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Sexual Health

Contraceptive Methods Apart From the Pill

Source: *Mind Your Body, The Straits Times*. By: Poon Chian Hui

Great strides have been made in the development of contraceptive methods such as the condom and intra-uterine device. Here is an update on four methods.

1. Condom

This is by far the earliest method of contraception. It is said that the first crude form of a condom came about a few thousand years ago – made from animal tissue like intestines or bladders. It is today among the most popular and cheapest method of birth control and has seen new developments spring up in recent decades.

One that was especially significant was the introduction of polyurethane condoms (above) in 1994 by manufacturer Durex, a departure from the traditional latex condoms. The result is a condom that is thinner and more comfortable for men.

Today's market also continues to see new varieties such as those with silicone lubricants and even flavours to increase pleasure. Such features serve to motivate men to use condoms to guard against unwanted pregnancies and sexually transmitted diseases.

The one-size-fits-all formula has gone, and one can now find condoms of different sizes. Earlier this year, the Swiss government announced that it intends to make smaller condoms designed to fit young boys aged 12 to 14, as teenagers are becoming sexually active at a younger age.



2. Hormonal patch and implant

The contraceptive patch, which emerged at the turn of the century, works like the pill by releasing hormones through the skin to stop ovulation.

Launched in Singapore in 2003, the patch resembles a plaster (above) and is applied to the skin every week for three weeks. It is then stopped for one week to allow menstruation to occur. The earliest implant, Norplant, was marketed in the 1980s.

At first, the implant consisted of six rods containing progesterin levonogestrel. When inserted beneath the skin, it released hormones in small doses to prevent ovulation.

However, it was difficult to remove. In 1998, a single-rod implant, Implanon, debuted in international markets to a better reception. It was introduced in Singapore later in 2002. Measuring 4cm long and 2mm wide, the single rod is easier to insert and remove. It can last up to three years and is reversible at any time.



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3. Intra-uterine device (IUD)

The modern IUD has its roots in 1958 when American obstetrician Lazar Margulies pioneered the first plastic IUD.

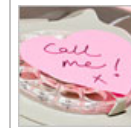
Inserted in the womb, where it can remain for several years



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inserted in the uterus, where it can remain for several years, the T-shaped device prevents pregnancy by creating a hostile environment for sperm to reach an egg, and for a fertilised egg to fasten onto the womb lining. Today, there are two types of IUD in use – copper and hormonal. The latter was hailed as a revolution in contraceptive history. Called Mirena (above), it was introduced in Singapore in 1994.



IUD Device

The device comes with a coating of levonorgestrel, a progesterone-like substance. Not only does it reverse the trend of excessive menstruation that can be caused by the conventional copper IUDs, Mirena also causes shorter and lighter periods. For some women, periods may stop completely after a few months. More importantly, this new IUD has a high success rate that is equal to tubal ligation, a sterilisation method where the fallopian tubes of a woman are surgically closed.

4. Sterilisation

Sterilisation refers to surgery that results in an inability to reproduce. Men undergo vasectomy, where two tubes (vas deferens) are cut and closed to bar sperm from being ejaculated. Tubal ligation is performed for women. Here, the fallopian tubes are closed, usually by clipping them shut. Sperm will then be unable to reach the egg.

Dr Wee Horng Yen, an obstetrician and gynaecologist at [KK Women's and Children's Hospital](#), said there is now evidence showing that male sterilisation is very effective. Hence, more men are now open to vasectomy as an effective means of birth control, said Dr Wee, adding that the failure rate is less than 1 per cent. In addition, a vasectomy tends to be less risky than tubal ligation and causes fewer complications.

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