

## DIAPHRAGM FACT SHEET

### HOW IT WORKS

The diaphragm is a dome-shaped cup that fits securely in the vagina to cover the cervix and block the opening to the uterus. Spermicidal contraceptive cream or jelly stops the sperm from moving and must be used with the diaphragm.

### ADVANTAGES

- diaphragm can be used during breastfeeding.
- Can be carried in pocket or purse
- Generally not felt by either partner
- Immediately effective and reversible
- No effect on a woman's natural hormones
- Can be inserted several hours ahead of time-no interruption of sex play

### DISADVANTAGES

- Must be in place every time a woman has intercourse
- may be pushed out of position by some sexual positions or some penis sizes and some thrusting techniques and angles
- may require refitting
- may not be used during menstruation because of the concern for Toxic Shock Syndrome
- may be difficult to insert for some women

### INSTRUCTION FOR USE

The clinician will determine the correct size of diaphragm during your pelvic exam. The clinician will demonstrate how to insert and remove the diaphragm and will watch you insert and remove it. One should practice at home inserting the diaphragm and removing it.

An appointment to recheck the size may be needed if one has a significant weight change, after a delivery or after pelvic surgery.

One should check for tiny holes before each use and spread spermicide jelly or cream around the edge or rim of the diaphragm and on the inside. It must be left in place at least 6 hours after intercourse and may be left in up to 6 hours before intercourse. It should not be left in longer than 24 hours.

Wash the diaphragm with soap & water. Store where it is cool and dark – away from extreme heat.

If one has repeated intercourse, do not remove the diaphragm but insert more cream or jelly with the plastic applicator.

Do not use with oil-based products (no Vaseline, oils, lotions) as they deteriorate the diaphragm.

### EFFECTIVENESS

Effectiveness varies (81-98%) and improved with consistent use. Perfect use 9% pregnancy, typical 20% pregnancy.

### CONTRAINDICATIONS

A woman may not be able to use a diaphragm if she has frequent urinary tract infections or poor vaginal muscle tone or latex allergy (allergic to rubber).

### POSSIBLE SIDE EFFECTS

- Some women using the diaphragm may develop frequent bladder infections. They should urinate before insertion and after intercourse. The clinician may need to recheck the fit of the diaphragm.
- It may not be a good method for women who are allergic to latex, silicone or some spermicides. Women with a mild reaction may be able to switch to another spermicide.

### SYMPTOMS TO REPORT TO YOUR CLINICIAN

- Burning with urination
- Discomfort when diaphragm is in place
- Irregular spotting or bleeding
- Irritation or itching in the vaginal area
- Redness or swelling of the vulva or vagina
- Unusual discharge from the vagina

### TOXIC SHOCK SYNDROME

Rare cases of TSS have been reported with diaphragm use. Symptoms of TSS include:

- a sunburn-type rash
- diarrhea
- dizziness, faintness, weakness
- sore throat, aching muscles and joints
- sudden high fever
- vomiting

If any of these occur, remove the diaphragm and contact your clinician immediately or go to an emergency room.