



Sex og samfunn

CONTRACEPTION GUIDE



CONTRACEPTION GUIDE

INTRODUCTION

Since there are many varieties of contraceptives, we have created this brochure to give you an overview, to make it easier for you to make your own informed choice about what contraception is best for you. It helps if you know more about what the different types contain, how effective and expensive they are, and how long they last, before you make your choice.

It is important to remember that only condoms protect against sexually transmitted infections. Even if you use another method of contraception, we recommend that you use a condom as well if you have sex with a new partner. You can order condoms for free from www.gratiskondomer.no.

Find out more about contraception on our website www.sexogsamfunn.no. You can also contact us on the website via our live chat.

All the information in this brochure has been quality-controlled by Sex og samfunn and University of Oslo employees.

Oslo, May 2023

TYPES OF CONTRACEPTIVES

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HORMONAL CONTRACEPTION WITH BOTH OESTROGEN AND PROGESERONE

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DIFFERENT TYPES OF CONTRACEPTIVES

There are benefits and disadvantages to all contraceptives. The advantage of hormonal contraceptives, of any kind, is that they often reduce bleeding and pain during menstruation. An important difference between the methods is how long must be taken for.

NON-HORMONAL CONTRACEPTIVES

Non-hormonal contraception does not affect ovulation, so it does not alter your regular menstrual cycle.

The advantage is that you do not need to think about the side effects of taking hormones. In addition, condoms protect you against sexually transmitted infections. The downside is that you cannot control your menstruation, and the copper IUD can give you heavier bleeding and worse menstrual cramps than before.

HORMONAL CONTRACEPTION WITH PROGESTERONE ONLY

These contraceptives contain hormones similar to the ovarian hormone progesterone. Progesterone makes it harder for sperm cells to enter the uterus and often prevents ovulation.

Your ovulation cycle will quickly return once you stop taking the contraceptive. The only exception is contraceptive injections: with them, it often takes a long time before your ovulation returns to normal.

Contraceptives that only contain progesterone do not increase the risk of blood clots or cardiovascular disease, so most people who are advised not to take oestrogen can use contraceptives that only contain progesterone.

Some people stop bleeding, and this is nothing to be worried about. Your bleeding may become irregular, and you cannot decide when your period comes.

HORMONAL CONTRACEPTION WITH BOTH OESTROGEN AND PROGESTERONE (COMBINED HORMONAL CONTRACEPTIVES)

These contraceptives are called combined oral contraceptive pills because they contain a combination of hormones similar to the ovarian hormones oestrogen and progesterone. They protect against pregnancy by preventing ovulation and making it harder for sperm to enter the uterus. The effect is temporary. Your ovulation cycle will quickly return once you stop taking these contraceptives.

Combined hormonal contraceptives often give you good control of your bleedings, meaning you can decide when you want to “menstruate”. If you follow the instructions by taking a break from the birth control pills each month, you will get a bleeding similar to your menstruation every month. You can also “skip” this bleeding by not taking a break. Contraceptives containing oestrogen carry a slightly higher risk of harmful side-effects, such as blood clots and cardiovascular disease. You will therefore be asked about your and your family’s health (see page 27) and your blood pressure will be taken.

Side effects of hormonal contraceptives

Using hormonal contraceptives may cause side effects in some cases, but this does not mean that the hormones are harmful.

The most common side effects of hormonal contraception are headaches, sore breasts, vaginal dryness, mood changes, pimples (acne), oily skin, oily hair, and decreased sex drive.

The side effects often go away within the first 3-6 months, so please try to bear with them when you start taking a new contraceptive. If the side effects do not go away, you can switch to another type of contraceptive. You are the only person who can decide if the side effects are bad enough to stop taking, or to switch, contraceptives.

CORRECT USE IS MOST EFFECTIVE!

Most contraceptives are very safe, but for them to work properly, you must be careful to use them exactly the right way. The risk of unplanned pregnancy is largely related to how good you are at remembering your contraception, whether that be taking a pill daily, using a condom, or changing to a new patch or vaginal ring at the right time.

Taking other medicines, such as anti-epileptic medication, may reduce the effectiveness of your contraception. For those taking the pill, other conditions such as vomiting and diarrhoea can also affect the effectiveness of the pills.

