

Female Condom

The female condom, the first condom-like device designed for women, was approved by the FDA in May 1993 for sale in the US. It is a loose-fitting, pre-lubricated, 7-inch polyurethane pouch that fits into the vagina. It is a barrier method of birth control, which if used correctly, can prevent semen from being deposited into the vagina. It can also protect women against several sexually transmitted infections, including HIV, by preventing the exchange of fluids (semen, vaginal secretions, and blood) during intercourse.

EFFECTIVENESS

Studies of the Reality condom show that it provides similar protection against pregnancy as other barrier methods, such as the diaphragm. If used perfectly, 5% of women will experience a pregnancy within the first year of use. In typical use (which includes imperfect insertion and inconsistent use), 21% of couples will experience a pregnancy within the first year. The rate of breaks or tears in the female condom is less than 1%, compared to 4% with the male condom.

Like the male condom, the female condom does not provide complete protection against all sexually transmitted infections (STIs). Diseases such as herpes or HPV (genital warts) may still be transmitted by organisms on areas of the skin that are not covered by the condom.

ADVANTAGES

- A woman can use the female condom if her partner refuses to use condoms.
- The female condom provides an opportunity for women to share responsibility for the use of condoms with their partners.
- The polyurethane is less likely to cause an allergic reaction than a male latex condom and is less likely to tear.
- The female condom is available without a prescription. Unlike a diaphragm, it does not need to be fitted by a medical provider (one size fits all).
- The female condom will protect against most STIs if it is used correctly and for every act of intercourse.
- It can be inserted up to 8 hours before sex so it does not interfere with "the moment."
- The polyurethane is thin and conducts heat well so sensation is preserved.

DISADVANTAGES

- The outer ring is visible outside the vagina, which makes some women self-conscious with their partner.
- It makes crackling and popping noises during intercourse. Extra lubricant may help this problem.
- It has a higher failure rate than non-barrier methods such as oral contraceptive pills.
- It is somewhat cumbersome to insert.
- Each female condom can be used just once and is relatively expensive.

BUYING A FEMALE CONDOM

In the US the female condom is sold under the name "Reality." This same product is sold under different names in other countries. It is available without a prescription in most major drug stores, although it may be somewhat difficult to find. It is also available through the manufacturer's web site at www.femalehealth.com/. The female condom is sold in packs of 3 or 6 and costs \$2 to \$3 dollars per condom.

USING A FEMALE CONDOM

There is a flexible ring at the closed end of the thin, soft pouch. A slightly larger ring is at the open end. The ring at the closed end holds the condom in place in the vagina. The ring at the open end rests outside the vagina. If the condom is correctly placed in the vagina, it forms a "lining" against the walls of the vagina. The female condom can be inserted up to 8 hours before sex.

Do not reuse female condoms. Use a new one every time you have intercourse. Be careful not to tear the condom with fingernails or sharp objects. Female condoms should not be used simultaneously with male condoms because the friction between the two condoms may cause the condoms to break.

If a problem occurs during the use of the female condom, a woman may want to consider using emergency contraception (Plan B). Emergency contraception is available at UHS and should be taken within 120 hours after unprotected intercourse. Call UHS at 275-2662 to find out if you should take EC.

Inserting the Female Condom:

1. Find a comfortable position. You can stand with one foot on a chair, squat with your knees apart, or lie down with your legs bent and knees apart.
2. Hold the female condom with the open end hanging down. Squeeze the inner ring (at the closed end) with your thumb and middle finger and insert it into the vagina just past the pubic bone, much like a diaphragm or cervical cap. This inner ring lies at the closed end of the sheath and serves as an insertion mechanism and internal anchor. Make sure the condom is inserted straight and not twisted into the vagina.
3. The outer ring forms the external edge of the sheath and remains outside the vagina after it is inserted. Once in place, the device should cover the woman's labia and the base of the penis during intercourse.
4. During sex, it may be helpful to use your hand to guide the penis into the vagina inside the female condom. It is important that the penis is not inserted to the side of the outer ring. If the condom seems to be sticking to and moving with the penis rather than resting in the vagina, add lubricant (K-Y jelly, Surgilube, Astroglide) to the inside of the condom (near the outer ring) or to the penis.

Removing the Female Condom after Intercourse:

1. Squeeze and twist the outer ring to keep the semen inside the pouch.
2. Remove it gently before you stand up. Wrap it in a tissue and throw it away in the garbage. Do not flush it down the toilet.

SCHEDULING AN APPOINTMENT

Call 275-2662 to schedule an appointment at the University Health Service (UHS). You can schedule an appointment with your primary care provider (PCP) or with one of the women's health nurse practitioners. All visits to UHS are confidential.

LINKS

To learn more about the female condom, you can visit:

Condoms For Women

<http://www.managingcontraception.com/choices/ch-femcndm.html>

Planned Parenthood

<http://www.plannedparenthood.org/bc/bcfacts16.html>