

Saint Mary's Hospital Maternity Service

### Information for Patients

# Contraception for women with cardiac disease

It is important to remember that you can be fertile very soon after the birth of your baby, even before you have your first period. This may not be ideal for a variety of reasons; you may wish to space out your family, you may have a heart condition where a further pregnancy could present a significant risk to your health, or you may need to undergo treatment for your heart condition before embarking on another pregnancy.

Many unplanned pregnancies happen in the first few months after childbirth, so even if you are not interested in sex at the moment, it is better to be prepared.

Everyone is different and the type of contraception you choose is a personal choice for you and your partner. There may be some methods that are more or less suitable for you because of your heart condition or certain medications. When you come to clinic for your postnatal visit, we will discuss contraception and advise you about any methods that would not be suitable for you.

For general advice about contraception after having a baby please see this leaflet:

http://www.fpa.org.uk/sites/default/files/contraception-after-having-baby-your-guide.pdf

# **Permanent Contraception**

These methods are suitable for women whose family is complete:

#### Sterilisation

This can be performed two ways in women:

**'Keyhole' (laparoscopic) sterilisation** – requires a general anaesthetic. For some women the anaesthetic risks because of their heart problem are higher than others. This can be discussed with the doctors in the obstetric cardiac clinic.

**Essure** – this is a type of sterilisation performed without anaesthetic as a day case procedure and involves plugging the fallopian tubes via a telescope type instrument



through the neck of the womb. This avoids the risks associated with a general anaesthetic but needs to be performed in hospital.

Male partners can be sterilised by having a **vasectomy** procedure. Your GP can make arrangements for this.

## Reliable, reversible contraceptives

These methods have the benefit of being reliable but can be removed or stopped if you wish to have another baby in the future.

### Implant

This is a small flexible rod placed just under the skin in your upper arm. It releases a hormone called progesterone and lasts for up to 3 years. It can be removed before then if you wish.

#### • Injectable contraceptives

This is a 3 monthly injection of a hormone called progesterone. This may be less suitable for women who have ischaemic or coronary artery disease.

## Intra uterine system/Intrauterine device (also known as 'coils')

Coil devices can be a very good option for women with heart disease. Depending on your heart condition, it can sometimes be better for it to be fitted in hospital rather than at your GP surgery. A Mirena intrauterine device can also reduce or stop your periods, so women with heavy periods often find this beneficial.

#### 'Pills'

There a two broad types of oral contraceptive pills. Those that contain a hormone called oestrogen are usually taken for three weeks a month followed by a pill free week when a period type bleed occurs. These are generally less suitable for women with heart problems, particularly shortly after having a baby. They can increase the risk of blood clots.

Other pills containing only progesterone, the hormone used in the implant and injection, are often suitable. Cerelle can be taken soon after giving birth and does not interrupt breastfeeding. It can be a good option to protect you from further pregnancy whilst you are deciding which method is better for you in the long term. Some women experience irregular bleeding or no periods at all on the progesterone only pill.

#### Less reliable methods

Condoms are not recommended as the only method of contraception for women with heart disease who are trying to avoid pregnancy as they are not as reliable as other methods



listed above. However, they do offer important protection against sexually transmitted infection, so if you are having sex with a new partner they should be used as well as another method.

#### **Further information**

Many of the above methods can be accessed via your GP with referral on to hospital if necessary. Your local sexual health clinic can also provide these services and further advice, including screening for sexually transmitted infection.

The following links will take you to the Family Planning Association website and provide further information about each method of contraception, including in detail the pros and cons of each method available.

www.fpa.org.uk/resources/leaflet-and-booklet-downloads

www.fpa.org.uk/sites/default/files/contraception-after-having-baby-your-guide.pdf

www.essure.com/

www.fpa.org.uk/sites/default/files/male-and-female-sterilisation-your-guide.pdf

www.fpa.org.uk/sites/default/files/contraceptive-implant-your-guide.pdf

www.fpa.org.uk/sites/default/files/contraceptive-injections-your-guide.pdf

www.fpa.org.uk/sites/default/files/progestogen-only-pill-your-guide.pdf

www.fpa.org.uk/sites/default/files/intrauterine-device-iud-your-guide.pdf