The safest contraceptives are the ones that make it impossible to forget anything or do anything wrong. The lowest likelihood of an unplanned pregnancy is with long-acting contraceptives such as implants and IUSs

Some contraceptives require you to remember more than others. The less you have to remember, the less you can do wrong!



Sex og samfunn patient, aged 17

Not very safe

Safe

13 or more out of 100
get pregnant per year

Condoms



4-7 out of 100 get
pregnant per year

Birth control shot



Less than 1 out of 100
get pregnant per year

Contraceptive
implants



Birth
control
pill



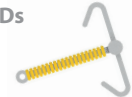
Hormonal IUDs



Mini pill



Copper IUDs



Contraceptive
patches



Vaginal ring



***We recommend using hormonal contraception
for protection against pregnancy.***



*If you have sex with a new partner, we recommend
using a condom as well.*

COPPER IUDs

Non-hormonal contraceptives

Copper IUDs are made of plastic, with a thin layer of copper around the plastic. They are approximately 3 cm long and sit inside the uterus, so you do not notice the actual IUD at all. The two strings of the IUD hang down through your cervix. They can be felt by inserting a finger into your vagina. The strings are there to ensure that the IUD is in the correct position, and to be able to remove the IUD later on.

The copper IUD works by destroying sperm cells' ability to fertilise an egg. Copper IUD contain no hormones, so you will continue having your own menstrual cycle.

USING A COPPER IUD FOR THE FIRST TIME

You need a prescription from a doctor, public health nurse or midwife to get the IUD from a pharmacy. You can also buy copper IUDs without a prescription at a pharmacist or at the local healthcare centre where your IUD is going to be inserted.

Before insertion, you must be sure that you are not pregnant. You may need to take a pregnancy test and a test for sexually transmitted infections, such as chlamydia. You must not have any vaginal intercourse in the first 7 days after insertion.

USE

Copper IUDs are inserted during a gynaecological check-up by a public health nurse, midwife or doctor. They are effective for 5 years but can be removed earlier if so desired. The actual insertion process can be uncomfortable and painful, but for most people, the discomfort quickly subsides.

STOPPING USING A COPPER IUD

IUD removal is fast and is different from the insertion process. You can insert a new IUD when you remove the old one. Your fertility will not decrease, even if you have been using a copper IUD for a long time.



- Price: about 6-13 kroner per month*
- Inserted by a doctor/midwife/ public health nurse every 5 years

*Price at Sex og samfunn is 399 kroner.

The price at your pharmacist's/doctor's may vary, up to about 800 kroner.
Free for 19-year-olds, and 20-year-olds pay about half price.

HELPFUL HINTS:

- You are advised to take painkillers one hour before insertion (2 Paracetamol 500 mg tablets plus 1 tablet of Ibuprofen 400 mg).
- Some people dread inserting an IUD, and are worried about it hurting. Think of it as an 'investment'. It doesn't take long to insert an IUD, and after that you do not have to think about contraception for the next five years!
- Schedule an appointment with a doctor, midwife or public health nurse 1-2 months after IUD insertion.
- Never use a menstrual cup if you have an IUD, but tampons are fine.
- If you wish to continue with the IUD after 5 years, you can have the old one removed and a new one inserted.



CONDOMS

Non-hormonal contraceptives

Most condoms are made of latex, which is a type of rubber. Condoms come in different sizes, colours and flavours. Most are coated with a lubricant, which can make sex more comfortable. If you are allergic to latex, latex-free condoms are also available. Condoms can reduce sensitivity a little bit, which can help make the intercourse last longer.

Condoms are the only contraceptives that protect both against pregnancy and against sexually transmitted infections, such as chlamydia. Studies have shown that your partner/s will consider you responsible, thoughtful and mature if you suggest using a condom.

USING A CONDOM FOR THE FIRST TIME

You can get free condoms at health centres, from your school public health nurse, or order them free of charge from www.gratiskondomer.no. You can also buy them at stores and pharmacies.

Practice makes perfect, and we recommend that everyone practise on their own. Once you get good at putting condoms on, it hardly takes any time, and you have less risk of the condom breaking.

USE

Condoms are rolled onto an erect (stiff) penis before sex and are kept on until you have finished having sex. Anyone can use a condom. See instructions for use on the next page.

