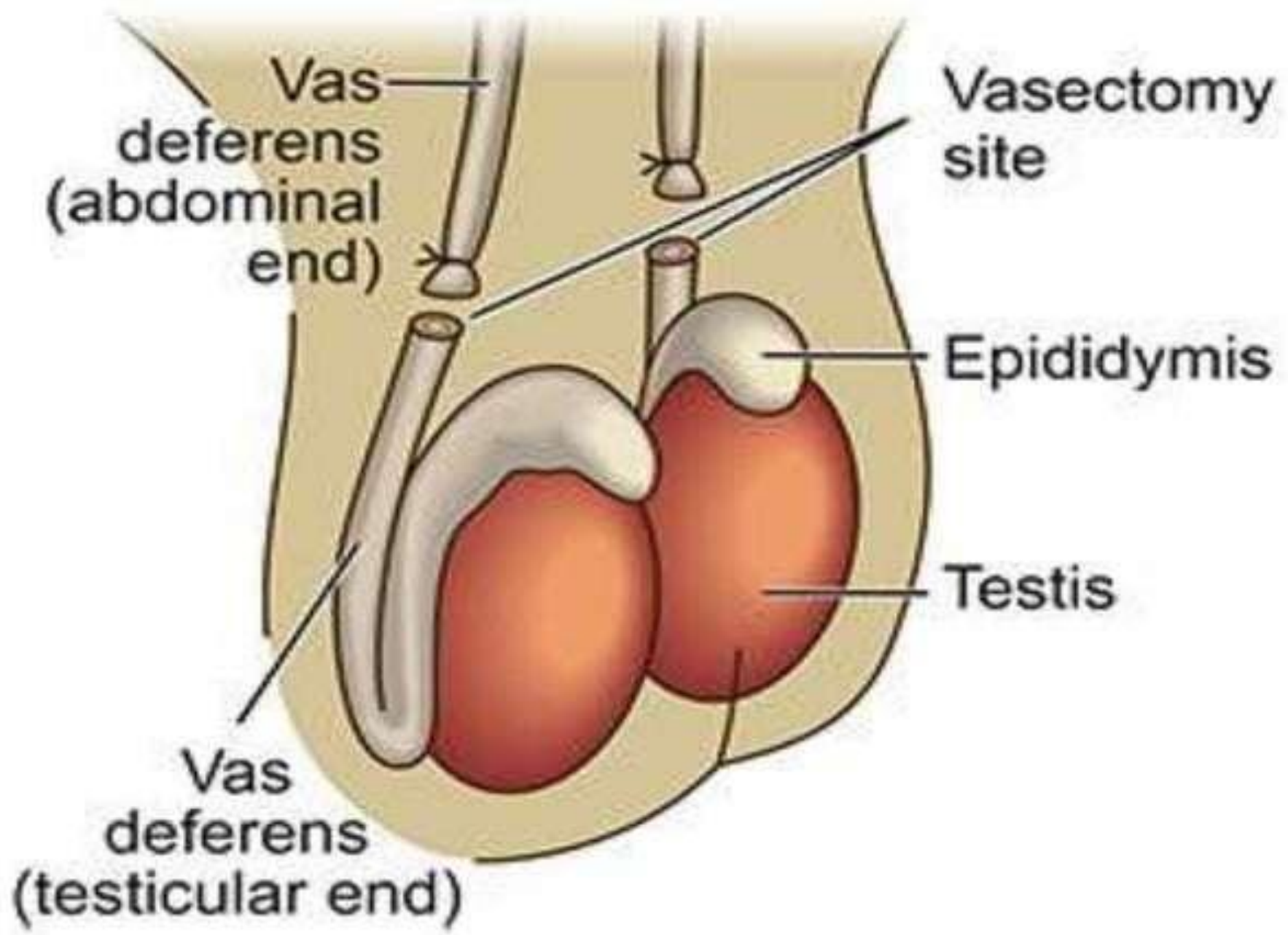
- Abortion refers to the termination of pregnancy before the fetus become viable i.e. before it is able to live outside the womb. This period is fixed at 28 weeks when the fetus weights 1000 grms, abortion are either spontaneous or induced.

