

**Table 13.2 Percentage of women experiencing an unintended pregnancy within the first year of typical use and the first year of perfect use and the percentage continuing use at the end of the first year: United States\***

Method	% of Women Experiencing an Unintended Pregnancy within the First Year of Use		% of Women Continuing Use at One Year <sup>1</sup>
	Typical Use <sup>2</sup>	Perfect Use <sup>3</sup>	
No Method <sup>4</sup>	85	85	
Spermicides <sup>5</sup>	29	18	42
Withdrawal	27	4	43
Periodic Abstinence			51
Calendar	25	9	
Ovulation Method	25	3	
Symptothermal <sup>6</sup>	25	2	
Post-ovulation	25	1	
Cervical Cap with spermicide			
Parous Women	32	26	46
Nulliparous Women	16	9	57
Diaphragm with spermicide <sup>7</sup>	16	6	57
Condom <sup>8</sup>			
Reality Female Polyurethane condom	21	5	49
Male (Latex or polyurethane)	15	2	53
Pill (COCs and POPs)	8	0.3	68
Ortho Evra patch <sup>*</sup>	8	0.3	68
NuvaRing <sup>*</sup>	8	0.3	68
Depo-Provera injections - q.3 months	3	0.3	56
Lunelle monthly injection	3	0.05	56
Implanon ←	0.2	0.1	
IUD			
Copper T (Paragard)	0.8	0.6	78
Levonorgestrel-releasing (Mirena)	0.1	0.1	81
Female Sterilization	0.5	0.5	100
Male Sterilization	0.15	0.10	100

**Emergency Contraceptive Pills:** Treatment with COCs initiated within 120 hours after unprotected intercourse reduces the risk of pregnancy by at least 60-75%<sup>9</sup>. Pregnancy rates lower if initiated in first 12 hours. Progestin-only EC reduces pregnancy risk by 89%.

**Lactational Amenorrhea Method:** LAM is a highly effective, temporary method of contraception.<sup>10</sup>

- <sup>1</sup> Among couples attempting to avoid pregnancy, the percentage who continue to use a method for 1 year
- <sup>2</sup> Among typical couples who initiate use of a method (not necessarily for the first time), the percentage who experience an accidental pregnancy during the first year if they do not stop use for any other reason
- <sup>3</sup> Among couples who initiate use of a method (not necessarily for the first time) and who use it perfectly (both consistently and correctly), the percentage who experience an accidental pregnancy during the first year if they do not stop use for any other reason
- <sup>4</sup> The percentages becoming pregnant in columns 2 and 3 are based on data from populations where contraception is not used and from women who cease using contraception in order to become pregnant. Among such populations, about 89% become pregnant within 1 year. This estimate was lowered slightly (to 85) to represent the percentages who would become pregnant within 1 year among women now relying on reversible methods of contraception if they abandoned contraception altogether
- <sup>5</sup> Foams, creams, gels, vaginal suppositories, and vaginal film
- <sup>6</sup> Cervical mucus (ovulation) method supplemented by calendar in the pre-ovulatory and basal body temperature in the post-ovulatory phases
- <sup>7</sup> With spermicidal cream or jelly
- <sup>8</sup> With or without spermicides (No difference in efficacy)
- <sup>9</sup> The treatment schedule is one dose within 72 hours after unprotected intercourse, and a second dose 12 hours after the first dose. See page 70 for pills that may be used
- <sup>10</sup> However, to maintain effective protection against pregnancy, another method of contraception must be used as soon as menstruation resumes, the frequency or duration of breast-feedings is reduced, bottle feeds are introduced, or the baby reaches 6 months of age

\*Adapted from Trussell J, Kowal D. The essentials of contraception. In: Hatcher RA, et al. *Contraceptive Technology*, 18th ed. New York: Ardent Media, 2004.

\*Numbers for typical use failure of Ortho Evra and NuvaRing are not based on data. They are estimates based on pill data. ←