Unfortunately, sometimes a condom can break during sexual intercourse if it is not put on correctly, or it can slide off if you forget to hold the condom when pulling out. It may be a good idea to carry emergency contraception if a condom is the only contraceptive you are using.



- Price: free from www.gratiskondomer.no; otherwise about 60-100 kroner for a pack of 10.
- Needs to be put on before sex.

HELPFUL HINTS:

- Check the date stamp and make sure that the wrapping is intact.
- Open the wrapping carefully so that you do not damage the condom.
- Your penis needs to be stiff when you put the condom on.
- Pull your foreskin back when you put on the condom, unless you are circumcised.
- Squeeze the tip of the condom as air bubbles can cause the condom to break.
- Hold at least one finger width on the tip of the condom while rolling down the rest of the condom, making sure not to damage the condom with your fingernails. Roll it right down to the base of the penis.
- Hold onto the condom at the base of the penis when the penis is pulled out. The condom must be used the entire time you are having sex.
- Condoms must only be used once.
- Throw away condoms in the rubbish bin after use, not in the toilet.
- Make 'dressing' the penis part of the fun!



HORMONAL IUDs

Hormonal contraceptives with progesterone only

Hormonal IUDs are made of soft plastic. They are approximately 3 cm long and sit inside the uterus, so you do not notice the actual IUD at all. The two strings of the IUD hang down through the cervix. They can be felt by inserting a finger into your vagina. The strings are there to ensure that the IUD is in the correct position, and to be able to remove the IUD later. Hormonal IUDs only contain a small amount of hormones and act by preventing sperm cells locally in the uterus so that fertilisation does not take place.

Many people have no or little menstruation with hormonal IUDs, but some may experience regular or irregular bleeding. Although this may seem bothersome, it is harmless.

There are five types of hormonal IUDs: Mirena, effective for up to 8 years; Levosert, effective for up to 6 years; Kyleena, effective for up to 5; Jaydess, effective for up to 3 years.

USING A HORMONAL IUD FOR THE FIRST TIME

You need a prescription from a public health nurse, midwife or doctor to get an IUD from a pharmacy. In some cases, you can buy the IUD at the healthcare centre where your IUD is going to be fitted. The packaging is very large, even though the IUD itself is small.

Before insertion, you must be sure that you are not pregnant. You may need to take a pregnancy test and a test for sexually transmitted infections, such as chlamydia. You should not have any vaginal intercourse in the first 7 days after insertion.

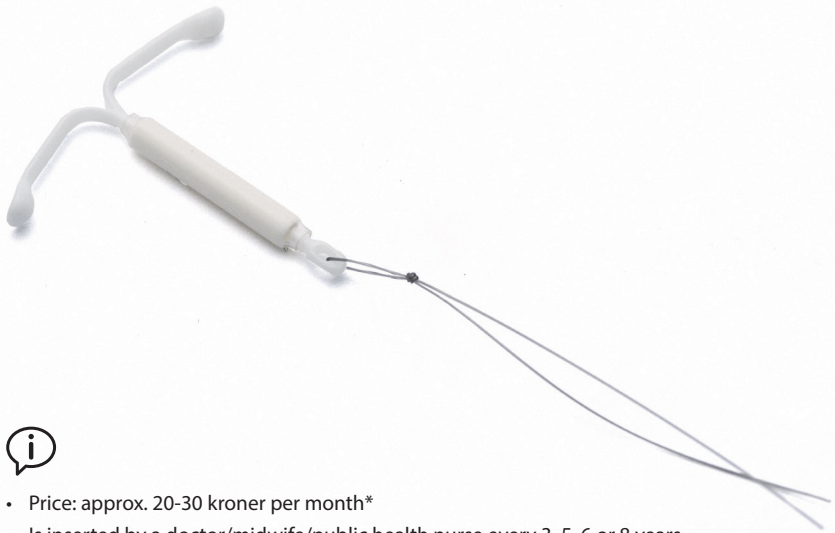
USE

Hormonal IUDs are inserted during a gynaecological check-up by a public health nurse, midwife or doctor. The actual insertion process can be uncomfortable and painful, but for most people, the discomfort quickly subsides.

