

# Sexual health and contraceptive choices

**FOR YOUNG WOMEN WITH TYPE 1 DIABETES**

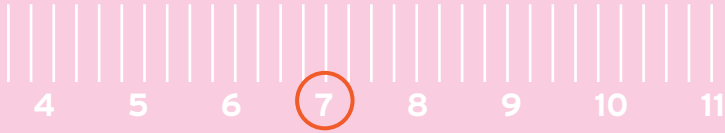


# Adolescence

causes a whole range of changes in your body. The biggest change is the start of menstruation, which signals that you may be fertile and able to become pregnant. As a young woman living with diabetes you may also notice that these hormonal changes make it more challenging to manage blood glucose levels (BGL). This is a good time to talk to your diabetes team about the changes you are experiencing, your contraceptive options and the impacts of becoming pregnant. If you are a sexually active woman with diabetes it is vital that you plan ahead and understand all the issues involved with contraception and pregnancy.



**EVEN IF HAVING A BABY IS THE LAST THING ON YOUR MIND, THERE ARE THINGS YOU NEED TO KNOW ABOUT GETTING PREGNANT.**

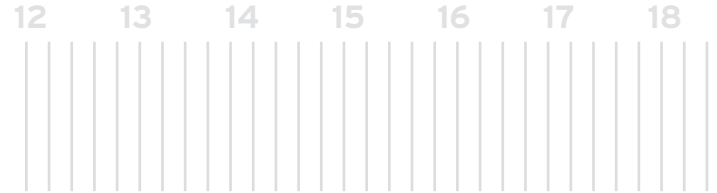


## HbA1c and planning pregnancy

HbA1c control is more difficult to achieve in your teens. The ideal HbA1c for pregnancy is seven per cent and under – work with your diabetes team to establish and reach your target HbA1c before you even start trying to conceive. If the pregnancy is unplanned it is likely that your HbA1c will be at a much higher level, which can be harmful to both baby and mother. This is because an HbA1c above seven per cent can cause health problems in the developing baby and increase the chances of miscarriage.

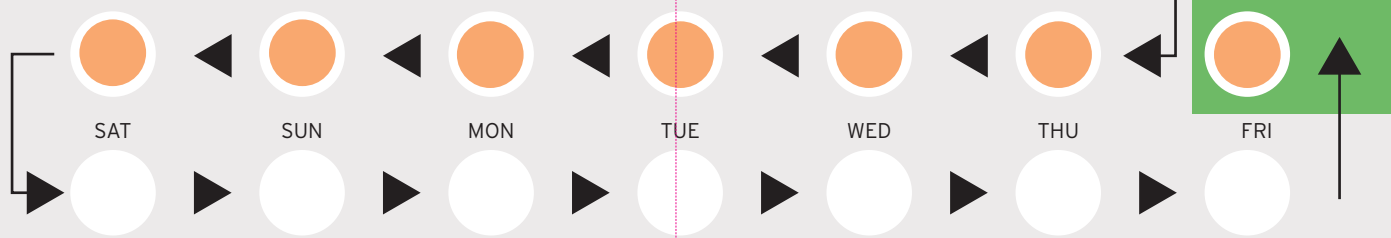
## Contraception

There are a number of contraception choices available, all with some pros and cons. Discuss your options with your diabetes team; you may have to try a few different methods before you find the one that's right for you.



**IT IS IMPORTANT TO USE EFFECTIVE CONTRACEPTION UNTIL YOU DECIDE YOU WANT TO BECOME PREGNANT. ►►**





## Oral contraceptive pill

There are two types of contraceptive pill: the combined oestrogen and progesterone pill and the progesterone-only pill (also called the 'minipill'). The combined pill is the better option as it has fewer side effects, such as spotting between periods, and contains oestrogen which is important to keep your bones healthy.

The combined contraceptive pill contains two types of hormones. There is oestrogen, which prevents the egg from developing and being released from the ovary, and progesterone which prevents the sperm from passing through the mucus of the neck of the womb. If taken reliably, these pills provide a high level of protection against unwanted pregnancy.

### **BENEFITS**

The combined pill offers 99 per cent protection against pregnancy and will also, generally, reduce the symptoms of menstruation. This means a shorter, lighter period and fewer pains.

### **DRAWBACKS**

Because the pill can sometimes cause high blood pressure it may not be a good option for people with eye or kidney problems. The pill must be taken every day and should be part of your daily routine. If you do forget, make sure you take a pill as soon as possible, otherwise it becomes less effective at preventing pregnancy.

# IUD

An intrauterine device (IUD, coil) is a device that is put into your uterus (womb). There are currently two types of IUDs available in Australia: copper and hormonal. They are both made of flexible plastic with nylon string attached to the stem. An IUD is a safe contraceptive for women with diabetes according to recent studies. Problems with infections or spotting are no more common than for women without diabetes.