2. TERMINATION METHODS

Sterilization is only method which gives permanent protection from conception from conception. Either husband and wife can under go sterilization by a simple surgical operation i.e. vasectomy or tubectomy.

I. VASECTOMY

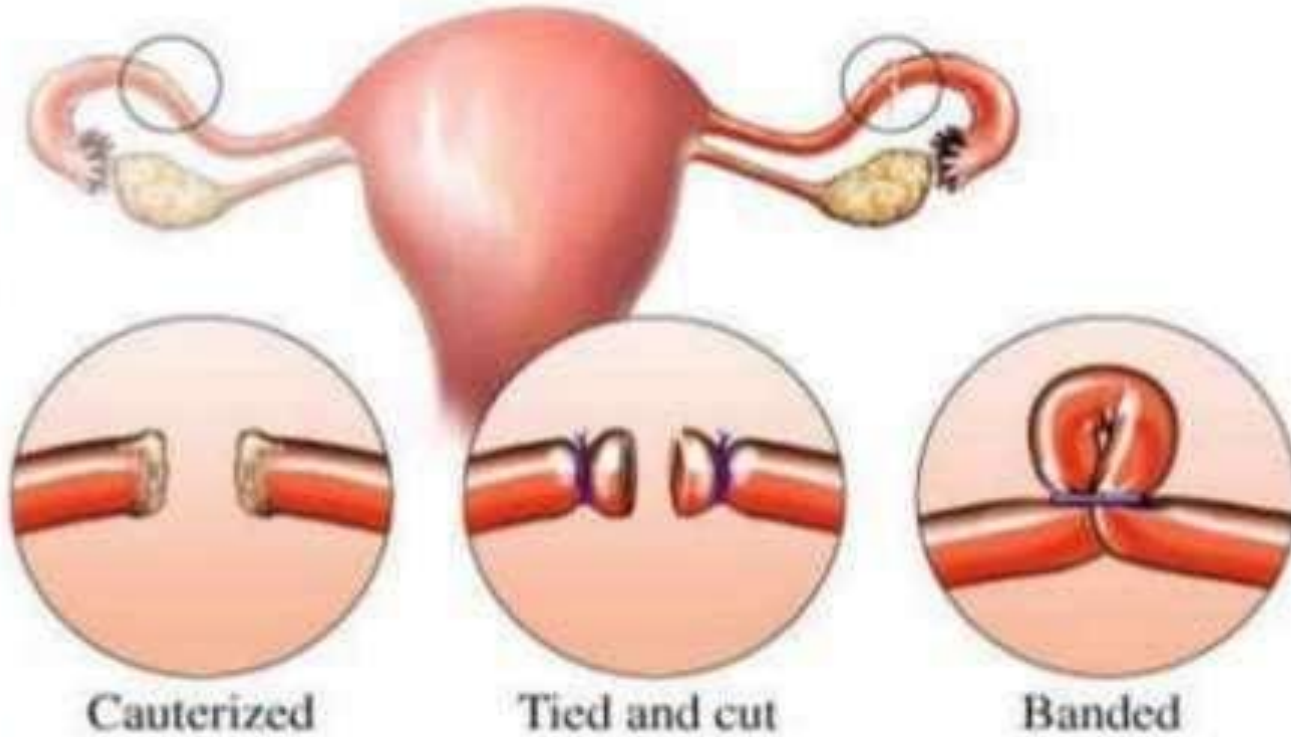
- Vasectomy is sterilization of male. It is very simple and minor operation which takes hardly 15-20 min.
- The operation involves a small cut on both sides of scrotum then a small portion of vasdeferens (about 1cm) on either side of the scrotum is cut and ligated, folded back and sutured. The operation is done not affect the sexual characteristics and sex life in any form. The sperms are produces but not ejaculated along with semen.



II. TUBECTOMY

- It is sterilization of female. This is done by resecting a small part of fallopian tubes and ligate the sected ends. The closing of tubes can also be done by using other methods like closing the tubes the tubes with bands clips and electrocautery.
- The operation can be done through abdominal or vaginal approach. The most common abdominal procedure are laproscopy and minilaprotomy.
- The tubectomy can be done after delivery, between delivery and after abortion.

SELECTION OF CASES AND ANAESTHESIA IN TUBECTOMY



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Thank you!