Hormonal IUDs are effective for 8, 6, 5 or 3 years, but can be removed earlier if so desired. There is a small difference in the quantity of hormones. The greater the quantity of hormones, the safer the IUD and the greater the likelihood of little or no menstruation. All IUD types can be used by persons who have not given birth.

STOPPING USING HORMONAL IUDS

IUD removal is fast and is not like the insertion process, and you can insert a new IUD when you remove the old one. Your fertility will not decrease, even if you have been using a hormonal IUD for a long time.



- Price: approx. 20-30 kroner per month*
- Is inserted by a doctor/midwife/public health nurse every 3, 5, 6 or 8 years

*A hormonal IUD costs about 1300 kroner, and can be used for 3-8 years. Hormonal IUDs are free for those below 18 years. If you are 19 you must pay about one third of the price, and 20-year-olds pay about two-thirds of the price.

HELPFUL HINTS:

- You are advised to take painkillers one hour before insertion (2 Paracetamol 500 mg tablets plus 1 tablet of Ibuprofen 400 mg).
- Some people dread inserting an IUD, and are worried about it hurting. Think of it as an 'investment'. It doesn't take long to insert an IUD, and after that you do not have to think about contraception for the next 3-8 years!
- Schedule an appointment with a doctor, midwife or nurse 1-2 months after IUD insertion.
- Never use a menstrual cup if you are using a hormonal IUD, but tampons are fine.
- If you wish to continue with the IUD after 3-8 years, you can have the old one removed and a new one inserted.



CONTRACEPTIVE IMPLANTS

Hormonal contraceptives with progesterone only

Contraceptive implants are soft plastic rods that are 4 cm long and 2 mm in diameter. Contraceptive implants contain only the hormone progesterone. The implants prevent ovulation and are the safest contraceptive.

When using an implant, your menstruation will change. Some people stop bleeding entirely; some have a regular bleeding cycle, and some have irregular bleeding. Although this may seem bothersome, it is harmless.

USING CONTRACEPTIVE IMPLANTS FOR THE FIRST TIME

You need a prescription from a public health nurse, midwife or doctor to get a contraceptive implant from a pharmacy.

It is important to be sure that you are not pregnant before inserting the implant, and you may need to take a pregnancy test. If you start using the implant by the 5th day of your menstruation cycle, you are protected from the first day on. If not, you need to wait 7 days before you can have sex without a condom.

USE

The contraceptive implant is inserted straight under the skin of your upper arm by a doctor, public health nurse or midwife. You will be given a local anaesthetic so that the implantation is painless. The implant is effective for three years but can be removed earlier if so desired. If you wish to continue with birth control/ contraceptive implants, you can have new one inserted when the old one is removed.

STOPPING USING CONTRACEPTIVE IMPLANTS

When the implant is removed, you will be given a local anaesthetic. Removal is painless and only leaves a small cut. Once the implant is removed, you will soon start ovulating again. Your fertility will not be affected, even if you have been using an implant for a long time.



- Costs about 40 kroner per month*
- Is implanted by your doctor/public health nurse/midwife every 3 years

* A contraceptive implant costs about 1300 kroner, and can stay in for up to 3 years. Contraceptive implants are free for those below 19 years. If you are 19 you will have to pay about one third of the price, and 20-year-olds pay about two-thirds of the price.

HELPFUL HINTS:

- The implantation does not hurt at all – you will be given a local anaesthetic beforehand.
- After implantation, you will have a small scar about 3 millimetres long where the implant was inserted.
- If you wish to continue to have an implant after 3 years, you can have the old one removed and a new one implanted.



CONTRACEPTIVE INJECTIONS

Hormonal contraceptives with progesterone only

Contraception injections contain only the hormone progesterone. A healthcare provider injects the shot in your upper arm or buttock every 12 weeks. It acts by slowly releasing hormones from the muscle into your bloodstream over the course of 12 weeks. This prevents ovulation.

After a while, most people who use birth control shots will stop bleeding, while most people will experience some minor bleeding at the start, especially after the initial injection. Although this may seem bothersome, it is harmless.