## BENEFITS

Both the copper IUD and the progestogen IUD have the following benefits:

- ★ effective long-term contraception (at least five years)
- ★ easy maintenance, you can't forget to use it as you might a contraceptive pill
- ★ less expensive overall than other contraception (more expensive at first but cheaper over the long-term)
- ★ you can try for pregnancy as soon as it is removed, if you would like.

The progestogen IUD has the added benefit of reducing menstrual bleeding. For a woman who has diabetes complications affecting the eyes or kidneys, intrauterine devices may be a good alternative to contraceptive pills.

## DRAWBACKS

IUDs are not recommended if you have irregular or heavy menstrual periods. There is a small risk of infection of the womb or ovary (and this could lead to infertility). Although uncommon, it is possible for the IUD to be pushed out by the uterus and you will need to check each month that it is still there. An internal examination is required to check the IUD is suitable for you and another when it is fitted.

# Depot injections

Depot injections contain the same hormone (progesterone) as minipills, but they will give a higher concentration and affect the blood glucose level more than minipills. Common side effects are nausea, increased appetite or irritability, all of which make it more difficult to control blood glucose levels. The depot injection is not considered suitable for women with diabetes as the effects of one injection will last for many months.

## **BENEFITS**

Highly effective at preventing pregnancy; periods may be lighter and less painful or stop completely. Your contraception will not be affected if you have diarrhoea or vomiting or are taking any medications.

## **DRAWBACKS**

Cannot be reversed and it may take months for its full effect to wear off. Your bleeding pattern will change and may become unpredictable. You may experience some loss of bone density, this should recover once depot is stopped.

# Implants

A contraceptive implant contains the same hormone as a depot injection and is implanted under the skin using local anaesthesia. It can be removed if there are serious side-effects experienced. This makes it more suitable for a woman with diabetes than the depot injection.

## **BENEFITS**

Highly effective, inexpensive and when the implant is removed the contraceptive effect and any side-effects are quickly reversed.

## **DRAWBACKS**

Implants can only be inserted and removed by a specially trained doctor. You may have to pay for the procedure and the service may be difficult to obtain in some areas. Your bleeding pattern will change and may be unpredictable and in some cases you may stop having periods completely.



## Condoms

Condoms are an immediate, convenient form of contraceptive that also provide protection against STIs (see page 14 for more on STIs). You can purchase condoms in supermarkets, petrol stations and chemists. When used correctly condoms are effective at preventing conception 98 per cent of the time. Use of both barrier contraception (including the less common, but still effective when used correctly, female condom and diaphragm) and IUD or the pill provides the most effective contraception and STI prevention.



# WHAT HAPPENS...

## **IF YOU THINK YOU'RE PREGNANT?**

Don't panic. No matter how you plan to proceed, make an urgent appointment with your doctor or diabetes educator for guidance on how you may need to change your diabetes management.

## **WHEN YOU WANT TO START A FAMILY?**

It's recommended that women with type 1 diabetes consider waiting until their early 20s before trying to become pregnant. By this time the hormonal fluctuations that make managing your BGL more difficult have settled down. When you're ready to start a family, work with your diabetes management team to ensure your HbA1c is at a safe level for pregnancy and your BGLs are stable.

# Sexually Transmitted Infections (STIs)

Unprotected sexual contact (including anal, oral and genital skin-to-skin) puts you at risk of contracting an STI. The more partners, the greater the risk. As with all infections, STIs can potentially increase BGLs and need to be treated immediately. Not all STIs have obvious symptoms but they can still cause an increase in BGLs and lead to complications if not treated.

If you have unexplained high blood glucose levels and think that you might have an STI speak to your doctor as soon as possible. Most STIs are quickly and easily treated without too much fuss.

**UNPROTECTED SEX PUTS YOU AT RISK OF INFECTION. ONLY A CONDOM CAN PROTECT YOU FROM SEXUALLY TRANSMITTED INFECTIONS.**

Here are some of the more common symptoms to be aware of:

- ✗ an increase in vaginal discharge
- ✗ unusual bleeding
- ✗ blisters or painful ulcers in the genital area
- ✗ pain during sex
- ✗ difficulty or pain passing urine
- ✗ pain in the lower abdomen
- ✗ feeling generally unwell (muscular aches, headache and fever).



# Take

- 1 Talk to your diabetes team before you become sexually active
- 2 If you suspect something is wrong – reach out for help
- 3 Find the right contraception for you and your situation
- 4 Planning ahead for pregnancy is really important
- 5 Embrace this new stage in your life!

DETAILED INFORMATION ON CONTRACEPTIVE CHOICES, STIs AND SEXUAL HEALTH CAN BE FOUND AT FAMILY PLANNING VICTORIA [WWW.FPV.ORG.AU](http://WWW.FPV.ORG.AU)

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