

A diaphragm is a barrier method of contraception used by women.

What is a diaphragm?

A diaphragm is a dome-shaped silicone rubber cap worn in the vagina during and after sexual intercourse, to reduce the risk of pregnancy.

Diaphragms are available in different sizes

How does a diaphragm work?

The diaphragm fits inside the vagina and covers the cervix, acting as a barrier to stop sperm entering the uterus (womb) after ejaculation.

How effective is the diaphragm?

The diaphragm is 84-94% effective. Effectiveness increases with experience, consistent use and correct fitting of the diaphragm.

What are the advantages of a diaphragm as a contraceptive method?

- side effects are rare
- no delay in return to fertility as it does not interfere with the menstrual cycle
- does not inhibit spontaneity with sexual activity (it can be inserted well before the time of sexual activity if preferred)
- can be used on an intermittent basis when sexual activity occurs
- may be used by breastfeeding women
- a safe alternative for women who are unable to use hormonal methods of contraception

What are the disadvantages of using a diaphragm as a method of contraception?

- effectiveness rate may be unacceptable to some women
- must be used consistently and correctly to be effective
- provides only limited protection against sexually transmitted infections
- must be looked after carefully

What are the possible side effects or complications of using a diaphragm?

Side effects are uncommon but may include:

- allergic reaction to silicone
- increased risk of urinary tract infections
- toxic shock syndrome (this is rare)

Are diaphragms suitable for all women?

Most women can safely use a diaphragm.

Diaphragms may be PARTICULARLY SUITABLE for women who:

- prefer an alternative to hormonal contraception or intrauterine contraceptive devices
- accept that there is a higher risk of pregnancy
- want to use contraception only when required

A diaphragm MAY NOT BE SUITABLE for women who:

- need highly effective protection against pregnancy
- suffer from recurrent urinary tract and/or vaginal infections
- have poor muscle tone in the pelvic floor area
- have vaginal or uterine abnormalities or problems
- are unable to insert the diaphragm or feel the cervix

A diaphragm is NOT SUITABLE for women who:

- have a history of toxic shock syndrome

What do I need to know about starting to use a diaphragm?

Diaphragms come in different sizes. It is important to be fitted for one that suits you at a Family Planning Queensland (FPQ) clinic or by other health professionals who have been properly trained in fitting diaphragms. Instructions on how to insert and remove the diaphragm will be provided at the time of fitting.

How is a diaphragm used?

The diaphragm is inserted into the vagina any time before sexual intercourse by squeezing it into a long narrow shape and then inserting into the vagina in a similar way as a tampon. See Figure A.

It needs to be inserted so that the cervix is covered and it also tucks behind the pubic bone.

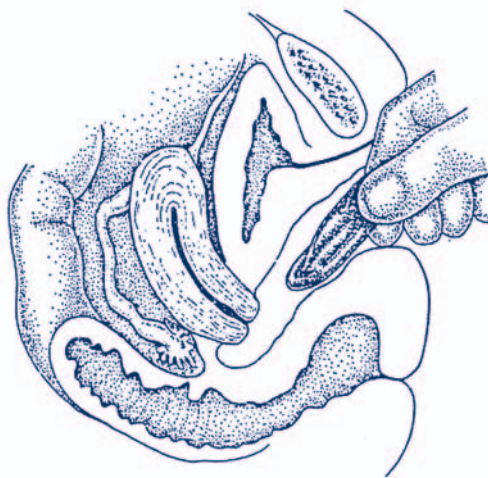


Figure A

CONTRACEPTION

To remove the diaphragm, place your finger behind the front part of the rim and pull it down and out. See Figure B.



Figure B

It must not be removed until at least 6 hours after sexual intercourse, as sperm can survive in the vagina for a number of hours. It is not advisable to leave it in for more than 30 hours as this may lead to vaginal irritation and discharge.

Use of a spermicide with the diaphragm is recommended, although it is not clearly established how much, if any, effectiveness is improved if spermicide is used with a diaphragm. Spermicide is available from pharmacists but may be difficult to obtain in some areas. Some women find it unacceptable and opt to not use it.

If using spermicide, a teaspoon sized amount should be applied on the (upper) side in contact with the cervix, prior to sexual intercourse. If sex takes place again within the 6 hour time frame, additional spermicide should be applied into the vagina, but without removing or dislodging the diaphragm.

Use of a diaphragm during menstruation (periods) should be avoided as it may increase the risk of toxic shock syndrome. If used during menstruation, it should not be left in place for longer than 6 hours.

What do I need to know about the ongoing use of a diaphragm?

If the diaphragm is properly cared for it should last for a year or more.

After use, the diaphragm should be cleaned, rinsed, dried thoroughly and stored in a cool place. A light dusting of cornflower will help dry the diaphragm. It should be checked regularly for any holes or signs of wear or feeling "tacky" as this may indicate the silicone is perished.

Avoid contact with disinfectants, detergents, powders or perfumed soaps. These may weaken and damage the diaphragm.

Check with a pharmacist, when using any vaginal product, if it is suitable to use with a diaphragm.



You are advised to have a diaphragm check in the following circumstances:

- 6 weeks after giving birth
- if there has been a weight gain or loss of around 3 kgs or more
- if it is uncomfortable for the woman or her partner when it is in place
- if the diaphragm is easily dislodged or moves during intercourse
- any difficulties inserting or removing the diaphragm
- discomfort passing urine or moving your bowels

What if the diaphragm is dislodged or breaks during sex?

If the diaphragm moves out of place, tears or is not used properly, emergency contraception should be considered.

Emergency contraception can be used to help prevent pregnancy. It is taken by the female partner and can be obtained without prescription from pharmacies, general practitioners, sexual health or FPQ clinics.

If you are not sure if you need emergency contraception contact your doctor or local FPQ clinic.

Where are diaphragms available?

Diaphragms may be bought from FPQ clinics and most pharmacies once the correct size and type are known.

Disclaimer

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