USING BIRTH CONTROL SHOTS FOR THE FIRST TIME

You can get a prescription from your public health nurse, midwife or doctor. Contraceptive injections can be bought at pharmacies. You must be sure that you are not pregnant before you are given a contraceptive injection. Contraceptive injections also carry a slightly increased risk of adverse side effects that are not associated with other contraceptive types that only contain progesterone. For that reason, you will be asked about your and your family's health (see page 27) and your blood pressure will be taken. You might also need to take a pregnancy test.

USE

Once you been to the pharmacy to get your contraceptive injections, a public health nurse, midwife or doctor can inject it for you. It is important for you to get a new injection within 12 weeks to be protected against pregnancy.

STOPPING USING THE CONTRACEPTIVE INJECTIONS

Once you stop taking contraceptive injections, it can take a long time before you start ovulating again. you may find that it can take 6-12 months for you to regain your normal menstruation pattern. However, birth control shots do not affect fertility after that point, no matter how long you have been taking them for.



- Costs 30 kroner per month*
- Is injected by your doctor/nurse/midwife every 12 weeks

* One Depo-Provera contraceptive injection costs 100 kroner, and lasts for 12 weeks. If you are aged below 20, contraceptive injections are free.

HELPFUL HINTS:

- If you experience a lot of irregular bleeding or spotting, it can help if you get a new injection after 8 weeks. For most people, the bleeding will stop.



PROGESTERONE-ONLY PILLS

Hormonal contraceptives with progesterone only

Progesterone-only pills (POPs) only contain the hormone progesterone, so they are slightly different from birth control/contraceptive pills. They act by hormones being absorbed through the intestine into the bloodstream, preventing ovulation. Although some people call progesterone-only pills “mini-pills”, only one version of these pills, called Conludag, is an actual mini-pill.

Many people who use progesterone-only pills will completely stop bleeding after a while. Some retain their menstruation pattern, while others may experience irregular bleeding or spotting. Although this may seem bothersome, it is harmless.

USING POPS FOR THE FIRST TIME

You need a prescription from a public health nurse, midwife or doctor. You can buy progesterone-only pills at a pharmacy.

If you start by the 5th day of your menstruation cycle, you are protected from the first pill on. If not, you will need to use a condom for 2 days (7 days if you use Slinda).

USE

For progesterone-only pills to be effective, it is important for you to take them every day, and without any break between one blister card and the next. Slinda should be taken with a 4-day break. It is important to take them at around the same time every day to prevent interim bleeding and to better protect you against pregnancy.

STOPPING USING POPS

Once you stop taking progesterone-only pills, you will soon start ovulating again. Your fertility will not decrease, even if you have been using POPS for a long time.



- Cost between 40-116 kroner per month*
- To be taken daily without a break

*One pack of 3 blister cards (3 months' supply) costs between 90-350 kroner. If you are aged below 22 years, you get a 129 kroner discount every three months, meaning that you get some of the POPs for free.

HELPFUL HINTS:

- Take your pills in the morning – then that gives you a full 12 hours to remember in case you have forgotten a pill (except for Conludag, where you have to remember within 3 hours).
- Keep your pills with your mobile phone, and set an alarm or download an app that gives you a daily reminder to take the pills.



VAGINAL BIRTH CONTROL RINGS

Hormonal contraceptives containing oestrogen and progesterone

Vaginal rings contain two hormones: oestrogen and progesterone. Vaginal rings are a soft rubber ring. You compress them with your hand and insert them into your vagina, a bit like a tampon. If the vaginal ring is inserted correctly, you will not notice it. The hormones are absorbed into the bloodstream through the lining of the vagina, preventing ovulation.

Vaginal rings often give you good control over your bleeding pattern with a bleeding every 4 weeks, somewhat like a period.

USING VAGINAL RINGS FOR THE FIRST TIME

You can get a prescription from your public health nurse, midwife or doctor, then buy a vaginal ring at a pharmacy. Since vaginal rings contain oestrogen, not everybody can use them, as they carry a slightly higher risk of adverse side effects. For that reason, you will be asked about your and your family's health (see page 27) and your blood pressure will be taken.

You are protected against pregnancy if you start within the 5th day of your menstruation cycle. If you start at any other time in your cycle, you should use a condom or refrain from vaginal intercourse for 7 days.

