Which birth control method is right for me?

There are many birth control options available today, and the choices can seem confusing. This list can help you decide which method would best fit your lifestyle.

### Hormonal Contraceptives

Hormonal contraceptives work by preventing release of an egg from your ovaries into the uterus, and may also make the uterus an "unfriendly" environment for sperm. While most women know about the birth control pill, there are other hormonal birth control methods that are now available.

**Nonhormonal Contraceptives**

Nonhormonal contraceptives prevent pregnancy by providing a barrier against sperm by interfering with sperm movement, or by creating an "unfriendly" environment for sperm. These methods do not use hormones, so they do not interfere with your natural reproductive cycle.

### How Effective is This Method?**

**How Many Options Are Available?**

**How Often Do I Need to Use It?**

**Are There Interruptions with this Method?**

**How Quickly Can I Get pregnant if I STOP USING IT?**

**Do I Need a Prescription from my Healthcare Professional?**

**Do I Need to See My Healthcare Professional to Start?**

**Does This Protect Against HIV and STDs?†**

<table>
<thead>
<tr>
<th>Method</th>
<th>Effectiveness</th>
<th>Options Available</th>
<th>Frequency</th>
<th>Interruptions</th>
<th>Post-Pill Pregnancy</th>
<th>Prescription Needed</th>
<th>Healthcare Professional Visit Needed</th>
<th>Protection Against HIV and STDs</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>The Patch</strong></td>
<td>Greater than 99% effective</td>
<td>Only 1 contraceptive patch available</td>
<td>Once stopped, pregnancy can occur within 1 week</td>
<td>Prescribed needed</td>
<td>Yes</td>
<td></td>
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<tr>
<td><strong>Oral Contraceptive (The Pill)</strong></td>
<td>Greater than 99% effective</td>
<td>Variety of pills available depending on dose and desired frequency of period</td>
<td>Once stopped, may take a few cycles before you can become pregnant</td>
<td>Prescription needed</td>
<td>No</td>
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<tr>
<td><strong>Implantable Contraceptive</strong></td>
<td>Greater than 99% effective</td>
<td>1 implantable contraceptive available</td>
<td>Once removed, fertility can occur within 1 week</td>
<td>Receive from healthcare professional</td>
<td>No</td>
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<tr>
<td><strong>Contraceptive Injection</strong></td>
<td>Greater than 99% effective</td>
<td>Injection available every 3 months</td>
<td>Once removed, fertility may be delayed up to a year</td>
<td>Receive from healthcare professional</td>
<td>No</td>
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<tr>
<td><strong>Progestin-Releasing IUD (IUD)</strong></td>
<td>Greater than 99% effective</td>
<td>Implant available for 3 years</td>
<td>Once removed, fertility can return within a year</td>
<td>Receive from healthcare professional</td>
<td>No</td>
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<tr>
<td><strong>Vaginal Ring</strong></td>
<td>Greater than 99% effective</td>
<td>Single ring available</td>
<td>Once stopped, may take a few cycles before you can become pregnant</td>
<td>Prescription needed</td>
<td>No</td>
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<tr>
<td><strong>Male Condom</strong></td>
<td>99% effective</td>
<td>Variety of styles, sizes, colors, materials, and textures</td>
<td>No interruptions with this method</td>
<td>Without this device, there is no protection against pregnancy</td>
<td>No</td>
<td></td>
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<tr>
<td><strong>Female Condom</strong></td>
<td>95% effective</td>
<td>Female condom available</td>
<td>No interruptions with this method</td>
<td>Without this device, there is no protection against pregnancy</td>
<td>No</td>
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<tr>
<td><strong>Intrauterine Device (IUD)</strong></td>
<td>Greater than 99% effective</td>
<td>IUD available for 5 years or less</td>
<td>No interruptions with this method</td>
<td>Without this device, there is no protection against pregnancy</td>
<td>No</td>
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<tr>
<td><strong>Spermicides</strong></td>
<td>Greater than 99% effective</td>
<td>Spermicides available in foams, jellies, creams, and vaginal suppositories</td>
<td>No interruptions with this method</td>
<td>Without this device, there is no protection against pregnancy</td>
<td>No</td>
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<tr>
<td><strong>Vaginal BARRIERS</strong></td>
<td>Greater than 99% effective</td>
<td>Vaginal caps and diaphragms available</td>
<td>No interruptions with this method</td>
<td>Without this device, there is no protection against pregnancy</td>
<td>No</td>
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<tr>
<td><strong>Cervical Cap</strong></td>
<td>Greater than 99% effective</td>
<td>Cervical caps available for women with a cervix (95% in those who have not had a child or those who have not had a hysterectomy)</td>
<td>No interruptions with this method</td>
<td>Without this device, there is no protection against pregnancy</td>
<td>No</td>
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</tbody>
</table>

*When used perfectly (both consistently and correctly).† STDs = sexually transmitted diseases.
ORTHO EVRA The convenience of once-a-week birth control

As effective as the Pill and easily fits your busy lifestyle

- Easy to remember—just once a week
- Easy to use—just peel and stick
- As discreet as you want it to be—it’s paper thin
- Stays put—even with showering, swimming, or exercising
- A patch a week for 3 weeks in a row—Week 4 is patch-free

How to apply ORTHO EVRA

Follow these simple steps:

1. Open the foil pouch by tearing it along the top edge and side edge; then, peel the foil pouch apart and open it flat.
2. Using your fingernail, lift 1 corner of the Patch and peel the Patch and the clear plastic liner off the foil pouch together. (Be careful not to accidentally remove the clear liner when you remove the Patch.)
3. Peel away half of the clear plastic liner. (Avoid touching the sticky surface of the Patch.)
4. Apply the sticky side of the Patch to the skin you have cleaned and dried; then, remove the other half of the clear liner.
5. Press down firmly on the Patch with the palm of your hand for 10 seconds, making sure that the edges stick well.
6. Run your finger around the edge of the Patch to make sure it is firmly in place.

ORTHO EVRA is indicated for the prevention of pregnancy in women who elect to use a transdermal patch as a method of contraception. Application site reaction has been reported.

Important Safety Information

Serious as well as minor side effects have been reported with the use of the Patch. Serious risks, which can be life-threatening, include blood clots, stroke and heart attacks and are increased if you smoke cigarettes. Cigarette smoking increases the risk of serious cardiovascular side effects, especially if you are over 35. Women who use the Patch are strongly advised not to smoke. Some women should not use the Patch, including women who have blood clots, certain cancers, a history of heart attack, blood clots, or stroke, as well as those who are or may be pregnant.

Hormones from ORTHO EVRA get into the blood stream and are processed by the body differently than hormones from birth control pills. You will be exposed to about 60% more estrogen if you use ORTHO EVRA than if you use a typical birth control pill containing 35 micrograms of estrogen. In general, increased estrogen may increase the risk of side effects. The risk of venous thromboembolic events (blood clots in the legs and/or the lungs) may be increased with ORTHO EVRA use compared with use of birth control pills. Studies examined the risk of these serious blood clots in women who used either ORTHO EVRA or birth control pills containing one of two progestins (levonorgestrel or norgestimate) and 30-35 micrograms of estrogen. Results of these studies ranged from an approximate doubling of risk of serious blood clots to no increase in risk in women using ORTHO EVRA compared to women using birth control pills.

You should discuss with your healthcare professional whether ORTHO EVRA is a good method of contraception for you. The Patch does not protect against HIV or sexually transmitted diseases.

Please see the Detailed Patient Labeling from the full Product Information.