

## Is the Lactational Amenorrhea Method (LAM) right for me?

If you answer “YES” to ALL of the 4 conditions below, LAM may be a good method of contraception for you to use.

1. Your monthly periods have not returned.
2. Your baby is fully or nearly fully breastfed.
  - **Fully breastfed** means your baby gets all food from suckling at the breast.
  - **Nearly fully breastfed means** that in addition to breastfeeding, 1 or 2 mouthfuls of food or fluid are given **no more than once or twice per week**. If supplemental feeding is given daily, a different contraceptive method should be used.
  - Women who are using nipple shields or expressing milk by hand or pump instead of breastfeeding, more than a few times per week, should begin a different contraceptive method.
3. You are breastfeeding often, at least every 4 hours, and not going longer than one 6 hour stretch between breastfeeding in a 24 hour period.
4. Your baby is less than 6 months old.

If you answer “NO” to any of the above statements, the chance of pregnancy is increased. Talk to your health care provider about starting another method of contraception and continue breastfeeding.



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# Breastfeeding and Contraception (Birth Control)



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**The following is a list of birth control methods and their known effect on breastfeeding:**

METHOD	EFFECT ON BREASTFEEDING
<p><b>Birth Control – Mini Pill</b> A pill containing progestin, which is a hormone that thickens cervical mucus and may stop an egg from being released. 99% effective if used correctly, 91% effective with typical use. For maximum effectiveness, must be taken at the same time each day.</p>	<p>No adverse effects on breast milk supply if breast milk supply is well established. No known effect on infant from hormone.</p>
<p><b>Combined Hormonal Contraceptive Methods (e.g. Birth Control Pill, Contraceptive Patch, Vaginal Contraceptive Ring)</b> Contain hormones (progestin and estrogen) that stop an egg from being released, thickens cervical mucus, and may thin the uterine lining. These methods are taken either orally (the Pill), worn on the skin (the Patch), or inserted into the vagina (the Ring). All: 99% effective if used correctly and 91% effective with typical use.</p>	<p>Studies have shown that estrogen reduces breast milk supply. No known effect on infant from hormones.</p>
<p><b>Condoms (Female)</b> Polyurethane sheath that lines the vagina to stop sperm from going into the vagina. 95% effective if used correctly, 79% effective with typical use.</p>	<p>None</p>
<p><b>Condoms (Male)</b> Thin covering of latex (or polyurethane) rolled onto the erect penis to stop sperm from entering the vagina. 98% effective if used correctly, 82% effective with typical use.</p>	<p>None</p>
<p><b>Depo Provera</b> A hormone injection given by a health care provider every 3 months. It contains progestin which thickens cervical mucus and may stop ovulation. 99% effective.</p>	<p>No adverse effects on breast milk supply if breast milk supply is well established. No known effect on infant from hormone.</p>
<p><b>Emergency Contraceptive Pills (ECP)</b> You must take these pills (containing progestin) as soon as possible and within 5 days of unprotected sex. This is an emergency method. When taken within 3 days of unprotected sex, they are 89% effective. They continue to lower pregnancy risk for up to 5 days after unprotected sex, but effectiveness decreases as time passes. Available from pharmacies without a prescription.</p>	<p>No adverse effects on breast milk supply. No known effect on infant from hormones.</p>
<p><b>Fertility Awareness Methods (Natural Family Planning)</b> These methods require special teaching and are difficult to use before your periods start again. Talk to your health care provider for more information.</p>	<p>None</p>
<p><b>IUD (Intra-Uterine Device)</b> A small piece of plastic, usually wrapped with copper that is inserted into the uterus by a health care provider. It usually works by killing sperm and preventing it from reaching an egg. 99.8% effective.</p>	<p>None</p>
<p><b>IUD (Intra-Uterine Device) with Hormone</b> A small piece of plastic containing a hormone (progestin) that thickens cervical mucus, prevents sperm from reaching an egg, may stop an egg from being released, and thins the uterine lining. A health care provider inserts this into the uterus. 99.8% effective.</p>	<p>No adverse effects on breast milk supply if breast milk supply is well established. No known effect on infant from hormone.</p>
<p><b>LAM (Lactational Amenorrhea Method) *</b> See the other side of this pamphlet for information on LAM. <b>98% effective if ALL 4 LAM conditions are consistently met.</b></p>	<p>Positive for infants (healthy) and mothers (convenient, free birth control).</p>
<p><b>Diaphragm or Cervical Cap used with Spermicide (Foam, Gel, Film, or Cream)</b> Diaphragms and caps are rubber barriers placed inside the vagina before intercourse to cover the cervix and prevent sperm from entering the uterus. A medical exam is required to determine the correct size for a proper fit. Needs to be re-fitted after child birth. Used in combination with spermicide, which contains chemicals that kill sperm. If used correctly, the diaphragm and spermicide are together 94% effective. If used correctly, the cap and spermicide are 86% effective for women who have never been pregnant or given birth vaginally, and 71% effective for those who have given birth vaginally. High failure rates compared to other methods.</p>	<p>None</p>
<p><b>Sterilization Female (Tubal Occlusion)</b> A doctor cuts or blocks the tubes that carry eggs to the uterus. This is done in a hospital and is a permanent method. 99.5% effective.</p>	<p>None</p>
<p><b>Sterilization Male (Vasectomy)</b> A doctor cuts the tubes that carry sperm from the testicles. This may be done in a doctor’s office. This is a permanent method. 99.8% effective. You must use another form of birth control until you have a negative sperm sample following the procedure.</p>	<p>None</p>