USE

You leave the vaginal ring in your vagina for 3 weeks, then you take it out and go without a ring for 1 week. You will experience bleeding this week but are still protected against pregnancy. You can skip menstrual bleeding by inserting a new ring when you remove the old one. You can even skip several periods. You can also leave your vaginal ring in during intercourse. If you wish to take it out during intercourse, it is important for you to put it back in before 3 hours have passed.

STOPPING USING VAGINAL RINGS

Once you stop using a vaginal ring, you will soon start ovulating again. Vaginal rings do not affect your fertility, no matter how long you have them in for.



- Costs about 120 kroner per month*
- Needs to be changed every 3 weeks

*A pack of three vaginal rings costs about 360 kroner and lasts for 3 months. If you are aged below 22 years, the state will cover 129 kroner.

HELPFUL HINTS:

- You can easily insert and remove the ring yourself by squeezing it to make it smaller and inserting it into or pulling it out of your vagina.
- The ring can stay in the vagina during sex.
- The ring can be taken out for up to three hours a day, then reinserted. You will still be protected against pregnancy.



BIRTH CONTROL PATCHES

Hormonal contraceptives containing oestrogen and progesterone

Birth control patches or contraceptive patches are skin patches 4.5 x 4.5 cm in size containing two hormones: oestrogen and progesterone. They act by hormones being absorbed through the skin into the bloodstream, preventing ovulation. You can put the patches on many parts of your body, but not on your breasts.

Birth control patches often give you good control over your bleeding pattern with a bleeding every 4 weeks, somewhat like a period.

USING BIRTH CONTROL PATCHES FOR THE FIRST TIME

You can get a prescription from your public health nurse, midwife or doctor, then buy a patch at a pharmacy. Since birth control patches contain oestrogen, not everybody can use them, as they carry a slightly higher risk of adverse side effects. For that reason, you will be asked about your and your family's health (see page 27) and your blood pressure will be taken.

You are protected against pregnancy if you start within the 5th day of your menstruation cycle. If you start at any time in your cycle, you should use a condom or refrain from vaginal intercourse for 7 days.

USE

You need to change patches once a week for 3 weeks. After that you have a patch-free week. You will experience bleeding in the week you're not wearing a patch, but you are still protected against pregnancy. You can skip your bleeding by putting on a new patch straight away instead of taking a break

STOPPING USING BIRTH CONTROL PATCHES

Once you stop using birth control patches, you will soon start ovulating again. Birth control patches do not affect your fertility, no matter how long you use them for.



- Costs 105 kroner per month*
- Needs to be changed every week

* One packet of 9 contraceptive patches (3 months' supply) costs 315 kr. If you are aged below 22 years, you get a 129 kroner discount every three months.

HELPFUL HINTS:

- The patches are water-resistant and do not lose effect after swimming, showering or sweating.
- The patches can be put on any area of unbroken, clean and dry skin – except for your breasts, where you must not put them. The most common place to stick the patch on is the upper arm.
- You might like to change area when you put on a new patch, to avoid any skin irritation



BIRTH CONTROL PILLS

Hormonal contraceptives containing oestrogen and progesterone

Birth control pills or contraceptive pills contain two hormones: oestrogen and progesterone. The birth control pill acts by hormones being absorbed through the intestine into the bloodstream, preventing ovulation.

Birth control pills often give you good control over your bleeding pattern with a bleeding every 4 weeks, somewhat like a period.

USING BIRTH CONTROL PILLS FOR THE FIRST TIME

You can get a prescription from your public health nurse, midwife or doctor, then buy the birth control pills at a pharmacy. Since birth control pills contain oestrogen, not everybody can use them, as they carry a slightly higher risk of adverse side effects. For that reason, you will be asked about your and your family's health (see page 27) and your blood pressure will be taken.

You are protected against pregnancy if you start within the 5th day of your menstruation cycle. If you start at any time in your cycle, you should use a condom or refrain from vaginal intercourse for 7 days.

USE

There are many kinds of birth control pills, each containing different levels and types of hormones, so the side effects you may experience vary between the different brands. With some trial and error you should be able to find the brand that suits you the best

The numbers of pills per blister card may vary depending on the brand of pill, so read the instructions for your pills at www.sexogsamfunn.no.

