

# Information on contraception for women with heart disease

**This leaflet provides information on contraception for women with heart disease, including the benefits, risks and any alternatives.**

**If you have any further questions, please speak to a doctor or nurse caring for you.**

Women with heart disease can have an increased risk of heart problems and complications during pregnancy. It is important for you to talk with your cardiologist or specialist nurse before planning a pregnancy.

Many types of contraception are available to plan or prevent a pregnancy. They work in different ways and suit different people at different times in their lives. This leaflet explains some of the types of contraception available, and some of the risks and benefits associated with them.

The suitability of each may depend on other illnesses that you have, the medicines that you are taking, as well as your own personal preferences. Your cardiologist or specialist nurse will go through this leaflet with you and recommend the safest and most suitable type(s) of contraception for you.

If you are a patient with heart disease and have any questions or concerns about contraception, please speak to your consultant, specialist nurse, or email [ACHD@gstt.nhs.uk](mailto:ACHD@gstt.nhs.uk).

| Contraception   | Good points  | Bad points  | Recommendations for you from your nurse/doctor |
|---|--|---|--|
| <p><b>Natural methods:</b></p> <ul style="list-style-type: none"> <li>• Withdrawal</li> <li>• Safe period – 98% effective with teaching and correct use of fertility indicators</li> </ul>  | <ul style="list-style-type: none"> <li>• No side effects</li> </ul>  | <ul style="list-style-type: none"> <li>• Withdrawal not reliable – many men ejaculate sperm even before orgasm</li> <li>• Many women have irregular menstrual cycles (periods) and cannot rely on timing of a safe period</li> <li>• Neither method is suitable for cardiac patients who cannot afford the health risk of an unplanned pregnancy</li> <li>• Neither method provides protection against sexually transmitted infections</li> </ul> |  |
| <p><b>Barrier methods:</b></p> <ul style="list-style-type: none"> <li>• Male sheath or condom – 98% effective if used correctly</li> <li>• Female condom – 95% effective if used correctly</li> <li>• The diaphragm – 92% to 96% effective if used correctly</li> </ul> | <ul style="list-style-type: none"> <li>• Safe for all cardiac patients</li> <li>• The male and female condoms can help protect against sexually transmitted infections</li> <li>• The diaphragm may also protect against some sexually transmitted infections</li> </ul> | <ul style="list-style-type: none"> <li>• Failure rate of 2% to 50% depending on how carefully they are used</li> <li>• Cardiac patients who cannot afford the health risk of an unplanned pregnancy should be cautious about these methods and may need emergency contraception if the condom fails</li> </ul>  |  |
| <p><b>Intrauterine device (coil, IUCDs)</b></p> <ul style="list-style-type: none"> <li>• Around 99% effective</li> </ul>  | <ul style="list-style-type: none"> <li>• Widely available</li> <li>• Can be left in the uterus (womb) for up to ten years</li> </ul>   | <ul style="list-style-type: none"> <li>• Some women have heavier, more painful periods</li> <li>• A rare complication of all coils is ectopic pregnancy (if the method fails)</li> </ul>  |  |

| Contraception   | Good points   | Bad points   | Recommendations for you from your nurse/doctor |
|---|---|--|--|
| <b>Intrauterine device (coil, IUCDs) cont.</b>  |   | <ul style="list-style-type: none"> <li>• Putting in an intrauterine device (IUD) can be associated with bacteraemia (infection in the blood stream) and a risk of infective endocarditis (infection of the inside of the heart)</li> <li>• No protections against sexually transmitted infections</li> <li>• May be associated with some discomfort at the time of and for a short time after insertion</li> </ul>   |  |
| <b>Progestogen impregnated coil: e.g Mirena®</b>  | <ul style="list-style-type: none"> <li>• Up to 20% of women's periods stop several months after insertion</li> </ul>  | <ul style="list-style-type: none"> <li>• No protection against sexually transmitted infections</li> <li>• A rare complication of all coils is ectopic pregnancy (if the method fails)</li> <li>• May be associated with some discomfort at the time of and for a short time after insertion</li> </ul>   |  |
| <b>Hormonal methods:</b> <ul style="list-style-type: none"> <li>• Combined oral contraceptive pill (COCP)</li> <li>• EVRA skin patch</li> </ul> | <ul style="list-style-type: none"> <li>• Both contain oestrogen and progestogen and are over 99% effective if used correctly</li> <li>• Regulates periods and makes them lighter</li> </ul> | <ul style="list-style-type: none"> <li>• Contraceptive pill must be taken regularly</li> <li>• No protection against sexually transmitted infections</li> <li>• An increased risk of thrombosis (blood clotting) and therefore not suitable for patients who already have a high risk of thrombosis (even if taking warfarin), are cyanosed (blue) or at risk of paradoxical embolism (blood clots passing from the veins to the arteries and causing a stroke)</li> </ul> |  |

