

	Method	Administration	Expected bleeding pattern	Advantages	Disadvantages	Contraceptive failure rate
Combined estrogen and progesterone medications	Pills	Daily	<ul style="list-style-type: none"> Regular, predictable cycles 	<ul style="list-style-type: none"> Many options for dosing/ formulations Easily reversible 	<ul style="list-style-type: none"> Temporary/ mild: Nausea, upset stomach, irregular bleeding, breast pain Serious: Increased blood pressure Rare/ severe: Blood clot Not recommended for patients with migraine headaches with aura, high blood pressure, personal or family history of blood clots, or limited mobility 	6-9 pregnancies per 100 women in a year*
	Patch	Weekly	<ul style="list-style-type: none"> Easily reversible 	<ul style="list-style-type: none"> Easily reversible 		
	Vaginal ring	Monthly	<ul style="list-style-type: none"> Easily reversible 	<ul style="list-style-type: none"> Easily reversible 		
Progesterone only medications	Pills	Daily	<ul style="list-style-type: none"> Limited bleeding at higher doses 	<ul style="list-style-type: none"> Many options for dosing Easily reversible 	<ul style="list-style-type: none"> Potential for increased acne, mood changes, and weight gain Requires consistent timing of administration 	Less than 1 pregnancy per 100 women in a year
	Injection	Every 3 months	<ul style="list-style-type: none"> Irregular bleeding 80% rate of no bleeding with long term use 	<ul style="list-style-type: none"> Less frequent administration 	<ul style="list-style-type: none"> Potential for increased acne, mood changes, and weight gain Reversible bone loss Not recommended for patients with low bone strength 	
	Implant	Every 3 years	<ul style="list-style-type: none"> Lighter bleeding 20% rate of no bleeding with long term use 	<ul style="list-style-type: none"> Ease of continuation 	<ul style="list-style-type: none"> Requires a procedure for placement (office) Highest rates of persistent, unpredictable bleeding 	
	Intrauterine device	Every 5 years	<ul style="list-style-type: none"> Lighter bleeding 60% rate of no bleeding with long term use 	<ul style="list-style-type: none"> Ease of continuation Limited systemic hormone circulation 	<ul style="list-style-type: none"> Requires a pelvic exam and procedure for placement (office or operating room) Irregular bleeding and cramping for several weeks to months after placement Not recommended for patients with an abnormal uterine shape or small uterus 	

*Not all progesterone only pills are approved as contraception. **In our clinic, surgical methods of management of menses typically are not considered.