With most brands, you need to take pills for 21 or 24 days and then have a break of 4-7 days without hormones. Some pill blister cards have 4-7 'reminder pills' that do not contain hormones. You will experience bleeding this week but are protected against pregnancy the entire time. You can skip bleedings by starting a new blister card. For more information, see the instructions for your pills on the Sex og samfunn website.

STOPPING USING BIRTH CONTROL PILLS

Once you stop using birth control pills, you will soon start ovulating again. The pill does not affect your fertility, no matter how long you take it for.



- Costs 30-120 kroner per month*
- Must be taken daily, break optional

*Prices vary. The cheapest pill costs about 80 kroner, and the most expensive about 350 kroner, per package. Each package contains 3 blister cards of pills (3 months' supply). If you are aged below 22 years, you get a 129 kroner discount every three months, meaning that you get some pills for free.

HELPFUL HINTS:

- Take your pills in the morning – then that gives you a full 12 hours to remember in case you have forgotten a pill.
- Keep your pills with your mobile phone, and set an alarm or download an app that gives you a daily reminder to take the pills.



EMERGENCY CONTRACEPTION

Emergency contraception can be a good idea if you have had vaginal intercourse without a contraceptive, or if the condom has broken or slid off. It may also be a good idea if you have forgotten your pills, birth control patch or vaginal ring, but in that case, it is important that you check the information about your contraceptive on the Sex og samfunn website before you take any emergency contraception. There are two

HORMONAL EMERGENCY CONTRACEPTION

There are two different types of pills: EllaOne and Norlevo. You can buy both varieties without a prescription at pharmacies and at some stores. They should be taken as soon as possible after unprotected vaginal intercourse to be most effective.

They act by postponing ovulation but have no effect if you have already ovulated before taking the pills. For that reason, you should always take a pregnancy test 3 weeks after taking emergency contraception. Some people experience nausea, abdominal pain and bleeding as side effects.

ELLAONE/FEMKE

May be effective up to 5 days (120 hours) after unprotected sexual intercourse but should be taken as quickly as possible. You must wait 5 days before starting to take any other hormonal contraceptive, as the hormones can ruin the effectiveness of EllaOne/Femke.

See www.sexogsamfunn.no/nodprevensjon for more information on starting to take hormonal contraceptives after EllaOne/Femke. Can be used up to two times per menstruation cycle.

NORLEVO/LEVONORGESTREL NORFRI

May be effective up to 3 days (72 hours) after unprotected sexual intercourse but should be taken as quickly as possible. You may use another hormonal contraceptive even if you have taken Norlevo/Levonorgestrel Norfri. Can be taken several times per menstruation cycle.

COPPER IUD AS EMERGENCY CONTRACEPTION

Copper IUDs are the safest emergency contraceptives. They can be inserted up to 5 days after unprotected intercourse and prevent pregnancy in 99 out of 100 persons.

Copper IUDs do not postpone ovulation but prevent fertilised eggs from implanting themselves in the uterus.

You can find out more about copper IUDs on page 8.

CHECKLIST

To start taking contraception containing oestrogen, or get a birth control shot, the healthcare professional issuing you the prescription needs some information about your and your family's health. Be ready to answer the questions below if you want to start using birth control pills, birth control patches, vaginal rings or contraceptive injections.

	NO	YES	Not sure
I have, or have had, blood clots or a known coagulation disorder	<input type="checkbox"/>	<input type="checkbox"/>	
First degree relatives has had clots before age 45	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
I have had a stroke or heart attack myself	<input type="checkbox"/>	<input type="checkbox"/>	
I have a heart disease	<input type="checkbox"/>	<input type="checkbox"/>	
I have high blood pressure (or am taking blood pressure medication)	<input type="checkbox"/>	<input type="checkbox"/>	
I have a pre-existing liver or bile duct condition	<input type="checkbox"/>	<input type="checkbox"/>	
I have had breast cancer	<input type="checkbox"/>	<input type="checkbox"/>	
I have diabetes	<input type="checkbox"/>	<input type="checkbox"/>	
I suffer from migraines with aura	<input type="checkbox"/>	<input type="checkbox"/>	
I have lupus	<input type="checkbox"/>	<input type="checkbox"/>	
I take medication or herbal remedies*	<input type="checkbox"/>	<input type="checkbox"/>	

If yes, what medication or herbal remedies are you taking?

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