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| <ul style="list-style-type: none"> <li>• Progestogen-only or mini pill (POP)</li> <br/> <li>• Cerazette POP</li> <br/> <li>• ‘Depot’ injections of progestogen – over 99% effective</li> </ul> | <ul style="list-style-type: none"> <li>• Safe for most women</li> <li>• 99% effective if taken correctly</li> <br/> <li>• Over 99% effective if taken correctly</li> <li>• As effective as the COCP, but without the increased risk of thrombosis associated with oestrogen</li> <li>• Safe for most women even if cyanosed</li> <br/> <li>• Lasts 8 – 12 weeks</li> <li>• Periods may stop or may reduce heavy, painful periods</li> <li>• Safe for most women</li> </ul> | <ul style="list-style-type: none"> <li>• The failure rate may be higher than the combined pill as it MUST be taken according to instructions</li> <li>• Can cause irregular periods</li> <li>• Must be taken at the same time every day</li> <li>• No protection against sexually transmitted infections</li> <br/> <li>• Can cause irregular bleeding</li> <li>• No protection against sexually transmitted infections</li> <br/> <li>• Need to have an injection every 12 weeks</li> <li>• Deep injections can cause severe bruising in women taking warfarin</li> <li>• Periods and fertility may take a while to return to normal when injections stop</li> <li>• Some women find that they gain weight</li> <li>• No protection against sexually transmitted infections</li> <li>• May not be suitable for adolescents or women at risk of osteoporosis</li> </ul> |  |

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| <ul style="list-style-type: none"> <li>Parenteral progestogen-only contraceptive implant (for example Nexplanon) – over 99% effective</li> </ul>   | <ul style="list-style-type: none"> <li>Safe for most women</li> <li>Best choice for women with complex congenital heart problems</li> <li>Works for up to three years</li> <li>May reduce heavy, painful periods</li> <li>Fertility will return to normal as soon as the implant is taken out</li> </ul>  | <ul style="list-style-type: none"> <li>Requires a small procedure to implant the rod</li> <li>Irregular bleeding occurs in 15% of women</li> <li>No protection against sexually transmitted infections</li> <li>Certain types of other medication may make the implant less effective</li> </ul>  |  |
| <p><b>Post-coital contraception:</b></p> <ul style="list-style-type: none"> <li>Emergency contraception pill (Emergency Hormonal Contraception EHC): <ul style="list-style-type: none"> <li>- Levonelle 1500 ('morning after pill')</li> <li>- EllaOne® (Ulipristal)</li> </ul> </li> <li>Insertion of a copper IUD</li> </ul> | <ul style="list-style-type: none"> <li>60% to 90% effective in lowering the chance of pregnancy</li> <li>Levonelle can be taken up to 72 hours after sexual intercourse</li> <li>EllaOne® is effective if taken within 120 hours (5 days) of sexual intercourse</li> <li>An alternative to the emergency contraceptive pill</li> <li>Can be inserted up to five days after sexual intercourse or up to day 19 in a normal menstrual cycle</li> <li>Useful if sex has taken place over 72 hours ago</li> </ul> | <ul style="list-style-type: none"> <li>Can sometimes cause vomiting</li> <li>No protection against sexually transmitted infections</li> <li>Small risk of ectopic pregnancy if it fails</li> <li>Insertion of an intrauterine device (IUD) or intrauterine system (IUS) can be associated with bacteraemia (infection in the blood stream) and risk of infective endocarditis (infection of the inside of the heart)</li> </ul> |  |

## Useful sources of information

Contraception is free for women and men of all ages through the National Health Service. Contact your local health centre or directories for details of your local Family Planning services.

**Family Planning Association** – a leading sexual health charity can provide more information about Family Planning services and contraception.

**w:** [www.fpa.org.uk](http://www.fpa.org.uk)

### Contact us

If you are a patient with heart disease and have any questions or concerns about contraception, please speak to your consultant, specialist nurse, or email [ACHD@gstt.nhs.uk](mailto:ACHD@gstt.nhs.uk)

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.guysandstthomas.nhs.uk/leaflets](http://www.guysandstthomas.nhs.uk/leaflets)

### Pharmacy Medicines Helpline

If you have any questions or concerns about your medicines, please speak to the staff caring for you or call our helpline.

**t:** 020 7188 8748 9am to 5pm, Monday to Friday

### Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

**t:** 020 7188 8801 (PALS)      **e:** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)  
**t:** 020 7188 3514 (complaints)      **e:** [complaints2@gstt.nhs.uk](mailto:complaints2@gstt.nhs.uk)

### Language Support Services

If you need an interpreter or information about your care in a different language or format, please get in touch:

**t:** 020 7188 8815      **e:** [languagesupport@gstt.nhs.uk](mailto:languagesupport@gstt.nhs.uk)

### NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

**t:** 111

### NHS Choices

Provides online information and guidance on all aspects of health and healthcare, to help you make choices about your health.

**w:** [www.nhs.uk](http://www.nhs.uk)

### Get involved and have your say: become a member of the Trust

Members of Guy's and St Thomas' NHS Foundation Trust contribute to the organisation on a voluntary basis. We count on them for feedback, local knowledge and support. Membership is free and it is up to you how much you get involved. To find out more, and to become a member:

**t:** 0800 731 0319      **e:** [members@gstt.nhs.uk](mailto:members@gstt.nhs.uk)      **w:** [www.guysandstthomas.nhs.uk/membership](http://www.guysandstthomas.nhs.uk/membership)

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