

Birth Control After Having a Baby

Before you leave the hospital, it is important to talk to your health care provider about birth control. Moms and babies do better when pregnancies are spaced at least 18 months apart. Planning ahead and/or using birth control can help with this.

- Some birth control methods may affect how much breast milk your body makes (called your milk supply). Be sure to tell your health care provider if you are breastfeeding when talking about birth control options.
- Some birth control methods that will not affect your milk supply and that can be started right after having your baby are:
 - › condoms
 - › spermicides (creams or gels that have chemicals that stop sperm from getting to an egg)
 - › diaphragms (flexible silicone that covers the cervix so sperm do not get in and fertilize an egg)
- **Intrauterine devices (IUDs) should not be used for at least 6 weeks after having your baby because your uterus needs time to heal.**
- **Many people believe that they cannot get pregnant while breastfeeding. This is not true.**
- The Lactational Amenorrhea Method (LAM) is 98% effective in protecting against pregnancy if you are breastfeeding and **ALL** of the following apply to you:
 - › your baby is younger than 6 months old
 - › your period has not returned
 - › your baby is fully breastfed, and your baby does not drink any formula or eat any solid foods (fed nothing else by mouth other than medications)
 - › your baby breastfeeds at least every 4 hours during the day and at least every 6 hours at night

If **ANY** of these do not apply to you, you will need to use another form of birth control. Please talk with your primary health care provider about whether LAM is right for you.

- If you are not breastfeeding or giving your own expressed breast milk, most methods (such as the pill, needle, or patch) can be started right away. You should at least 6 weeks after having your baby before using an IUD.
- If you are breastfeeding or giving your own expressed breast milk, it is recommended to use progestin-only birth control. This can be started 6 weeks after having your baby if breastfeeding is well established. Progestin-only birth control may still affect your milk supply, so monitor your supply and talk with your primary health care provider if you notice a decrease in your milk supply.
- The “morning-after pill” should only be used rarely and should not be used as a first choice of birth control. The morning-after pill comes in a progestin-only pill and an estrogen (hormone) and progestin combination pill. If you are breastfeeding and you take a combination pill, you may have a drop in your milk supply a few days later. This should go back to normal.
- If you are breastfeeding and are on hormonal birth control, such as pills, needles, patches, or IUDs, please be aware that you may have a drop in your milk supply. If you think your milk supply has dropped, please contact a Lactation Consultant or other health care provider to help you with a plan to increase your supply.

Resources

- La Leche League Canada - Nova Scotia
 › www.lllc.ca/find-group-nova-scotia

Your local Women and Children’s Unit (Maternity)

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| • South Shore Regional Hospital
› Phone: 902-527-5214 | • Cape Breton Regional Hospital
Perinatal Clinic
› Phone: 902-567-7840 |
| • Colchester East Hants Health Centre
› Phone: 902-893-5544 | • Valley Regional Hospital -
New Mother’s Resource Clinic
› Phone: 902-679-2657 ext. 3054 |
| • Cumberland Regional Health Care
Centre
› Phone: 902-667-5400 ext. 6144 | • Yarmouth Regional Hospital
› Phone: 902-742-3542 ext. 1132 |
| • St. Martha’s Open Arms Family Clinic
› Phone: 902-863-2830 ext. 4364 | • Aberdeen Hospital
› Phone: 902-752-7600 ext. 2530 |

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