

How can I help reduce healthcare associated infections?

Infection control is important to the well-being of our patients and for that reason we have infection control procedures in place. Keeping your hands clean is an effective way of preventing the spread of infections. We ask that you, and anyone visiting you, use the hand sanitiser available at the entrance to every ward before coming in to or after leaving the ward. In some situations hands may need to be washed at the sink using soap and water rather than using the hand sanitiser. Staff will let you know if this is the case.

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Contraception Advice for Young People with Diabetes

Patient information leaflet
For Parents & Carers of a child with Diabetes

Safe & compassionate care,

every time

There is a lot of inaccurate advice given about contraception. As a young person with diabetes or the partner of someone with diabetes, you may hear more than most. If you are in a sexual relationship with your partner and you are **not** planning a baby yet, you will need some contraception.

Having diabetes does **not** prevent you from being fertile.

Women with diabetes can have normal healthy babies but it is **important that**;

 pregnancies are planned so that blood glucose levels are kept as normal as possible during the first weeks and months of pregnancy. This is when the most vital development of the baby takes place.

Poor diabetic control in the mother causes an increased risk of serious birth defects (such as heart problems) and also increases the risk of miscarriage.

Women with diabetes who are planning to become pregnant are advised to:

- •discuss this with their doctor so that your diabetes control can be improved **before** you get pregnant.
- •HbA1C should ideally be less than 53 mmol/mol (7%).
- •You should also take folic acid (a type of B vitamin) while trying to get pregnant and for the first 12 weeks of pregnancy to help reduce the chance of birth defects in the baby.

Injectable Contraceptive: Action similar to the progesterone-only pill. 3 monthly injection of progestogen given by doctor or nurse into a muscle. Almost 100% effective. Can cause irregular bleeding at first but often stops periods altogether in the long term. Not usually given to girls before their periods are well established.

Implant: A single small rod (40 mm long and 2mm wide) containing a progestogen hormone is injected under the skin of the upper arm. Almost 100% effective. Lasts 3 years, then needs to be removed/replaced. Irregular bleeding can be a problem.

Intrauterine Devices: (IUD/Coil): Small plastic and copper device inserted into the womb by a doctor. Not usually recommended for young women, especially those with diabetes, as there may be an increased risk of pelvic infection. Mirena Intrauterine System (IUS): This device is like an IUD, but contains the hormone progestogen which helps to control heavy periods. Not usually recommended for women who have not had children

Progesterone-only pill (mini-Pill):

This contains only one hormone - progestogen. Taken regularly, it thickens the cervical mucus so sperm cannot easily get into the womb. It also alters the lining of the womb, making it difficult for a fertilised egg to implant.

Advantages: No increased risks for women with diabetes (even if you smoke or have diabetes complications). Easy to use. About 97% effective at preventing pregnancy. Does not interfere with love-making.

Disadvantages: Most types must be taken at exactly the same time every day. May cause irregular periods.

Some Other Methods:

Condom: Most commonly used contraceptive. About 96% effective if used carefully - but much higher failure rate when used by young, inexperienced couples. (10% pregnancy rate in 1st year of use.)

Advantages: Very important for "Safer Sex" (helps protect against sexually transmitted infections including Chlamydia and HIV) so it is important you always use a condom in addition to other types of contraception. Easy to obtain without a prescription and free from Family Planning clinics. Gives men joint responsibility for contraception.

Disadvantages: May interrupt love-making. May split or slip off and must be used very carefully to avoid high failure rate. Make sure you use emergency contraception if you think it may not have worked.

So... Don't get pregnant by mistake!

Choices: There are many choices of contraception and most are suitable for young people with diabetes. However, some hormonal contraceptives may slightly alter blood glucose levels so careful monitoring is important so that insulin can be adjusted if necessary.

In this leaflet we outline the different methods of contraception with some of their advantages and disadvantages, so you can make the best choice for you and your partner.

Remember that this is a guide. For more information you can contact your GP or local Family Planning Clinic, who will be pleased to help you choose.

Remember to tell the doctor or nurse that you have diabetes.

<u>Family planning clinics for Young People in Buckinghamshire</u>

These offer friendly telephone advice as well as booked appointments and a "drop-in" service without an appointment. All consultations are strictly confidential. As well as help with contraception, the clinics also offer advice about sensitive issues such as pregnancy and sexually transmitted diseases.

Please see website: www.sexualhealthbucks.nhs.uk/

 Aylesbury –Brookside Centre 	0844 225 2407
 Aylesbury Healthy Living Centre 	01296 334 562
Buckingham-Brook	01908 669 215
 Chalfont and Gerrard's Cross Hospital 	07717 540 966
High Wycombe Hospital	0844 225 2408
 Frogmoor-Youth Enquiry Service 	01494 437 373

Amersham and Aylesbury Colleges also have services for their students.

Emergency Contraception:

•There are now 2 types of emergency contraceptive pill: **Levonelle** can be taken up to 3 days (72 hours) after intercourse, though it is more likely to work the earlier it is taken. •**ellaOne** is a newer type of emergency contraceptive pill, which can work up to 5 days (120 hours) after intercourse. Both types are obtained free of charge from a Family Planning Clinic or GP surgery. They can also be bought over the counter or online without a prescription by women aged 16 or over.

An alternative method is the insertion of an IUD (coil), which can be used up to 5 days after intercourse. This is usually done at a Family Planning Clinic.

Hormonal Contraceptive Methods:

Combined Pill:

This contains two hormones, oestrogen and progestogen. It prevents ovulation when taken regularly. It must be prescribed by a doctor and requires regular clinic visits to check blood pressure, weight and general health. *Blood glucose levels must be monitored carefully.*

Advantages: Easy to use. About 99.9% effective at preventing pregnancy. Gives regular periods. Does not interfere with love-making.

Disadvantages: Not suitable if you smoke, have raised blood pressure, diabetic eye (retinopathy) problems, or close relatives with venous thrombosis.

Contraceptive Patch: This also contains oestrogen and progestogen and acts in the same way as the combined pill. It involves replacing a weekly patch rather than a daily tablet.